

# Application form – General approval (emergency first aid) – Initial application

January 2022

## Information about this application form

This application form is to be used to apply for a general approval for **emergency first aid** under section 75 of the *Medicines and Poisons Act 2019 (MPA)*.

Persons who have previously held an approval under the *Health (Drugs and Poisons) Regulation 1996 (HDPR)* for 'Emergency first aid', or an approval for a 'commercial paramedic service', should use this form.

For persons seeking to provide treatment of patients in non-emergency situations at isolated locations, such as mine sites or island resorts, please see the [Application form – General approval \(acute health conditions at isolated sites\) – Initial application](#).

### First aid providers

Under schedule 5, part 2 of the *Medicines and Poisons (Medicines) Regulation 2021 (MPMR)*, a first aid provider (a person who has a current certificate granted by a registered training organisation for the provision of first aid) **does not** require a general approval under the MPA to purchase and administer an adrenaline (epinephrine) autoinjector, an S3 inhaled asthma reliever, or naloxone, provided the person has completed the relevant training.

In addition, a first aid provider that has completed training provided by a registered training organisation in the use and administration of methoxyflurane **does not** require a general approval to possess and administer methoxyflurane, however the administration must be on a prescription from a prescriber (e.g. medical practitioner or nurse practitioner) and a prescriber must purchase the medicine for the first aid provider.

### Mine sites

Mine sites **do not** require a general approval under the MPA to buy and administer S4 inhaled analgesics, such as nitrous oxide or methoxyflurane, as under schedule 13, part 6, division 2 of the MPMR, a mine manager (person in charge of a mine) may give a purchase order to buy stock of an S4 inhaled analgesic for first aid treatment of persons at the mine.

Under schedule 13, part 6, division 3 of the MPMR, a first aid provider employed at a mine who has completed training from a registered training organisation about using an S4 inhaled analgesic, may possess and administer the medicine for the first aid treatment of a person at the mine. If the medicine is methoxyflurane, the first aid provider may administer one dose of no greater than 3 millilitres. Higher or subsequent doses must only be administered on the prescription of a medical practitioner or nurse practitioner.

Where a mine does not meet these conditions, or is seeking additional medicines, a general approval granted by Queensland Health under the MPA is required. Check with Healthcare Approvals and Regulation Unit (HARU) via [HARU@health.qld.gov.au](mailto:HARU@health.qld.gov.au) if you are unsure.



# Scope of a general approval for emergency first aid

The holder of a substance authority, including a person acting under a substance authority, is authorised to carry out a regulated activity with a regulated substance in the authorised way (ss31 and 62 of the MPA). A *general approval* is a type of substance authority that may be granted under the MPA (ss61 and 68 of the MPA).

## Purpose of general approvals for emergency first aid

A general approval for emergency first aid authorises the holder (including persons stated in the approval to be acting for the approval holder) to carry out the following regulated activities with the regulated substances (medicines) stated in the approval, at an authorised site, being place at which an event notified to the chief executive of Queensland Health (or delegate) by the approval holder takes place, or a place stated in the approval (schedule 16, part 2 of the MPMR):

1. A medical practitioner or nurse practitioner working for the approval holder to give a purchase order to buy stock of the medicines stated in the approval.
2. A senior person at an authorised site (being the person responsible for daily operations at the site – defined in schedule 16, part 2 of the MPMR) working for the approval holder, to possess stock of the medicines at the site.
3. A paramedic working at an authorised site to possess and administer an emergency medicine (defined in schedule 16, part 2 of the MPMR as: adrenaline (epinephrine), atropine, benztropine, ceftriaxone, furosemide (frusemide), glucagon, glyceryl trinitrate, hydrocortisone, ipratropium bromide monohydrate, lidocaine (lignocaine), methoxyflurane, metoclopramide, midazolam, morphine, naloxone, nitrous oxide, promethazine or salbutamol) on a standing order or oral prescription from a medical practitioner or nurse practitioner.
4. A registered nurse working at an authorised site, to possess and administer an emergency medicine on a standing order or oral prescription from a medical practitioner or nurse practitioner (this is in addition to a registered nurse’s authority to administer medicines generally).
5. A first aid provider working at an authorised site, to possess and administer glyceryl trinitrate on prescription from a medical practitioner or nurse practitioner (this is in addition to a first aid provider’s authority to possess and administer an adrenaline (epinephrine) autoinjector, an S3 inhaled asthma reliever, naloxone or methoxyflurane, where the first aid provider has completed the relevant training, and for methoxyflurane, the medicine is administered on a prescription)<sup>1</sup>.
6. A paramedic to dispose of waste from an emergency medicine that is a diversion-risk medicine in the authorised way

Note: registered nurses are authorised as ‘approved persons’ under schedule 7, part 3, division 2 to dispose of diversion-risk medicines.

