

## **POLICY #124: DOCUMENTATION OF PREHOSPITAL CARE**

### I. PURPOSE

- A. The purpose of this policy is to define requirements for patient care documentation and the procedure for completion, distribution and retention of the patient care records by emergency medical service (EMS) provider agencies in the County of San Luis Obispo (SLO).

### II. SCOPE

- A. This policy applies to all EMS provider agencies and first responders in the County of SLO.

### III. DEFINITIONS

- Patient Care Record (PCR): Documentation of patient information by pre-hospital personnel. PCR includes written and/or electronically generated reports.
- Electronic Patient Care Record (ePCR): Refers to PCRs generated electronically.
- Health Insurance Portability and Accountability Act (HIPAA): The HIPAA Privacy Rule, which protects the privacy of individually identifiable health information.
- Patient Contact: Any person with medical symptoms, signs, complaints or mechanism, who the EMS provider contacts to determine whether that person requires medical treatment or transport, regardless of whether such treatment or transport is provided.

### IV. POLICY

- A. First Responders must complete a PCR, or a dry run report on all patient contacts regardless of patient outcome.
- B. All PCR's must contain at a minimum, but not be limited to:
  - 1. Initial Response Information.
    - a. EMS Unit Number.
    - b. Date and estimated time of unit number.
    - c. Time of receipt of call.
    - d. Time of dispatch to the scene.
    - e. Time of arrival at the scene.
    - f. Incident location.
  - 2. Patient Information.
    - a. Name.
    - b. Age and date of birth.

- c. Gender.
  - d. Weight, if necessary for treatment.
  - e. Address.
  - f. Chief complaint.
  - g. Patient history.
  - h. Vital signs.
  - i. Appropriate physical assessment.
  - j. Emergency care rendered, and patients response to such treatment.
  - k. Patient disposition.
  - l. Time of departure from scene (transporting agency only).
  - m. Time of arrival at receiving facility (transporting agency only).
  - n. Name of receiving facility (transporting agency only).
  - o. Name and unique identifier number(s) of EMS personnel on the call.
  - p. Signature of documenting party.
- C. The EMS Agency may require additional elements as the system changes and/or for quality improvement (QI) programs.
- D. Care given by, bystanders prior to arrival, or first responder personnel, must be documented on the PCR.
- E. The management of patient care documentation must be compliant with HIPAA requirements when appropriate.
- F. Patient care documentation must meet the EMS provider agency's specific medical record retention requirements. However, PCR's must be retained for no less than current requirements in California Code of Regulations, Title 22, Division 5, Chapter 1, Article 7, Section 70751.
- G. All transporting providers must participate in an EMS Agency approved ePCR program.
- H. Non-transporting EMS providers are encouraged to have an EMS Agency approved ePCR.
- I. All providers must participate in the EMS Agency data collection program.
- J. Abbreviations and acronyms used when writing PCR's must be from the approved list, Attachment A or EMS Agency approved ePCR menus.
- K. Documentation with the use of public safety AED must follow EMS Agency Policy # 204: Public Safety Automated External Defibrillator Program.
- V. PROCEDURE

- A. All patients transported into or out of the County of SLO must have a completed PCR left with the patient's medical records by the transporting unit. The transporting unit, prior to clearing the receiving facility, must leave the PCR with the patient's record. If system needs require the transporting unit to clear the receiving facility prior to completion of the PCR, the PCR must be completed and provided to the receiving hospital for placement in the patient record ASAP but no greater than 24 hours after the transfer of patient care. Verbal transfer of care between accepting paramedic on scene and accepting hospital personnel must be documented.
- B. Non-transporting personnel must complete a PCR for all patient contacts in a timeline as set forth by employing agency policy but in all cases must be completed by end of shift.
- C. Paid Call Firefighter or volunteer responders must complete PCR's within 36 hours of rendering patient care. These PCRs must be completed and retained per requirements as outlined in this policy Section D, E and F.
- D. Upon request, all PCRs must be available to receiving hospital staff or EMS Agency for the purpose of QI review and/or data collection purposes and be produced within five business days of the request.
- E. It is recommended that each EMS provider agency have a policy on the use of photos and videos.

## VI. AUTHORITY

- Title 22, California Code of Regulations, Division 9, Sections 100170, 10171, 100402.
- California Health and Safety Code, Division 2.5, Section 1798a.
- Title 22, California Code of Regulations, Division 5, Chapter 1, Section 70751

## VII. ATTACHMENTS

- A. Abbreviations and Acronyms List.