

The Comprehensive State of Michigan EMS Data Dictionary is a collection of standardized data definitions sourced from the NEMSIS data dictionary and other approved references by the State of Michigan Data Committee.

Purpose:

This document aims to establish and disseminate a consistent set of data definitions for the NEMSIS 3.5 data set to enhance the accuracy of data collection, improve data governance, and promote a uniform understanding of data across state agencies and stakeholders.

Table of Contents

Table of Contents	3
EMS DATA SET	4
eRecord Section	4
ERESPONSE SECTION	4
EDISPATCH SECTION	19
eCrew Section	21
eTimes Section	22
EPATIENT SECTION	24
EPAYMENT SECTION	26
ESCENE SECTION	35
ESITUATION SECTION	37
EINJURY SECTION	41
EARREST SECTION	44
EHISTORY SECTION	49
eVitals Section	54
EEXAM SECTION	59
EPROTOCOLS SECTION	70
eMedications Section	73
eProcedures Section	77
EAIRWAY SECTION	81
EDISPOSITION SECTION	82
eOutcome Section	92
eOther Section	92
DEMOGRAPHIC DATA SET (AGENCY)	95
DAGENCY SECTION	95
DCONTACT SECTION	97
DCONFIGURATION SECTION	99
DLOCATION SECTION	105
DVEHICLE SECTION	
DPERSONNEL SECTION	107
DDEVICE SECTION	114
DFACILITY SECTION	115

EMS Data Set

This dataset captures the patient care report (PCR) details of EMS encounters.

- * Indicates State of Michigan required element.
 - A Michigan required element is an element that is required should be available for documentation within a software platform, and any data entered into the required elements should be transmitted to the State's EMS Data Repository.

eRecord Section

• *eRecord.01 - Patient Care Report Number:

A unique number automatically assigned to each patient care report (PCR). This should be a unique number for the EMS agency for all of time.

• *eRecord.02 - Software Creator:

The name of the vendor, manufacturer, and developer who designed the application that created this record.

*eRecord.03 - Software Name:

The application name used to create this record.

*eRecord.04 - Software Version:

The version of the application used to create this record.

eResponse Section

• *eResponse.01 - EMS Agency Number:

The state-assigned provider number of the responding agency.

• *eResponse.02 - EMS Agency Name:

The EMS agency's name.

• *eResponse.03 - Incident Number:

The incident number assigned by the 911 Dispatch System.

• *eResponse.04 - EMS Response Number:

An internal EMS response number which is unique for each EMS Vehicle's (Unit) response to an incident within an EMS Agency.

*eResponse.05 - Type of Service Requested:

The type of service or category of service requested of the EMS Agency responding for this specific EMS event.

NEMSIS Comment: Values for "911 Response (Scene)", "Intercept", and "Mutual Aid" have been relabeled to start with "Emergency Response" to more easily identify these options. "Interfacility Transport" was relabeled to "Hospital-to-Hospital Transfer" to be more accurate.

 "Medical Transport" was relabeled to "Other Routine Medical Transport" to cover any other medical transports such as transports to and from dialysis, doctor appointments, return home, or nursing homes. Values added to consolidate types of service previously captured in "Primary Role of Unit" and eDisposition.12 as found in V3.4.0. Additional values added to reflect emerging service types.