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<sup>1</sup> See Schedule 5, Part 2 of the MPMR for first aid providers’ authorities

## What this class of approval does not authorise

A general approval for emergency first aid **does not** authorise:

- the use of any medicines obtained under the approval for ongoing primary health care or non-emergency medical clinics;
- an approval holder supplying a treatment dose of a medicine for a patient to use at a later time;
- an approval holder providing medical treatment at sites that hold a Royal Flying Doctor Service (**RFDS**) medicine chest;
- the possession and use of any medicines at any location other than a place stated in the approval or a place where an event notified to the chief executive of Queensland Health (or delegate) takes place.

## Requirements and conditions

### Authorised way – section 31 of the MPA

All substance authorities are subject to the requirements and standard conditions specified in the relevant regulation, in this case the MPMR, that applies to that type of substance authority, and any additional or varied conditions specified on the substance authority. These conditions may limit or specify how the regulated activities must be carried out.

Any person carrying out a regulated activity with a regulated substance must do so in the authorised way and a person to whom a substance authority applies must comply with the conditions of the authority. Failure to comply with these requirements may result in regulatory action being taken, including prosecution, which may attract a significant penalty.

### Requirements and standard conditions for general approvals for emergency first aid

Unless stated otherwise in the approval, the following requirements and standard conditions described in sections 70 and 91 of the MPA and prescribed in the following chapters of the MPMR, apply to general approvals for emergency first aid:

- chapter 3 of the MPMR ‘Standard conditions for substance authorities’ – part 5 ‘General approvals’, division 2 ‘Emergency first aid’ and part 6 ‘All substance authorities’
  - chapter 4 of the MPMR ‘General requirements for dealings’ – part 3 ‘Buying by giving purchase orders’, part 6 ‘Prescribing medicines’, part 7 ‘Making standing orders’, part 10 ‘Administering medicines’ and part 11 ‘Disposing of waste from diversion-risk medicines’ and
  - chapter 8 of the MPMR ‘Offences’ – part 2 ‘Secure storage systems’, part 4 ‘Recording and keeping information’, and part 5 ‘Reporting particular matters’.
1. The approval holder must appoint a medical practitioner or nurse practitioner who is appropriately qualified to oversee the dealings authorised under the approval (s34 of the MPMR).

2. The approval holder must ensure a medical practitioner or nurse practitioner is available to be contacted when a first aid provider, paramedic or registered nurse is attending an authorised site or authorised event for the holder (s36 of the MPMR).
3. The approval holder must give notice to the chief executive of Queensland Health (or delegate) in the approved form if a first aid provider, paramedic or registered nurse intends to attend an event under the approval no less than 2 business days before the event happens (s36 of the MPMR).
4. For buying stock of a medicine, the general approval holder and persons acting under the approval must comply with the requirements stated in chapter 4, part 3 of the MPMR 'Buying by giving purchase orders'.
5. For prescribing a medicine, the approval holder and persons acting under the general approval must comply with the requirements stated in chapter 4, part 6 of the MPMR 'Prescribing medicines'.
6. For making standing orders, the approval holder and persons acting under the general approval must comply with the requirements stated in chapter 4, part 7 of the MPMR 'Making standing orders'.
7. For administering a medicine, the approval holder and persons acting under the general approval must comply with the requirements stated in chapter 4, part 10 of the MPMR 'Administering medicines', including attempting to contact a prescriber in the first instance before administering a medicine on a standing order other than in urgent situations requiring immediate treatment of a patient (s107 MPMR).
8. For disposing of waste from a diversion-risk medicine, the approval holder and persons acting under the general approval must comply with the requirements stated in chapter 4, part 11 of the MPMR 'Disposing of waste from diversion-risk medicines'.
9. The approval holder and persons acting under the general approval must securely store medicines in accordance with the requirements stated in chapter 8, part 2 of the MPMR 'Secure storage systems'.
10. The approval holder and persons acting under the general approval must establish and maintain a medicines register, to track all the regulated activities with medicines under the substance authority until medicines are completely used or destroyed, in accordance with chapter 8, part 2, division 3 of the MPMR 'Medicines registers'.
11. Where an approval holder, or a person acting under the general approval, reasonably suspects a diversion-risk medicine has been lost or stolen, the holder must give notice about the incident to the chief executive of Queensland Health (or delegate) in the approved form and notify the Queensland Police Service about the incident as soon as practicable, but no later than the end of the next business day after the incident (s226 of the MPA).
12. The approval holder must ensure any records required to be kept under the MPA in relation to an authorised place stated in the authority are available for inspection from the place, and if the records are kept electronically, the approval holder must ensure the records for each authorised place stated in the substance authority are available for inspection from the primary place of business of the approval holder (s41 of the MPA).
13. Where a record must be made or kept, approval holders must take all reasonable steps to ensure (s224 of the MPMR):

