



Step by Step Enrollment:

1. Pick up the “EMSC SNIP PROJECT” packet from the Department of Public Health and Social Services, Office of Emergency Medical Services (EMS) at Terlaje Building Suite 213 Hernan Cortez Avenue, Hagatna Guam 96910
2. Complete and sign the medical history forms.
3. Have the information verified by your child’s physician and return it to the Office of EMS.
4. The Medical information provided will be transferred to a personalized EMSC SNIP Medical History Card.
5. The EMSC SNIP Medical History card may be picked up at our office.
6. Keep the card readily available at home and take it with your child whenever away from home



If you have a special story you would like to share that involves the life support services provided by Guam’s Emergency Medical Technicians, please contact:

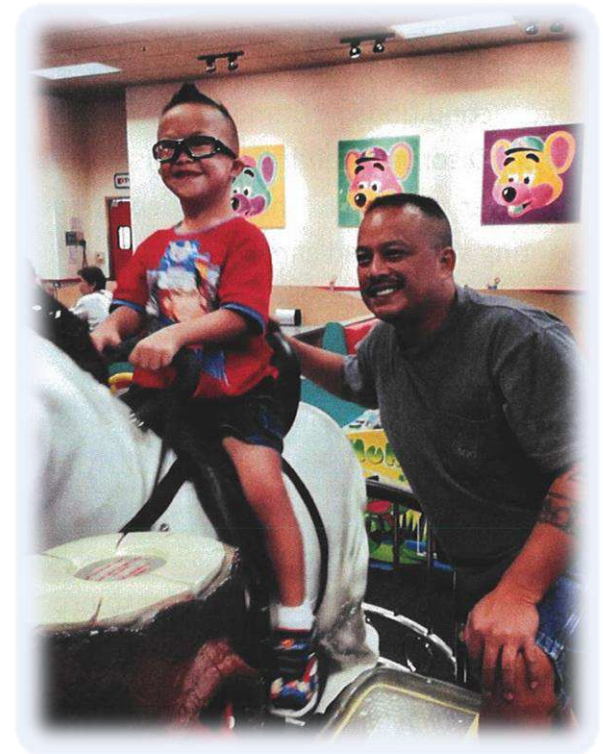
Guam Office of Emergency Medical Services
Department of Public Health and Social Services
194 Hernan Cortez Avenue, Hagatna, Guam 96910
Contact No: (671)735-7411/7412
Email: Breanna.Sablan@dphss.guam.gov
Sharon.Manibusa@dphss.guam.gov

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Guam Emergency Medical Services for Children

Special Needs Identification Project

SNIP



What is SNIP?

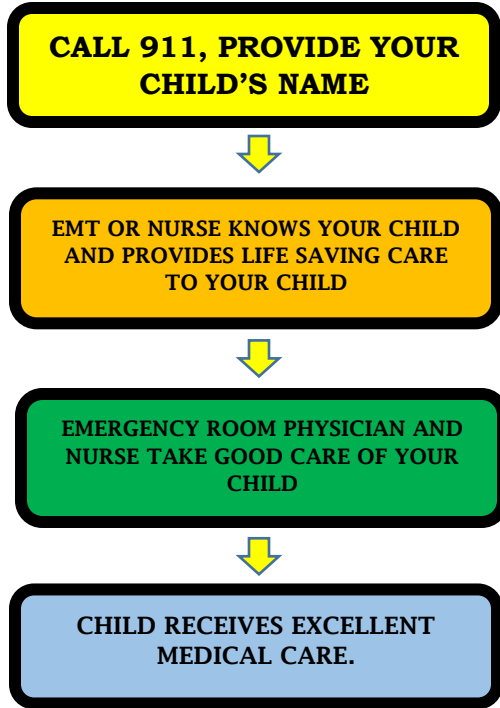
Special Needs Identification Program

A pre-hospital notification system for EMT's, Nurses, and Physicians designed to improve pre-hospital emergency medical care for children with special health care needs and other pre-existing conditions.

Purpose:

To ensure the emergency medical technicians, the school nurses, the public health nurses and physicians, and the emergency room nurses and physicians, are aware of your child's special health needs in order to provide special medical care and attention to your child during lifesaving emergencies.

What happens to my child during an emergency as a SNIP?



In an Emergency:

1. CALL 911. EMS PROVIDERS WILL BE DISPATCHED TO YOUR LOCATION
2. HAVE THE EMSC SNIP MEDICAL HISTORY CARD READY AND IMMEDIATELY PROVIDE IT TO THE EMERGENCY MEDICAL TECHNICIAN (EMT) WHEN THEY ARRIVE
3. THE EMTS WILL GATHER ALL THE INFORMATION NEEDED FROM THE CARD TO IMMEDIATELY TRANSPORT YOUR CHILD TO THE EMERGENCY DEPARTMENT.



PICK UP APPLICATION FROM
EMS OFFICE
194 HERNAN CORTEZ,
AVENUE, HAGATNA SUITE
213

PHYSICIAN
SIGNATURE



PARENT
SIGNATURE

SUBMIT APPLICATION FORM TO
EMS OFFICE
194 HERNAN CORTEZ, ACENUE,
HAGATNA SUITE 213

SNIP
REGISTRY-
INFORMATIO
N SHARED
WITH E911,
NEAREST
FIRESTATION,
CHILD'S
SCHOOL,
GMHA-ER



ELECTRONIC
HEALTH
RECORD-
CONFIDENTIA
L, HIPPA
COMPLIA-
NCE,
ENCRYPTED
INFORMATION

SNIP REGISTRY PARTNERS:
EMS OFFICE, DEPARTMENT
OF EDUCATION NURSES,
PUBLIC HEALTH NURSES
AND PHYSICIANS, HEALTH
CARE PROVIDERS

911
GFD

GMHA-
ER