- o 2205001 Emergency Response (Primary Response Area)
 - Emergent or immediate response to an incident location, regardless of the method of notification (e.g., 9-1-1, direct dial, walk-in, flagging down, air ambulance scene flight).
 - If the original request comes through 9-1-1 for a patient at a non-hospital medical facility (e.g., urgent care, nursing home) use this option unless: a) The patient needs a transport for a non-urgent issue or routine care; and b) The sending facility can provide a signed Physician Certification Statement for Non-Emergency Ambulance Services (PCS Form); Then Using "Non-Hospital Facility to Hospital Transfer" is appropriate.
- 2205003 Emergency Response (Intercept)
 - When one EMS clinician meets a transporting EMS unit vehicle with the intent of receiving a patient or providing a higher level of care.
- 2205009 Emergency Response (Mutual Aid)
 - Response of emergency medical services, and other emergency personnel and equipment, to a request for assistance in an emergency when local resources have been expended. (e.g., includes auto-aid, providing coverage in another agency's primary coverage area).
- o 2205005 Hospital-to-Hospital Transfer
 - Any transfer, after initial assessment and stabilization, from and to a healthcare facility, to include specialty hospitals, for the purpose of continuation of acute care, this would also include emergent transfer requests.
- 2205015 Hospital to Non-Hospital Facility Transfer
 - Any transfer from a hospital to a non-hospital residential, in-patient or free-standing acute care, or surgical medical facility. An example of this is a transfer or discharge from a hospital to assisted living, nursing home, hospice, or rehabilitation facility.
- 2205017 Non-Hospital Facility to Non-Hospital Facility Transfer
 - Any transfer from one residential, in-patient or free-standing acute care or surgical medical facility to another similar type of facility, neither of which qualify as a hospital. (e.g., nursing home to nursing home, nursing home to a hospice center, free-standing emergency department to nursing home).
- 2205019 Non-Hospital Facility to Hospital Transfer
 - Any transfer for a non-urgent issue or routine care from a non-hospital residential, in-patient or free-standing acute care or surgical medical facility to a hospital. (e.g., transfer from a nursing home, clinic, urgent care, or free-standing emergency department to a hospital).

- 2205007 Other Routine Medical Transport
 - Transports that are not between medical facilities and are generally for the purpose of transportation to or from an appointment, performance of a procedure, or long-term care (e.g., discharge home, medical appointments, recurring transports, or based on local or state needs or guidance).
- o 2205011 Public Assistance
 - The unit responded to provide public service assistance (e.g., elderly or disabled individual assistance, lift assist without other assessment or care, public education, wheelchair or medical device assistance).
- 2205013 Standby
 - Initial request for service was for purposes of being available in case of a medical/traumatic emergency (e.g., sporting/public events, fires, police action).
- 2205021 Support Services
 - The unit responded to provide support not otherwise specified. (e.g., equipment delivery, educational events).
- o 2205023 Non-Patient Care Rescue/Extrication
 - The unit responded to provide rescue and/or extrication service, additional personnel or equipment.
- o 2205025 Crew Transport Only
 - The unit responded to transport crew only. (e.g., medical specialty team without a patient, mechanical issue with vehicle)
- 2205027 Transport of Organs or Body Parts
 - This includes tissues, biological samples, organs, and body parts.
- 2205029 Mortuary Services
 - The unit responded to provide service or assistance in the event of a deceased patient.
- 2205031 Mobile Integrated Health Care Encounter
 - The responding unit provided mobile resources in the out-of-hospital environment. It may include, but is not limited to, services such as providing telephone advice to 9-1-1 callers instead of resource dispatch; providing community paramedicine care, chronic disease management, preventive care or post-discharge follow-up visits
- 2205033 Evaluation for Special Referral/Intake Programs
 - EMS provides an initial medical screening as part of the intake process for various specialty referral services or programs (such as "Safe Baby Haven", mental health, addiction, or similar programs).
- 2205035 Administrative Operations
 - The unit provided EMS coordination, oversight and/or supervision of services.
- eResponse.06 Standby Purpose:

The main reason the EMS Unit is on Standby as the Primary Type of Service for the EMS event.

2206001 Disaster Event-Drill/Exercise

The EMS unit was placed on standby for a planned, simulated emergency or disaster scenario intended for training, evaluation, or preparedness purposes. This includes participation in table-top, functional, or full-scale exercises involving EMS agencies and potentially other public safety, healthcare, or emergency management entities. No actual incident occurred requiring real patient care.

2206003 Disaster Event-Live Staging

The EMS unit was placed on standby or mobilized to a staging location in preparation for deployment during an actual or suspected disaster event or large-scale emergency. This includes situations where units are pre-positioned but may not be immediately dispatched to a scene or where the extent of the incident is not yet fully known.

2206005 Education

The EMS unit was assigned to standby specifically to support an educational activity, such as a training course, skills lab, or public education event. The purpose is typically to provide medical support or to participate in demonstration or instruction, but not to respond to actual patients unless an unforeseen incident occurs.

2206007 EMS Staging-Improve Coverage

■ The EMS unit was strategically staged or repositioned to improve geographic coverage, reduce response times, or maintain system readiness. This is typically done in response to dynamic changes in unit availability, call volume, or system status.