- a. the record is kept in a retrievable form, and is kept securely to ensure it cannot be altered, obscured, deleted or removed without detection; and
  - b. the record is kept for a period of two years after it is made, or for a medicine register, for two years after the last entry in the register is made.
14. The approval holder must give notice to the chief executive of Queensland Health (or delegate) in the approved form if any of the following changes are proposed by the approval holder (s42 of the MPMR):
- a. a change to an authorised place stated in the substance authority;
  - b. a change to a relevant person stated in the substance authority (such as a medical practitioner, nurse practitioner or senior person at an authorised site); and
  - c. another change to the approval holder's circumstances that substantially affects the holder's ability to comply with a condition of the substance authority.
15. Where the approval holder proposes to stop carrying out a dealing with a medicine under a substance authority, the holder must give the chief executive of Queensland Health (or delegate) a notice in the approved form stating the following information (s43 of the MPMR):
- a. the day the dealing is proposed to stop;
  - b. the amount of medicines that are likely to be unused on that day, if any; and
  - c. how the approval holder proposes to deal with any unused medicines.

## Common additional conditions

Under section 70 of the MPA, a substance authority is subject to a condition (a standard condition) prescribed by regulation to apply in relation to the substance authority and any additional or changed condition decided by the chief executive of Queensland Health (or delegate).

A commonly imposed additional condition for general approvals (emergency first aid) is for approval holders to notify the chief executive or Queensland Health (or delegate) of medicines usage throughout the previous 3 months (in the approved form).

Entities granted an approval should review their approval instrument carefully to ensure that any changed or additional conditions are met.

# Information about general approvals for emergency first aid

## Supervision

In compliance with section 32 of the MPMR, holders of general approvals for emergency first aid must appoint a medical practitioner or nurse practitioner specialising in emergency medicine to oversee the activities authorised under the approval. Specialist practitioners are also responsible for 'credentialing' staff, i.e. that each qualified first responder, paramedic and registered nurse has demonstrated (and continues to demonstrate) the necessary competence (skills and knowledge) and training to perform the tasks related to scheduled medicines that may be allocated to them by the approval holder.

A medical practitioner or nurse practitioner must purchase the medicines on behalf of the approval holder, give prescriptions to administer medicines and where deemed suitable, make standing orders.

Further, in compliance with chapter 3, part 5, section 33 of the MPMR, the holder of the general approval must take all reasonable steps to ensure that a medical practitioner or nurse practitioner is available to be contacted when a dealing is carried out under the approval, e.g. to provide prescriptions to first aid providers, paramedics and registered nurses providing treatment under the approval at any time services are being provided.

## Standing orders

As per section 104(2)(b) and schedule 16, part 2 of the MPMR, general approvals for emergency first aid allow for the use of standing orders: an authorised prescriber may make a standing order under an approval and a paramedic or a registered nurse may administer an emergency medicine on a standing order made under the approval (or on an oral prescription). Standing orders must be made by a supervising medical practitioner or nurse practitioner in accordance with the requirements of chapter 4, part 7 of the MPMR 'Making standing orders'.

A separate standing order is required for each medicine and each standing order must contain the information specified in section 106, such as the class of person who may administer the medicine, medical conditions to which the order applies, the circumstances in which the medicine may be administered, and the recommended dose or dose range for the circumstances.

