

SUBJECT: PATIENT CARE REPORT(S)	SECTION: 302.11
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PURPOSE

This procedure is designed to provide a standard for the completion of EMS Patient Care Reports in compliance with the State of Ohio Statutes and Federal HIPAA compliance laws. It is intended to give the information needed to produce a concise, complete and well-documented Patient Care Report.

POLICY

- A. This procedure is to be followed by all employees working under the Medical Director and Standing Orders with whom the Department is currently contracted. Authority to deviate from this Department guideline rests with the Fire Chief or their designee.
- B. A patient care report will be completed for every patient contact.

DEFINITION

Patient Care Report (PCR) – this includes both forms used by the Reading Fire Department, the standard patient care report and the non-transport form.

Patient – Any individual encountered by EMS personnel who, in the judgment of EMS personnel, demonstrates a known or suspected illness or injury.

REFERENCES

- 1. Reading Fire Department EMS Report Manual
- 2. Academy of Medicine of Cincinnati EMS Standing Orders

PROCEDURE

- A. All personnel shall know how to fully document an emergency medical incident using the patient care report.
- B. All full-time personnel shall know how to fully document an emergency medical incident using the provided software program available. The responsibility for the completion of the report shall be placed upon the individual in charge of primary patient care or their designee.
- C. Computer generated reports shall be completed for all incidents where Fire Department personnel arrive at the scene and perform a patient exam and/or provide care to a patient.

- D. A computer generated report shall be completed for cancelled calls, no patient found, and false alarms.
- E. Any time a person refuses evaluation, treatment and/or transport, a patient care report and EMS REFUSAL FORM (located on the back of the patient care report) must be completed.

PATIENT CARE REPORT COMPLETION

- A. An individual PCR must be completed for each patient assessed.
- B. When possible, a PCR will be started by first arriving personnel.
- C. The individual having control of medical care during transport shall complete the PCR.
- D. A completed copy of the PCR shall be left at the hospital.

EKG INFORMATION

- A. Any EKG generated as a result of patient assessment shall be glued on the back of the patient care report or attached to plain paper. All mounted EKG paper shall have all appropriate patient information completed on the form.
- B. Monitor lead EKG shall have 6 seconds of strip mounted.
- C. Code Summaries shall also be glued in the same manner.

NARRATIVE

Any information relevant to a call that is not available as a field should be included in the final narrative. Unusual scene observations, pertinent patient or witness comments should be recorded.

DISTRIBUTION OF COPIES

- A. PCR Transport Form
 1. Original – retained by the fire department
 2. Yellow copy – quality assurance copy
 3. Pink copy – billing agency copy
 4. Gold copy – hospital copy
- B. PCR Non Transport Form
 1. Original – retained by the fire department
 2. Yellow copy – quality assurance copy
 3. Pink copy – patient copy

REPORTING RESPONSIBILITY

- A. The Company Officer shall insure that all EMS reports are completed in a timely manner, ensure that all EKG strips are attached as described in this SOG.

- B. If a discrepancy is found by the Company Officer, the report will be returned to the writer of the report for any corrections.
- C. As a minimum, the EMS Officer or their designee will review all EMS reports for completeness and for quality assurance/continuous quality improvement.
- D. If a report is found to have errors in the alarm or biographical areas, note of the error will be kept by the EMS Supervisor. A consistent pattern of errors will result in remedial education for the employee involved.
- E. All reports with major errors or discrepancies will be forwarded to the current Medical Director with whom the city has a contract.