



PREHOSPITAL DOCUMENTATION

PURPOSE

To define the responsibilities and requirements of prehospital personnel and Service Provider Agencies in the initiation, completion and distribution of prehospital documentation.

AUTHORITY

Health & Safety Code, Division 2.5, Chapter 4, Article 1, §§ 1797.202, 1797.204, 1797.220

Health & Safety Code, Division 2.5, Chapter 5, § 1798

Health & Safety Code, Division 2.5, Chapter 7, § 1798.220

California Code of Regulations, Title 22, Division 9, Chapters 2, 3, 4

POLICY

- I. Prehospital documentation shall be completed as follows:
 - A. Basic Life Support/Advanced Life Support (BLS/ALS) transport and BLS/ALS non-transport prehospital personnel shall complete patient care documentation for every response where patient contact is established.
 - B. BLS/ALS transport and BLS/ALS non-transport prehospital personnel shall complete appropriate documentation for all canceled calls including:
 1. "Code 4" or canceled calls prior to arrival at scene.
 2. "No patient contact" calls defined as arrival on scene and Unable to Locate (UTL) any patient, or no direct interaction with patient.
- II. Prehospital patient care documentation includes the following:
 - A. A written Patient Care Report (PCR) or electronic Patient Care Report (ePCR).
 - B. A Yolo County Emergency Medical Services Agency (YEMSA) Interim Patient Care Report or an equivalent interim patient care report form utilized in addition to the PCR.
 - C. A PCR is a legal medical record and the primary source of information for Service Provider Agencies, Base Hospitals and YEMSA Continuous Quality Improvement (CQI) reviews.
 - D. Prehospital personnel shall be responsible for providing clear, concise, complete, legible and accurate prehospital documentation.
 - E. Any form of falsification of prehospital documentation shall be considered a serious infraction subject to disciplinary certification/accreditation action by YEMSA and/or referral to the appropriate licensing authority.

PROCEDURE

- I. PCR Utilization
 - A. Prehospital Service Provider Agencies who are required to complete prehospital documentation as indicated by this policy must utilize one (1) of the following forms of documentation:
 1. An ePCR system:



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- a. All YEMSA approved BLS/ALS transport and BLS/ALS non-transport providers must utilize one (1) of the following ePCR systems:
 - i. The YEMSA selected ePCR system.
 - ii. An equivalent California Emergency Medical Services Information System (CEMSIS) compliant ePCR system.
- B. A written PCR:
 1. A written PCR may be utilized by BLS non-transport providers for prehospital documentation purposes as required by this policy.
 2. A written PCR shall include, at a minimum, all data elements listed in the following appropriate policy(s):
 - a. Emergency Medical Responder (EMR)/Emergency Medical Technician (EMT)/Public Safety Automated External Defibrillator (AED) Program: Service Provider Requirements and Responsibilities.
 - b. EMT Optional Scope: Service Provider Application, Approval Process, Requirements and Responsibilities.
 - c. Patient Refusal of Treatment Transport
- II. Documentation/Completion of the PCR
 - A. Patient information documented on the PCR provides a medical record of the patient's assessment, history, treatment rendered, response to treatment and all other pertinent medical information regarding the patient.
 - B. The certification/accreditation name(s) and certification/license number(s) of appropriate prehospital personnel rendering patient care on a responding unit are required to be documented on the PCR. The primary prehospital patient care provider shall sign the PCR. An electronic signature is acceptable if an ePCR system is utilized for prehospital documentation.
 - C. All pertinent supporting patient care documentation (including but not limited to completed RAS/AMA forms, Do Not Resuscitate/Physician's Orders for Life Sustaining Treatment [DNR/POLST] forms, patient medication lists and cardiac monitor strips) shall be attached to the PCR.