In addition to the standard content, standing orders for general approvals for emergency first aid must contain additional content in accordance with section 107 of the MPMR. **The prescriber must state in the standing order that a person proposing to administer a medicine under the order must first attempt to contact the prescriber or another person authorised to prescribe the medicine, before administering the medicine**, except in urgent situations requiring immediate treatment of a patient. This additional content is not required however for standing orders for adrenaline (epinephrine), glyceryl trinitrate, glucagon, naloxone, nitrous oxide, methoxyflurane, or salbutamol.

Standing orders must be available for any person who may administer a medicine under the order as well as the other persons mentioned in section 108 of the MPMR. As soon as practicable after administering a medicine under a standing order, the paramedic or registered nurse must make and keep a record of the particulars specified in section 141 of the MPMR.

## Substance management plans – chapter 4, part 2 of the MPA

A substance management plan (**SMP**) is a document setting out how known and foreseeable risks associated with any regulated activity with a regulated substance are to be managed at a regulated place (section 92 of the MPA). Applicants for general approvals for emergency first aid must have an SMP that meets the requirements specified in section 93 of the MPA and in the [Departmental standard: Substance management plans for medicines](#) under the MPMR, detailing what governance is in place to ensure that medicines will be managed effectively. A [guideline for developing an SMP for medicines](#) is available on the Queensland Health website.

To provide sufficient time for approval holders to comply with this new requirement, **an SMP is not required until 1 year after the commencement of the MPA**, i.e. 27 September 2022 (s280 MPA). Despite this, applicants should be able to demonstrate how they intend to manage and mitigate risks, by having in place appropriate procedures and protocols – as was required under the HDPR. [Read more about SMPs for medicines.](#)

## Duration of approvals

Section 69 of the MPA provides that the chief executive of Queensland Health (or delegate) determines the duration of a granted substance authority. General approvals for emergency first aid will usually be granted for two years, but a shorter term may be granted if requested or if the chief executive of Queensland Health (or delegate) determines that a shorter period is appropriate.

## Change of name, location or circumstances

Substance authorities are not transferable across different entities. Accordingly, substance authority holders must notify Queensland Health if the authorised entity intends to change their name or ACN/ABN; change premises; or has another change in circumstances during the term of the substance authority, because this may mean that the authority is no longer valid. If the change is due to a change in ownership of the entity, or the chief executive of Queensland Health (or delegate) otherwise considers the change to be substantial, a new application will likely be required; in other circumstances, an amendment application may be required.

# Applying for a general approval

In determining the application, the matters described in section 76 of the MPA may be taken into consideration.

Queensland Health assesses all information relevant to an application including:

- prior compliance history;
- background, skills and qualifications of persons who will be responsible for overseeing activities to be carried out or will have access to regulated substances;
- which regulated substances are to be included in the substance authority;
- proposed activities and locations where regulated substances are to be used and stored; and
- the documented governance arrangements in place relevant to the substance authority.

An inspection of the premises may also be undertaken.

All applications are assessed individually, and there is no guarantee that a substance authority will be granted to any applicant.

Under chapter 3, part 3, division 4 of the MPA, applications are decided within 90 days of the application (final consideration day – section 86 of the MPA), or the latest day the chief executive of Queensland Health (or delegate) receives information from the applicant (section 89 of the MPA), unless a later date is agreed (s88 of the MPA). Applications not decided by this time are taken to have been refused (s89(4) of the MPA).

To apply, submit via email the **attached** application form, accompanied by all supporting documents (certified where required), to:

The Chief Executive, Queensland Health  
c/o Healthcare Approvals and Regulation Unit (HARU)  
[medicines.applications@health.qld.gov.au](mailto:medicines.applications@health.qld.gov.au)

**INITIAL APPLICATION FOR A GENERAL APPROVAL  
(EMERGENCY FIRST AID)**

**Privacy statement – please read carefully**

Personal information collected by Queensland Health is handled in accordance with the *Information Privacy Act 2009*. Queensland Health is collecting your personal information on this form under authority of the *Medicines and Poisons Act 2019*. The information is being collected to ensure that health risks arising from the use of regulated substances are appropriately managed. All personal information will be securely stored and only accessible by Queensland Health. Your personal information will not be disclosed to any other third parties without consent unless the disclosure is authorised or required by law. For information about how Queensland Health protects your personal information or to learn about your right to access your own personal information, please see our website at [www.health.qld.gov.au/global/privacy](http://www.health.qld.gov.au/global/privacy).

Section 1 – Applicant (entity) details			
<i>Provide details of the legal entity (individual/organisation) seeking the approval</i>			
Type of entity seeking the approval		Specify type (if another entity)	
Name of entity (e.g. individual (surname, given names), partnership, company, incorporated association)			
Trading name (if applicable)		ACN (if applicable)	
Entity phone		Entity email	
Postal address		Town/ Suburb	P/C
Contact person		Phone	Email
Attach a current <b>company extract</b> from the Australian Securities and Investments Commission (ASIC) (if applicable)			
Section 2 – Relevant persons (s76 MPA)			
All applications must include completed <a href="#">Details of relevant person</a> forms (MPA-76) for each of the following:			
1. (a) If the approval is to be issued to a sole trader, the <b>applicant</b> must complete the relevant person form. (b) If the approval is to be issued to a partnership, <b>each partner</b> must complete the relevant person form. (c) If the approval is to be issued to a body corporate, an <b>executive officer</b> (executive director, company secretary, chief executive officer, general manager or chief financial officer) must complete the relevant person form.			
2. A senior person (the person responsible for daily operations at the site e.g. site manager/supervisor) must be nominated for each premises on the approval. <b>Each senior person</b> must complete the relevant person form.			
3. <b>Each medical practitioner or nurse practitioner</b> (specialising in emergency medicine), nominated to be responsible for providing governance and oversight, endorsing protocols and procedures, giving prescriptions/ standing orders to authorised persons, and to purchase the medicines must complete the relevant person form.			
Attach completed details of relevant person forms for each person relevant to this application			
Section 3 – Sites and events where medicines are to be used			
<i>Provide details of the proposed services to be provided and include any known sites (fixed/ongoing) and events (temporary) where services are proposed to be provided. To include additional sites or events, please attach further details. For any locations where medicines are only going to be stored (in preparation for events), provide these details in section 4.</i>			
Type of services to be provided	Site based	Event based	Sites and events
General description of services to be provided			

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Site/Event 1			
Site or Event Name		Site	
		Event	
Street Address		Town /Suburb	P/C
Contact person	Phone	Email	
Description of services to be provided at <b>this</b> site/event			
Days/Times when services are to be provided		Contract start	Contract end
Nature of storage (details of room, receptacle etc.)			
Control of access (details of safe, keyholders etc.)			
Site/Event 2			
Site or Event Name		Site	
		Event	
Street Address		Town /Suburb	P/C
Contact person	Phone	Email	
Description of services to be provided at <b>this</b> site/event			
Days/Times when services are to be provided		Contract start	Contract end
Nature of storage (details of room, receptacle etc.)			
Control of access (details of safe, keyholders etc.)			

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(EMERGENCY FIRST AID)**

Site/Event 3			
Site or Event Name		Site	
		Event	
Street Address		Town /Suburb	P/C
Contact person	Phone	Email	
Description of services to be provided at <b>this</b> site/event			
Days/Times when services are to be provided		Contract start	Contract end
Nature of storage (details of room, receptacle etc.)			
Control of access (details of safe, keyholders etc.)			
Site/Event 4			
Site or Event Name		Site	
		Event	
Street Address		Town /Suburb	P/C
Contact person	Phone	Email	
Description of services to be provided at <b>this</b> site/event			
Days/Times when services are to be provided		Contract start	Contract end
Nature of storage (details of room, receptacle etc.)			
Control of access (details of safe, keyholders etc.)			

**INITIAL APPLICATION FOR A GENERAL APPROVAL  
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**Section 4 – Premises where medicines are to be stored**

*Provide details of any additional locations (not already provided in section 3 above) where medicines will only be stored but not used, i.e. stored in preparation for transporting to events or for restocking sites. To include additional storage locations, attach further details.*

**Storage location 1**

*Do not repeat storage details for sites/locations already provided in section 3 (where services will be provided).*

Site or Business Name		
Street Address	Town /Suburb	P/C
Contact person	Phone	Email
Storage location (e.g. building/room number)		
Nature of storage (details of room, receptacle etc.)		
Control of access (details of safe, keyholders etc.)		

**Storage location 2**

*Do not repeat storage details for sites/locations already provided in section 3 (where services will be provided).*

Site or Business Name		
Street Address	Town /Suburb	P/C
Contact person	Phone	Email
Storage location (e.g. building/room number)		
Nature of storage (details of room, receptacle etc.)		
Control of access (details of safe, keyholders etc.)		

**INITIAL APPLICATION FOR A GENERAL APPROVAL  
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**Section 5 – Medicines proposed to be used under this approval (Schedule 16, part 2 MPMR)**

*The medicines authorised for a general approval for emergency first aid are stated in Schedule 16 of the MPMR. There are different medicines authorised based on a person's qualification and experience.*

Select which medicines are sought for this approval:

Medicines for **first aid providers**: glyceryl trinitrate  
(In addition to an adrenaline (epinephrine) autoinjector, an S3 inhaled asthma reliever, naloxone and methoxyflurane which are permitted without an approval where a person has completed the requisite training)

Medicines for **paramedics**: adrenaline (epinephrine), atropine, benztropine, ceftriaxone, furosemide (frusemide), glyceryl trinitrate, glucagon, hydrocortisone, ipratropium bromide monohydrate, lidocaine (lignocaine), metoclopramide, methoxyflurane, midazolam, morphine, naloxone, nitrous oxide, promethazine or salbutamol

Medicines for **registered nurses**: nitrous oxide, methoxyflurane and S4 salbutamol (in addition to a registered nurse's authority as an approved person)

**Section 6 – Substance management plan (s93 MPA, Chapter 6 and Schedule 17 MPMR)**

The holder of a general approval for emergency first aid, must make a substance management plan before any regulated activity happens with a regulated substance at, or in connection with, a regulated place (e.g. an authorised site or authorised event), unless the person has a reasonable excuse.

The substance management plan must:

- state the following:
  - the day the plan starts;
  - the location of the place;
  - the regulated activities and regulated substances to which the plan applies;
  - the persons (staff) to whom the plan applies; and
- address the matters specified in the Departmental standard: 'Substance management plans for medicines' under the MPMR; and
- be written in a way that is likely to be easily understood by staff.

The approval holder (as 'responsible person') must ensure the substance management plan:

- is made available to staff when it is made; and
- is reviewed at the time specified in the MPMR.

**NOTE: A SUBSTANCE MANAGEMENT PLAN IS NOT REQUIRED UNTIL 27 SEPTEMBER 2022 (s280 MPA)**

Have you prepared a substance management plan that meets the criteria above and the Departmental standard: 'Substance management plans for medicines' of the MPMR?	Yes	No
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**Section 7 – Standing orders (ss102-108 MPMR)**

Do you intend to use standing orders (similar to clinical practice protocols under the HDPR) under this general approval?	Yes	No
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If yes, do all standing orders meet the criteria set out in Chapter 4, Part 7 of the MPMR (in particular sections 106 and 107 of the MPMR including the requirement that each standing order is made and signed by a prescriber)?	Yes	No
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**Section 8 – Duration of the substance authority (s69 MPA)**

General approvals for emergency first aid may be issued for up to two years, but a **shorter term** may be requested/granted.

Please specify the term of approval sought:

1 year	2 years	Another term, please specify
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**Section 9 – Additional information and attachments**

Provide any additional information to support your application

Provide/specify which attachments are attached to support this application:

A current **company extract** from the Australian Securities and Investments Commission (ASIC)

Details of **relevant person forms** for each person relevant to the application (directors, medical practitioners, nurse practitioners, senior persons e.g. site supervisors etc.)

Evidence of the **credentialing process** used to prove that persons providing treatment have the necessary competence and training to use scheduled medicines, signed by a medical practitioner or nurse practitioner registered in the specialty of emergency medicine

Other **relevant documents** (e.g. letter or contract confirming engagement of services, operational procedures) please specify

**Section 10 – Consent and declaration**

By making this application:

I declare that I have authority to make this application on behalf of the applicant.

I consent to Queensland Health making enquiries of, and exchanging information with, the authorities of any Australian state or territory, or of the Commonwealth, regarding any matters relevant to this application. If relevant information cannot be obtained from other entities, Queensland Health will determine the application on the information available.

I declare that, to the best of my knowledge, all information provided in and with this application form is true and correct in every detail.

I understand that if anything has been stated in this application form, or in an attachment provided with this application, that is false or misleading, any substance authority granted may be suspended or cancelled.

Full name of applicant or authorised representative  
(where applicant is a body corporate or another entity)

Designation of applicant or authorised  
representative

Signature of applicant or authorised representative (where applicant is a body  
corporate or another entity)

Date (DD/MM/YYYY)