2206009 Fire Support-Rehab

The EMS unit was placed on standby to provide rehabilitation and medical monitoring services for fire personnel or other responders actively engaged in fireground operations. This includes support during structure fires, wildland fires, or extended hazardous operations where responder health monitoring and rest cycles are necessary.

o 2206011 Fire Support-Standby

The EMS unit was placed on standby to support fire department operations in case of injury, illness, or other medical needs arising during the course of a fire-related incident. Unlike Fire Support – Rehab, this standby does not involve active rehabilitation or routine monitoring, but ensures EMS is immediately available if needed.

o 2206013 Mass Gathering-Concert/Entertainment Event

The EMS unit was assigned to standby during a concert, festival, or other entertainment-focused event where a large number of attendees are present, and there is a potential need for on-site medical care due to the size, nature, or risk factors of the event.

- o 2206015 Mass Gathering-Fair/Community Event
 - The EMS unit was assigned to standby during a communityoriented event, such as a fair, parade, block party, or public celebration. These events typically involve large crowds and general public attendance, and EMS is present to provide immediate medical care if needed.
- 2206017 Mass Gathering-Sporting Event
 - The EMS unit was placed on standby during a competitive or athletic event, whether amateur or professional, where a crowd is present and there is potential for injury or medical emergencies involving participants or spectators.
- o 2206019 Other
 - The EMS unit was placed on standby for a purpose that does not clearly fall into any of the defined standby categories. This value should be used only when none of the existing codes accurately describe the nature or intent of the standby.
- 2206021 Public Safety Support
 - The EMS unit was placed on standby to support non-fire public safety operations, such as law enforcement, emergency management, or homeland security activities. EMS presence is intended to provide medical readiness in case of injury or medical need among personnel or civilians during the operation.
- *eResponse.07 Unit Transport and Equipment Capability:
 The transport and equipment capabilities of the EMS Unit which responded to this specific EMS event.

NEMSIS Comment: Element relabeled from "Primary Role of Unit" to "Unit Transport and Equipment Capability" to better reflect its new defined purpose and allow the deprecation of eResponse.15 "Level of Care of This Unit". V3.4.0 Non-Transport values deprecated as these are types of service and were moved to eResponse.05 "Type of Service Requested". Values have been added to better capture transport capability and available equipment. These values should be tied to the capabilities and role of the unit and not reflect the level of providers responding to an event.

Supervisor clarified to Administrative Only. If the Supervisor is responding to assist, that would be considered Non-Transport.

- o 2207011 Air Transport-Helicopter
 - This unit's intended role in this incident at the time of response was to provide rotor-wing transportation of a patient, even if no transport resulted.
- 2207013 Air Transport-Fixed Wing
 - This unit's intended role in this incident at the time of response was to provide fixed-wing transportation of a patient even if no transport resulted.

- 2207015 Ground Transport (ALS Equipped)
 - This unit's intended role in this incident at the time of response was to provide ground transportation of the patient even if no transport resulted. The unit is equipped as an ALS service.
- 2207017 Ground Transport (BLS Equipped)
 - This unit's intended role in this incident at the time of response was to provide ground transportation of the patient even if no transport resulted. The unit is equipped as a BLS service. Includes utility vehicles (ATV, snowmobiles) and watercraft capable of transport.
- 2207019 Ground Transport (Critical Care Equipped)
 - This unit's intended role in this incident at the time of response was to provide ground transportation of the patient even if no transport resulted. The unit is equipped as a Critical Care service. Includes utility vehicles (ATV, snowmobiles) and watercraft capable of transport.
- o 2207021 Non-Transport-Medical Treatment (ALS Equipped)
 - This unit's intended role in this incident at the time of response was to provide EMS care and/or transportation support but was not to provide transport (e.g., fire apparatus, first response units, quick response vehicles, chase cars, etc.).
 - Examples: Assistance moving the patient to the transporting unit.
 First Response unit providing treatment until transport unit arrives (to include non-transporting ALS units).
- 2207023 Non-Transport-Medical Treatment (BLS Equipped)
 - This unit's intended role in this incident at the time of response was to provide EMS care and/or transportation support but was not to provide transport (e.g., fire apparatus, first response units, quick response vehicles, chase cars, etc.).
 - Examples: Assistance moving the patient to the transporting unit.
 First Response unit providing treatment until transport unit arrives.
- 2207025 Wheel Chair Van/Ambulette
 - This unit's intended role in this incident at the time of response was to provide specialty transport as a wheel chair accessible van or ambulette.
- 2207027 Non-Transport-No Medical Equipment
 - This unit's intended role in this incident at the time of response was to provide EMS coordination, oversight and/or supervision of services.
- *eResponse.08 Type of Dispatch Delay:
 - The dispatch delays, if any, associated with the dispatch of the EMS unit to the EMS event. A delay is any event or circumstance that causes EMS activities to take longer than normal or expected, such as dispatch, response, patient care, transport, or returning to service.

