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DEMDataSet
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DemographicReport [ATTRIBUTES: timeStamp="1996-04-16T05:25:02+07:00"]
        dAgency
             dAgency.01 - EMS Agency Unique State ID 1
             dAgency.02 - EMS Agency Number c
             dAgency.03 - EMS Agency Name ev
             dAgency.04 - EMS Agency State 49 - Utah
             dAgency.AgencyServiceGroup
                 dAgency.05 - EMS Agency Service Area States 49 - Utah
                 dAgency.06 - EMS Agency Service Area County(ies) 49051 - Wasatch
                 dAgency.07 - EMS Agency Census Tracts 48238554339
                 dAgency.08 - EMS Agency Service Area ZIP Codes 31723-74724
             dAgency.09 - Primary Type of Service 9920017 - Community Paramedicine
             dAgency.10 - Other Types of Service 9920015 - Rescue
             dAgency.11 - Level of Service 9917009 - First Responder
             dAgency.12 - Organization Status 1016005 - Volunteer
             dAgency.13 - Organizational Type 9912001 - Fire Department
             dAgency.14 - EMS Agency Organizational Tax Status 1018001 - For Profit
             dAgency.AgencyYearGroup
                 dAgency.15 - Statistical Calendar Year 2031
                 dAgency.16 - Total Primary Service Area Size 3423426
                 dAgency.17 - Total Service Area Population 1242558
                 dAgency.18 - 911 EMS Call Center Volume per Year 3898156
                 dAgency.19 - EMS Dispatch Volume per Year 626919
                 dAgency.20 - EMS Patient Transport Volume per Year 3392467
                 dAgency.21 - EMS Patient Contact Volume per Year 2578782
                 dAgency.22 - EMS Billable Calls per Year 3593981
             dAgency.23 - EMS Agency Time Zone 1027017 - GMT-11:00 Midway Island, Samoa
             dAgency.24 - EMS Agency Daylight Savings Time Use 9923001 - No
             dAgency.25 - National Provider Identifier ikRXd83ofz
             dAgency.26 - Fire Department ID Number C
             dContact.ContactInfoGroup
                 dContact.01 - Agency Contact Type 1101017 - Other (Not Listed)
                 dContact.02 - Agency Contact Last Name U
                 dContact.03 - Agency Contact First Name h
                 dContact.04 - Agency Contact Middle Name/Initial 7
                 dContact.05 - Agency Contact Address [ATTRIBUTES: StreetAddress2="E"] i
                 dContact.06 - Agency Contact City 52144 - Monticello
                 dContact.07 - Agency Contact State 49 - Utah
                 dContact.08 - Agency Contact ZIP Code 84535
                 dContact.09 - Agency Contact Country US
                 dContact.10 - Agency Contact Phone Number [ATTRIBUTES: PhoneNumberType="9913007 - Pager"] 650-347-7030
                 dContact.11 - Agency Contact Email Address [ATTRIBUTES: EmailAddressType="9904003 - Work"] kZOyQiXW@tgLo.com
                 dContact.12 - EMS Agency Contact Web Address VGr
                 dContact.EMSMedicalDirectorGroup
                      dContact.13 - Agency Medical Director Degree 1113001 - Doctor of Medicine
                      dContact.14 - Agency Medical Director Board Certification Type 1114009 - Emergency Medicine
                      dContact.15 - Medical Director Compensation 1115003 - Non-Compensated
                      dContact.16 - EMS Medical Director Fellowship Trained Status 9923001 - No
        dConfiguration
             dConfiguration.ConfigurationGroup
                 dConfiguration.01 - State Associated with the Certification/Licensure Levels PY
                 dConfiguration.02 - State Certification Licensure Levels 9911005 - 2009 Emergency Medical Technician
                 dConfiguration.03 - Procedures Permitted by the State 311511001 - Executive functions training (regime/therapy)
                 dConfiguration.04 - Medications Permitted by the State 361807 - Albuterol Inhalant Solution [Ventolin Easi-Breathe]
                 dConfiguration.05 - Protocols Permitted by the State 9914003 - Airway-Failed
