Central DuPage Emergency Medical Services System

Ambulance Patient Care Report
Non-Transport Report/Refusal Form

INTRODUCTION &	EMS MEDICAL DIRECTOR:
APPROVAL: 3/90	_____
REVIEW &	EMSS COORDINATOR:
APPROVAL:_____	_____
REVISION & APPROVAL: 6/95, 1/98 , 8/08	

PURPOSE:

To establish criteria which the Central DuPage EMS System EMTs are to use for completing patient care report forms.

POLICY/PROCEDURE:

I. General Guidelines

A. A run report shall be completed by each vehicle service provider for every emergency pre-hospital or inter-hospital transport and for refusal of care.

1. One copy shall be left with the receiving hospital emergency department, trauma center or health care facility before leaving this facility.
2. Central DuPage EMS System shall designate or approve a single form to be used by all of its vehicle providers as mandated by IDPH Administrative Rules & Regulations.

B. All non-transport vehicle providers shall document all medical care provided and shall submit the documentation to the EMS System within 24 hours using the CDEMSS approved Non-Transport Report Form/Refusal. The Resource Hospital shall review all medical care provided by non-transport vehicles and shall provide a report to the Department upon request.

C. Central DuPage EMS System shall submit a data report to the Department on March 1, June 1, September 1, and December 1 of each year, covering run report data from the preceding quarter.

1. The data elements shall be in a format compatible with the Department's data base input specifications.

2. Department review and approval of data format compatibility is required prior to submission.

D. **FALSIFICATION** of records will not be tolerated. Deliberate failure to document accurately and honestly is considered a severe offense whereby appropriate disciplinary action will be taken at the discretion of the EMS Medical Director.

II. Procedure for Patient Care Report:

A. The form is to be completed in its entirety prior to the transporting agency leaving the receiving facility.

B. The ambulance provider responsible for patient care and/or transport retains a copy for their records.

C. A printed copy of the electronic PCR is mandated by the Illinois Department of Public Health (IDPH) to be left at the Emergency Department of the receiving hospital and placed with the patient's chart.

D. It is preferred Paramedics upload their laptops to the network server after each call or at a minimum of once every twenty four hours.

III. Procedure for Refusals/Multiple Release/Non Patient Contact:

A. Refer to the appropriate policies for refusal of treatment.

B. Ambulances will complete an electronic patient care report for all refusals. The completed patient care report should reflect that although a patient refuses treatment and/or transport, the responding personnel either rendered a thorough assessment, or there must be documentation which provides a detailed account of the events that took place.

C. In situations where an ambulance and non-transport vehicle are simultaneously dispatched and the ambulance is cancelled prior to arriving at the scene:

1. The ambulance will complete an electronic run report, and it will reference the Non-Transport Report Form/Refusal.

2. The non-transport vehicle at the scene will complete the Non-Transport Report Form/Refusal and obtain necessary signatures from the patient and witnesses.

D. When using this document as a multiple release form the ambulance will complete an electronic run report to accompany the written release form.

E. In the event that responding personnel do not make patient contact (i.e. could not locate patient, canceled request for mutual aid, etc.) A prehospital care report form must be completed to provide documentation that a response was made to a particular emergency call.

III. General Guidelines for the written PCR completion if the electronic system is down:

A. A paper Patient Care Report form will be completed whenever the electronic report system is not operational.

B. Use medium or fine point pen, black ink preferred. NO red ink or pencil.

C. All areas requiring crew information must have the signature of each individual crew member involved in transport of patient.

D. Each completed form must have the name of the provider agency and the transporting vehicle's license plate number.

E. If an ECG interpretation is documented in the field, a six second strip must be attached to the "Patient Record Copy" of the form.

F. Once completed, the prehospital care report form becomes a confidential record. The information contained therein cannot be released to anyone without written authorization by the patient or his/her agent, or unless obtained through appropriate legal channels.

G. When completed by the Receiving Hospital the "Patient Record Copy" is affixed to the patient's medical record and the "EMS Office Copy" is forwarded to the Central DuPage EMSS Office.

H. A follow up electronic PCR needs to be generated in conjunction with the written report once the paramedic is back in the station.