



**EMS Information Bulletin 2019-01**

**DATE:** March 25, 2019

**SUBJECT:** Drowning and near drowning event reporting for PA Public Bathing Place  
Regulated Facilities

**TO:** EMS Providers  
EMS Agencies

**FROM:** Dylan Ferguson, Director  
Bureau of Emergency Medical Services  
PA Department of Health  
(717) 787-8740

A handwritten signature in black ink, appearing to be "Dylan Ferguson", enclosed within a hand-drawn oval.

The Centers for Disease Control and Prevention (CDC) reports that drowning is the leading cause of death in the United States for children between the ages of 1 and 4.

To assist in protecting the health and safety of all Pennsylvania citizens and the public, the Bureau of EMS (Bureau) is collaborating with the Bureau of Community Health Systems (BCHS) to investigate drowning and near drowning events within the commonwealth, as required by BCHS policy. BCHS needs to be notified whenever a drowning or near drowning event occurs at a state-regulated facility, so an Environmental Health Specialist can complete an operational inspection.

The Bureau is asking EMS agencies to complete the attached form within 72 hours of a drowning or near drowning event and fax or e-mail a copy of the form so BCHS can initiate the inspection process.

Please do not hesitate to contact Richard Pugh from BCHS at 717-736-7393 or at [ripugh@pa.gov](mailto:ripugh@pa.gov) if there are any questions or issues related to this request or form.

***\*\*This EMSIB supersedes and rescinds previously issued EMSIB 2017-07 Drowning and near drowning event reporting.\*\****



**REPORT FORM FOR DROWNING / NEAR DROWNING CALLS**

**FAX FORM TO 717-783-4790 or e-mail to [ripugh@pa.gov](mailto:ripugh@pa.gov)**

**Date of Call:** \_\_\_\_\_

**Location Type:** \_\_\_\_\_  
(i.e. Home Owners Association, Public Pool, Hotel, School, Beach)

**Facility Name:** \_\_\_\_\_

**Facility Address:** \_\_\_\_\_

**County:** \_\_\_\_\_

**Municipality:** \_\_\_\_\_

**Please provide the following information if available:**

**Person reporting:** \_\_\_\_\_

**Contact Phone Number:** \_\_\_\_\_

**Questions regarding the completion of this form can be directed to:**

Richard Pugh at 717-736-7393 or via e-mail at [ripugh@pa.gov](mailto:ripugh@pa.gov)