                 dConfiguration.ProcedureGroup
                      dConfiguration.06 - EMS Certification Levels Permitted to Perform Each Procedure 9917013 - EMT-Intermediate
                      dConfiguration.07 - EMS Agency Procedures 252728003 - Sleep electroencephalogram in sleep-deprived patient (procedure)
                 dConfiguration.MedicationGroup
                      dConfiguration.08 - EMS Certification Level Permitted to Administer Each Medication 9917011 - EMT-Basic
                      dConfiguration.09 - EMS Agency Medications 905411 - Uni Serp (hydrALAZINE hydrochloride 25 MG / HCTZ 15 MG / reserpine
0.1 MG) Oral Tablet
                 dConfiguration.10 - EMS Agency Protocols 9914119 - Medical-Diarrhea
                 dConfiguration.11 - EMS Agency Specialty Service Capability 1211019 - None
                 dConfiguration.12 - Billing Status 9923003 - Yes
                 dConfiguration.13 - Emergency Medical Dispatch (EMD) Provided to EMS Agency Service Area 1213003 - Yes, 100% of the EMS
Agency's Service Area
                 dConfiguration.14 - EMD Vendor Ry
                 dConfiguration.15 - Patient Monitoring Capability(ies) 1215005 - ECG-12 Lead or Greater
                 dConfiguration.16 - Crew Call Sign z
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dConfiguration.17 - Dispatch Center (CAD) Name or ID UV
dLocation
    dLocation.LocationGroup
         dLocation.01 - EMS Location Type 1301003 - EMS Staging Area
         dLocation.02 - EMS Location Name mm
        dLocation.03 - EMS Location Number V
        dLocation.04 - EMS Location GPS 41.300877,-111.946406
        dLocation.05 - EMS Location US National Grid Coordinates 12TNM68564956
        dLocation.06 - EMS Location Address O
        dLocation.07 - EMS Location City 58297 - Ogden
        dLocation.08 - EMS Location State 49 - Utah
        dLocation.09 - EMS Station or Location ZIP Code 84412
        dLocation.10 - EMS Location County 49057 - Weber
        dLocation.11 - EMS Location Country US
         dLocation.12 - EMS Location Phone Number [ATTRIBUTES: PhoneNumberType="9913007 - Pager"] 383-426-4113
dVehicle
    dVehicle.VehicleGroup
         dVehicle.01 - Unit/Vehicle Number 7
        dVehicle.02 - Vehicle Identification Number fZ4fpRV7xekVeemEn
        dVehicle.03 - EMS Unit Call Sign K
        dVehicle.04 - Vehicle Type 1404015 - Personal Vehicle
         dVehicle.VehicleCertificationLevelsGroup
             dVehicle.05 - Crew State Certification/Licensure Levels 9917013 - EMT-Intermediate
             dVehicle.06 - Number of Each EMS Personnel Level on Normal 911 Ambulance Response 8
             dVehicle.07 - Number of Each EMS Personnel Level on Normal 911 Response (Non-Transport) Vehicle 9
             dVehicle.08 - Number of Each EMS Personnel Level on Normal Medical (Non-911) Transport Ambulance 11
        dVehicle.09 - Vehicle Initial Cost 8107060
        dVehicle.10 - Vehicle Model Year 1912
        dVehicle.YearGroup
             dVehicle.11 - Year Miles/Kilometers Hours Accrued 1956
             dVehicle.12 - Annual Vehicle Hours 1048
             dVehicle.13 - Annual Vehicle Miles/Kilometers [ATTRIBUTES: DistanceUnit="9929001 - Kilometers"] 71.0
dPersonnel
    dPersonnel.PersonnelGroup
         dPersonnel.NameGroup
             dPersonnel.01 - EMS Personnel's Last Name V
             dPersonnel.02 - EMS Personnel's First Name W
             dPersonnel.03 - EMS Personnel's Middle Name/Initial O
         dPersonnel.AddressGroup
             dPersonnel.04 - EMS Personnel's Mailing Address 0
             dPersonnel.05 - EMS Personnel's City of Residence 58585 - Sandy
             dPersonnel.06 - EMS Personnel's State 49 - Utah
             dPersonnel.07 - EMS Personnel's ZIP Code 84092
             dPersonnel.08 - EMS Personnel's Country US
         dPersonnel.09 - EMS Personnel's Phone Number [ATTRIBUTES: PhoneNumberType="9913007 - Pager"] 453-451-5161
         dPersonnel.10 - EMS Personnel's Email Address [ATTRIBUTES: EmailAddressType="9904001 - Personal"] qSaA2dJA@V8fR.com