- 2208001 Caller (Uncooperative)
 - PSAP/Secondary Dispatch ability to gather information and/or provide instructions was impeded by caller behavior (e.g., caller was unhelpful).
- o 2208003 Diversion/Failure (of previous unit)
 - Unit initially dispatched was unable to complete the response resulting in a second unit dispatched; or call was re-directed to another unit after initial dispatch.
- 2208005 High Call Volume
 - Capacity to receive and process calls in a timely manner was exceeded.
- o 2208007 Language Barrier
 - Ability of PSAP/Secondary Dispatch and caller to understand one another was limited (e.g., due to lack of a common language, regional dialect differences, caller speech impediments, distraught caller, etc.).
- 2208009 Incomplete Address Information Provided
 - PSAP/Secondary Dispatch had difficulty determining an accurate location for the event/incident.
- o 2208011 No EMS Vehicles (Units) Available
 - At the time requested, the PSAP/Secondary Dispatch was unable to identify an appropriate EMS unit to assign.
- 2208013 None/No Delay
 - At the time requested, the PSAP/Secondary Dispatch was able to assign an EMS unit to the EMS event/incident without delay.
- o 2208015 Other
 - At the time requested, the PSAP/Secondary Dispatch was delayed assigning an EMS unit for a reason not otherwise specified here.
- 2208017 Technical Failure (Computer, Phone etc.)
 - The ability to receive calls and/or dispatch EMS units was impeded by issues with one or more physical communication channels (e.g., phones, radios, a local network, the internet, power/utility outage, etc.).
- 2208019 Communication Specialist-Assignment Error
 - The Communication Specialist or Dispatch Operator assigned, classified, or reported the call with an incorrect code or assigned the call to an incorrect unit.
- 2208021 No Receiving MD, Bed, Hospital
 - Dispatching a unit is impeded due to the lack of a receiving advanced clinician (such as an MD), no available hospital/healthcare facility bed, or there is no available hospital currently receiving EMS patients.
- 2208023 Specialty Team Delay
 - Dispatch is delayed due to securing a specialty team appropriate for the EMS request.

*eResponse.09 - Type of Response Delay:

The response delays, if any, of the EMS unit associated with the EMS event. A delay is any event or circumstance that causes EMS activities to take longer than normal or expected, such as dispatch, response, patient care, transport, or returning to service.

- o 2209001 Crowd
 - The combination of number, density, and location of people encountered en route to an EMS event/incident was sufficient enough to slow the unit's progress.
- o 2209003 Directions/Unable to Locate
 - Problems with directions and/or the ability to follow directions slowed or prevented the unit's progress to an EMS event/incident (e.g., dispatched to the wrong address, GPS issue, unable to find address provided).
- o 2209005 Distance
 - An atypically long distance to an EMS event/incident resulted in a longer than normal response time for the unit.
- 2209007 Diversion (Different Incident)
 - While en route to an EMS event/incident, the unit was re-directed to a different EMS event/incident.
- 2209009 HazMat
 - The actual or presumed presence of one or more dangerous substances slowed or prevented the unit's progress to an EMS event/incident.
- 2209011 None/No Delay
 - The unit's progress to an EMS event/incident was completed without delay.
- o 2209013 Other
 - The unit's progress to an incident took longer than expected due to one or more factors not otherwise specified here.
- o 2209015 Rendezvous Transport Unavailable
 - The unit's progress to an incident was slowed due to the delay or unavailability of an additional mode of transportation needed to achieve the shortest overall response time (e.g., ferry, UTV).
- o 2209017 Route Obstruction (e.g., Train)
 - One or more obstacles encountered en route to an incident slowed the unit's progress (e.g., train, drawbridge, bridge or road washout, wildfire, mud/rock slide, parade, marathon).
- 2209019 Scene Safety (Not Secure for EMS)
 - Arrival on scene was delayed due to actual or presumed unsafe conditions at the scene (e.g., observed or suspected criminal activity involving weapons, scene hazard, and stage for law enforcement).

- 2209021 Staff Delay
 - The response was slowed due to crewmember availability, distance to station, or other issues (e.g., full crew not present, illness, injury, family emergency).
- o 2209023 Traffic
 - Vehicular congestion encountered enroute to an incident slowed the unit's progress.
- 2209025 Vehicle Crash Involving this Unit
 - The unit's involvement in a crash slowed or prevented its progress to an incident.
- 2209027 Vehicle Failure of this Unit
 - Progress to an incident was slowed or prevented by vehicle issues (e.g., failure to start, a flat tire, a broken axle).
- o 2209029 Weather
 - Weather conditions slowed or prevented the unit's progress to an incident (e.g., flood, blizzard).
- o 2209031 Mechanical Issue-Unit, Equipment, etc.
 - Issues with one or more devices slowed or prevented the unit's ability to proceed to an EMS event/incident within the expected amount of time (e.g., garage door not rising, switching out O2).
- o 2209033 Flight Planning
 - The aircraft's response to an incident was slowed by additional preflight preparations (e.g., re-routing due to weather conditions, loading specialized equipment).

*eResponse.10 - Type of Scene Delay:

The scene delays, if any, of the EMS unit associated with the EMS event. A delay is any event or circumstance that causes EMS activities to take longer than normal or expected, such as dispatch, response, patient care, transport, or returning to service.

- 2210001 Awaiting Air Unit
 - Waiting for aeromedical unit arrival at an EMS event/incident extended time on scene.
- 2210003 Awaiting Ground Unit
 - Waiting for EMS ground unit arrival, transport or otherwise, at the EMS event/incident extended time on scene.
- o 2210005 Crowd
 - The combination of number, density, and location of people encountered at the EMS event/incident was sufficient to extend time on scene.
- o 2210007 Directions/Unable to Locate
 - Difficulty finding the patient after arrival at an EMS event/incident extended time on scene.
- o 2210009 Distance
 - Separation between the EMS response vehicle and the patient at the EMS event/incident extended time on scene.

2210011 Extrication

 EMS activities to remove the patient from the EMS event/incident extended time on scene (e.g., stair-chair, technical rescue or auto extrication to gain patient access).

2210013 HazMat

The management (e.g., identification, decontamination, removal, mitigation) of actual or presumed presence of one or more dangerous substances at or near the EMS event/incident extended time on scene.

2210015 Language Barrier

 Limited ability of EMS crewmembers to communicate with the patient and/or bystanders at the EMS event/incident extended time on scene.

2210017 None/No Delay

 Nothing occurred at the EMS event/incident that extended the EMS unit's time on scene.

o 2210019 Other

 The EMS unit's time on scene was extended for one or more reasons not otherwise specified (e.g., extended patient care, securing pets/residence, waiting for guardian to arrive).

2210021 Patient Access

- Barriers to physical contact with the patient at the EMS event/incident extended time on scene (e.g., locked door, entrapment, patient resists access to care, animals).
- Often used in combination with "Extrication" and/or "Safety-Patient."

2210023 Safety-Crew/Staging

- Actual or presumed dangerous conditions at the EMS event/incident, or actions taken to protect EMS crewmembers (e.g.., staging area and scene management) extended the time on scene.
- Select "Patient Access", "Crowd", "Weather", and/or "HazMat" if the danger is a direct result of any of those factors.

2210025 Safety-Patient

 Actual or presumed dangerous conditions at the EMS event/incident, or actions taken to protect the patient from harm, extended time on scene.

2210027 Staff Delay

 Crewmember issues (e.g., injury, illness, and waiting for additional staff) at the EMS event/incident extended time on scene.

2210029 Traffic

 Vehicular congestion or other roadway conditions (e.g., navigating a parking area, entrance/egress from a parade/concert, incident is on a busy roadway, other responding resource is obstructed from arrival) encountered at the EMS event/incident extended time on scene.

- 2210031 Triage/Multiple Patients
 - Activities associated with managing an EMS event/incident involving more than one patient (e.g., sorting, prioritizing, processing) extended time on scene.
- o 2210033 Vehicle Crash Involving this Unit
 - The unit's involvement in a crash (e.g., unit is struck by another vehicle while on scene, crash of associated rescue vehicle (ATV) while accessing patient, unit backs into something while navigating scene) extended time on scene.
- o 2210035 Vehicle Failure of this Unit
 - EMS unit mechanical issue (e.g., failure to start, a flat tire, a broken axle) at the EMS event/incident extended time on scene.
- o 2210037 Weather
 - Weather conditions, current or result of past event (e.g., standing water, ice, blizzard), extended time on scene.
- o 2210039 Mechanical Issue-Unit, Equipment, etc.
 - Functional issues with one or more devices needed by the EMS crew (e.g., stretcher or monitor failure, locked out of ambulance) extended time on scene.

• *eResponse.11 - Type of Transport Delay:

The transport delays, if any, of the EMS unit associated with the EMS event. A delay is any event or circumstance that causes EMS activities to take longer than normal or expected, such as dispatch, response, patient care, transport, or returning to service.

- o 2211001 Crowd
 - The combination of number, density, and location of people encountered en route to a destination was sufficient enough to slow the unit's progress.
- o 2211003 Directions/Unable to Locate
 - Problems with directions and/or the ability to follow directions slowed or prevented the unit's progress to a destination (e.g., dispatched to the wrong address, GPS issue, unable to find address provided).
- o 2211005 Distance
 - An atypically long distance to the destination which resulted in a longer than normal transport time for the unit during transport.
- 2211007 Diversion
 - While en route to a destination, the unit was re-directed to a different destination.
- 2211009 HazMat
 - The actual or presumed presence of one or more dangerous substances slowed or prevented the unit's progress to a destination.

- 2211011 None/No Delay
 - The unit's progress to a destination was completed without delay.
- 2211013 Other
 - The unit's progress to a destination took longer than expected due to one or more factors not otherwise specified here.
- o 2211015 Rendezvous Transport Unavailable
 - The unit's progress to a destination was slowed due to the delay or unavailability of an additional mode of transportation needed to achieve the shortest overall response time (e.g., ferry, UTV).
- 2211017 Route Obstruction (e.g., Train)
 - One or more obstacles encountered en route to a destination slowed the unit's progress (e.g., train, drawbridge, bridge or road washout, wildfire, mud/rock slide, parade, marathon).
- o 2211019 Safety
 - Actual or presumed dangerous conditions at the EMS event/incident, or actions taken to protect EMS crewmembers extended the time during transport.
- 2211021 Staff Delay
 - The transport was slowed due to crewmember availability, distance to station, or other issues (e.g., full crew not present, illness, injury, family emergency).
- o 2211023 Traffic Vehicular
 - Congestion encountered en route to a destination slowed the unit's progress.
- 2211025 Vehicle Crash Involving this Unit
 - The unit's involvement in a crash slowed or prevented its progress to a destination.
- 2211027 Vehicle Failure of this Unit
 - Progress to a destination was slowed or prevented by vehicle issues (e.g., failure to start, a flat tire, a broken axle).
- o 2211029 Weather
 - Weather conditions slowed or prevented the unit's progress to a destination (e.g., flood, blizzard).
- o 2211031 Patient Condition Change (e.g., Unit Stopped)
 - Progress to a destination was delayed due to a change in patient condition (e.g., pulling over for the driver to assist with patient care, stopping the ambulance movement to perform a procedure.
- *eResponse.12 Type of Turn-Around Delay:

The turn-around delays, if any, of EMS unit associated with the EMS event. A delay is any event or circumstance that causes EMS activities to take longer than normal or expected, such as dispatch, response, patient care, transport, or returning to service.

- o 2212001 Clean-up
 - Progress to unit readiness was delayed due to abnormally extensive clean up of the unit was required.
- o 2212003 Decontamination
 - Progress to unit readiness was delayed due to abnormally extensive decontamination of the unit was required.
- 2212005 Distance
 - Separation between the EMS vehicle and the patient at the EMS destination extended turn around time.
- o 2212007 Documentation
 - Progress to unit readiness was delayed due to abnormally lengthy time to complete documentation of the patient encounter.
- o 2212009 ED Overcrowding / Transfer of Care
 - Progress to unit readiness was delayed caused by ED overcrowding or a delay in transferring care.
- o 2212011 Equipment Failure
 - Issues with one or more devices slowed or prevented the unit's ability to return to service within the expected amount of time.
- o 2212013 Equipment/Supply Replenishment
 - Unusual delay in exchanging equipment or obtaining replacement supplies that affected the time at the destination or that impeded the unit readiness for the next call.
- 2212015 None/No Delay
 - There was no delay in turn around time.
- o 2212017 Other
 - The unit's turn around time took longer than expected due to one or more factors not otherwise specified here.
- 2212019 Rendezvous Transport Unavailable
 - The unit's turnaround time was slowed due to the delay or unavailability of an additional mode of transportation needed to achieve the shortest time to achieve readiness for the next call.
- 2212021 Route Obstruction (e.g., Train)
 - One or more obstacles encountered while attempting to achieve readiness for the next call which slowed the unit's progress (e.g., train, drawbridge, bridge or road washout, wildfire, mud/rock slide, parade, marathon).
- 2212023 Staff Delay
 - The transfer of patient care and preparedness for the next call was slowed due to crewmember availability, distance to station, or other issues (e.g., full crew not present, illness, injury, family emergency).
- o 2212025 Traffic
 - Vehicular congestion or other roadway conditions (e.g., navigating a parking area, entrance/egress from a parade/concert, incident is on a busy roadway, other responding resource is obstructed) encountered at the EMS event/incident extended turnaround time.
- o 2212027 Vehicle Crash of this Unit

- The unit's involvement in a crash slowed or prevented its unit's readiness progress for the next call.
- 2212029 Vehicle Failure of this Unit
 - Progress achieve unit readiness was slowed or prevented by vehicle issues (e.g., failure to start, a flat tire, a broken axle).
- o 2212031 Weather
 - Weather conditions slowed or prevented the unit's achievement of unit readiness (e.g., flood, blizzard).
- o 2212033 EMS Crew Accompanies Patient for Facility Procedure
 - The EMS crew accompanied the patient for a procedure that delayed the units achievement of unit readiness.
- *eResponse.13 EMS Vehicle (Unit) Number:

The unique physical vehicle number of the responding unit.

• *eResponse.14 - EMS Unit Call Sign:

The EMS unit number used to dispatch and communicate with the unit. This may be the same as the EMS Unit/Vehicle Number in many agencies.

- eResponse.16 Vehicle Dispatch Location:
 - The geographic location of the EMS unit or crew at the time of dispatch.
- eResponse.17 Vehicle Dispatch GPS Location:

The GPS coordinates associated with the EMS unit at the time of dispatch documented in decimal degrees.

- eResponse.18 Vehicle Dispatch Location US National Grid Coordinates: The US National Grid Coordinates for the EMS Vehicle's Dispatch Location.
- eResponse.19 Beginning Odometer Reading:

The mileage (counter or odometer reading) of the vehicle at the beginning of the call (when the wheels begin moving). If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of Boat, Fixed Wing, or Rotor Craft in eDisposition.16 (EMS Transport Method).

eResponse.20 - On-Scene Odometer Reading:

The mileage (counter or odometer reading) of the vehicle when it arrives at the scene. If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of Boat, Fixed Wing, or Rotor Craft in eDisposition.16 (EMS Transport Method).

- eResponse.21 Patient Destination Odometer Reading:
 - The mileage (counter or odometer reading) of the vehicle when it arrives at the patient's destination. If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of Boat, Fixed Wing, or Rotor Craft in eDisposition.16 (EMS Transport Method).
- eResponse.22 Ending Odometer Reading:

If using a counter, this is the mileage traveled beginning with dispatch through the transport of the patient to

their destination and ending when back in service, starting from 0. If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of boat, Fixed Wing, or Rotor Craft in eDisposition.16.

• *eResponse.23 - Response Mode to Scene:

The indication whether the response was emergent or non-emergent. An emergent response is an immediate response.

- 2223001 Emergent (Immediate Response)
- 2223003 Emergent Downgraded to Non-Emergent
- o 2223005 Non-Emergent
- 2223007 Non-Emergent Upgraded to Emergent

• *eResponse.24 - