



## **SGAUS EXPERT MEDICAL BADGE APPLICATION**

1.	Last N	lame First Name MI MI		
2.	Rank	Professional Suffix (MD, RN, EMT-P, etc.)		
3.	Mailin	g Address: Street Address		
4.	City _	State ZIP		
5.	Email Address			
6.	. Active Membership in a State Defense Force yes no			
	a.	Which State or Territory? Rank		
	b.	Official Name of Your State Defense Force		
7.	Medica	al Background and/or position in a medical unit		
	a.	Physician with active license: M.D D.O State of license		
	b.	Mid-level provider active license: A.P.R.N P.A C.R.N.A State of license		
	c.	Nurse active license: R.N L.V.N State of license		
	d.	Another Medical Professional: DDS Clinical Psychologist Licensed Clinical		
		Counselor DVM Physical Therapist Pharmacist or PharmD		
		Occupational Therapist Behavioral Health State of license		
	e.	Paramedic or EMT: Level State		
	f.	Support personnel <b>primarily assigned</b> to an SDF Medical Unit: Position		
		Unit		
		Candidate must include a copy of their active license or certificate		
8.	Current CPR qualification: Candidate must provide a copy of an active CPR or BLS card or			
	certific	ate from a recognized organization, i.e. American Red Cross or American Heart		
	Associa	ation.		
9.	Evidend	ce of prior completion of <b>one of the following</b> :		
		Physician or Mid-level provider: ACLS ATLS PALS		
	b.	Nurse (R.N. or L.V.N.): Trauma Nursing Core Course (TNCC) or Equivalent approved by		
		SGAUS Medical Academy Chairman		

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	C.	EMT or Paramedic and other Health Professionals:		
		Pre-Hospital Trauma Life Support (PHTLS)		
		International Trauma Life Support (ITLS)		
		Tactical Combat Casualty Care Course (TCCC)		
	d.	Other support personnel primarily assigned to SDF Medical Unit:		
		SGAUS Combat Life Saver Course (being developed):		
		Candidate must supply a copy of the certificate of card showing completion of the		
		appropriate course. Note: the course does not have to be current.		
10.	Succes	sful Completion of the SGAUS Field Casualty Course (FCC) or an SDF Equivalent Course as		
	directe	ed by the SDF Commanding General and approved as equivalent by the SGAUS Medical		
	Acade	my Chairman or SGAUS Surgeon. Such a course should be completed over a weekend and		
	contai	n training in at least 6 skill sets from the US Army Combat Lifesaver course or Tactical		
	Comba	at Casualty course and contain a land navigation or map reading component and a written		
	examii	nation. Candidate must supply a copy of a certificate of completion of such course or		
	other o	documentation of successful course completion.		
11.	The ca	ndidate must include a letter from a senior officer in his SDF Chain of Command stating		
		e individual currently meets the height, weight, and fitness requirements of his/her State		
		se Force.		
12		ndidate must be a current member of SGAUS and have previously been awarded the Basic		
		y Emergency Management Specialist Badge (Basic MEMS).		
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Once al	l requir	ements are completed, this form and accompanying documentation should be submitted		
to:				
LTC(IN)	Julian l	Jngar-Sargon		
Julian.ungar@igr.in.gov				

Once the completed application is reviewed and approved by the SGAUS Medical Academy Chairman, a formal certificate will be sent to the awardee.