MINIMUM PATIENT CARE DOCUMENTATION REQUIRED TO BE LEFT WITH THE PATIENT AT THE RECEIVING FACILITY AT TIME OF DELIVERY

- I. The following minimum prehospital patient care documentation, when available to prehospital personnel, shall be completed by the primary patient care provider and left at the receiving facility at the time of patient delivery:
 - A. Date of incident & incident number
 - B. Call location
 - C. EMS unit number
 - D. Patient name, sex, age, date of birth, address, city and telephone number
 - E. Chief complaint
 - F. Patient weight
 - G. PQRST/time of symptom onset (including time of incident and mechanism of injury for all trauma patients)
 - H. Pertinent medical history
 - I. Medications
 - J. Medication allergies



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- K. Vital Signs (VS) (including Glasgow Coma Scale [GCS], Blood Pressure [BP], pulse, respirations, pain scale, cardiac rhythm, Peripheral Capillary Oxygen Saturation [SpO₂], and End-tidal Carbon Dioxide [EtCO₂] as appropriate)
 - L. Treatment rendered (including time, type of treatment, medication, dose, route, response and total intravenous (IV) line volume infused)
 - M. Name, title and identification (ID) of the prehospital provider completing the documentation
- II. **There are no exceptions to this requirement.** It is the preference of YEMSA that a completed PCR be left at the Receiving Hospital at the time of patient delivery. However, prehospital personnel may satisfy this requirement with the completion of the YEMSA Interim Patient Care Report or an equivalent interim patient care report form that includes, at a minimum, all of the information listed above.

DISTRIBUTION OF THE COMPLETED PCR

- I. The completed PCR shall be distributed as follows:
 - A. Service Provider Agency.
 - B. Receiving Hospital:
 - 1. In instances when a completed PCR is not left with the patient at the Receiving Hospital at the time of patient delivery (i.e. when an interim patient care report is utilized), a copy of the completed PCR shall be provided to the Receiving Hospital within twenty-four (24) hours.
 - 2. When patient care is transferred from one (1) ALS Service Provider Agency to another provider for transportation, the ALS non-transporting Service Provider Agency shall send a copy of their completed PCR to the Receiving Hospital within twenty-four (24) hours.
 - C. Base Hospital:
 - 1. In instances where a Base Hospital is utilized for medical control that is not the receiving facility (including AMA patients and RAS patients that require Base Hospital contact), a copy of the completed PCR shall be sent to the Base Hospital that was utilized within twenty-four (24) hours.
 - 2. In instances where an AED or an EMT Optional Scope skill is utilized by BLS personnel, a copy of the completed PCR shall be sent to the provider's Base Hospital within twenty-four (24) hours.
 - D. YEMSA:
 - 1. In instances when an AED or EMT Optional Scope skill is utilized by a BLS Service Provider, a copy of the completed PCR shall be sent to YEMSA within seven (7) days.
- II. YEMSA Service Provider Agencies shall be responsible for maintaining the PCRs for all patient care responses in accordance with all applicable laws, regulations, Government Codes and policies. The PCR shall be made available to YEMSA upon request.



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PREHOSPITAL DOCUMENTATION TRAINING

Each Service Provider Agency is responsible for training their appropriate prehospital personnel in the initiation, completion and distribution of required prehospital documentation.

PREHOSPITAL DATA SUBMISSION

- I. ePCR data shall be provided to YEMSA in the following manner:
 - A. Prehospital Service Providers utilizing the YEMSA selected ePCR system shall complete a data sharing agreement with YEMSA.
 - B. Prehospital Service Providers not utilizing the YEMSA selected ePCR system shall establish a process with the YEMSA ePCR vendor to allow for EMS data submission. This data shall include, at a minimum, all CEMSIS data elements. Data shall be submitted to the YEMSA data system on a minimum of a monthly basis, no later than the fifteenth (15th) day of the following month.

NOTE

- I. PQRST is a mnemonic that stands for:
 - A. **P**rovokes
 - B. **Q**uality
 - C. **R**adiates
 - D. **S**everity
 - E. **T**ime