         dPersonnel.11 - EMS Personnel's Date of Birth 1966-06-02
         dPersonnel.12 - EMS Personnel's Gender 9906003 - Male
        dPersonnel.13 - EMS Personnel's Race 1513001 - American Indian or Alaska Native
         dPersonnel.14 - EMS Personnel's Citizenship Jg
         dPersonnel.15 - EMS Personnel's Highest Educational Degree 1515003 - Nursery School to 4th Grade
        dPersonnel.16 - EMS Personnel's Degree Subject/Field of Study 1516067 - Theology and Religious Vocations
        dPersonnel.17 - EMS Personnel's Motor Vehicle License Type 1517019 - Pilot-Fixed Wing Air
         dPersonnel.ImmunizationsGroup
             dPersonnel.18 - EMS Personnel's Immunization Status 9910007 - Hemophilus Influenza B
             dPersonnel.19 - EMS Personnel's Immunization Year 1936
        dPersonnel.20 - EMS Personnel's Foreign Language Ability arm - Armenian
         dPersonnel.21 - EMS Personnel's Agency ID Number me
         dPersonnel.LicensureGroup
             dPersonnel.22 - EMS Personnel's State of Licensure 7U
             dPersonnel.23 - EMS Personnel's State's Licensure ID Number BN
             dPersonnel.24 - EMS Personnel's State EMS Certification Licensure Level 9925035 - Community Paramedicine
             dPersonnel.25 - EMS Personnel's State EMS Current Certification Date 2008-07-19
             dPersonnel.26 - EMS Personnel's Initial State's Licensure Issue Date 1976-09-17
             dPersonnel.27 - EMS Personnel's Current State's Licensure Expiration Date 1954-04-04
         dPersonnel.28 - EMS Personnel's National Registry Number R0444335
        dPersonnel.29 - EMS Personnel's National Registry Certification Level 1529003 - 2009 Emergency Medical Responder (EMR)
         dPersonnel.30 - EMS Personnel's Current National Registry Expiration Date 1983-03-28
         dPersonnel.31 - EMS Personnel's Employment Status 1531005 - Volunteer
         dPersonnel.32 - EMS Personnel's Employment Status Date 1973-09-02
        dPersonnel.33 - EMS Personnel's Hire Date 1990-09-08
         dPersonnel.34 - EMS Personnel's Primary EMS Job Role 1534001 - Administrator/Manager
         dPersonnel.35 - EMS Personnel's Other Job Responsibilities 1534001 - Administrator/Manager
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dPersonnel.36 - EMS Personnel's Total Length of Service in Years 29
         dPersonnel.37 - EMS Personnel's Date Length of Service Documented 1999-03-01
         dPersonnel.CertificationLevelGroup
              dPersonnel.38 - EMS Professional's Practice Level 9925017 - EMT-Intermediate
              dPersonnel.39 - Date of Professional's Certification or Licensure for Agency 2000-06-16
dDevice
    dDevice.DeviceGroup
         dDevice.01 - Medical Device Serial Number lm
         dDevice.02 - Medical Device Name or ID my
         dDevice.03 - Medical Device Type 1603023 - Other (Not Listed)
         dDevice.04 - Medical Device Manufacturer HV
         dDevice.05 - Medical Device Model Number zq
         dDevice.06 - Medical Device Purchase Date 1998-10-15
dFacility
    dFacilityGroup
         dFacility.01 - Type of Facility 1701001 - Assisted Living Facility
         dFacility.FacilityGroup
              dFacility.02 - Facility Name 61
              dFacility.03 - Facility Location Code a9
             dFacility.04 - Hospital Designations 9908007 - Hospital (General)
             dFacility.05 - Facility National Provider Identifier mrzS5ayebV
             dFacility.06 - Facility Room, Suite, or Apartment x
             dFacility.07 - Facility Street Address [ATTRIBUTES: StreetAddress2="Z"] m
             dFacility.08 - Facility City 76590 - Charleston
             dFacility.09 - Facility State 49 - Utah
              dFacility.10 - Facility ZIP Code 84032
              dFacility.11 - Facility County 49051 - Wasatch
              dFacility.12 - Facility Country US
             dFacility.13 - Facility GPS Location 40.401780,-111.246300
             dFacility.14 - Facility US National Grid Coordinates 17SCT23977817
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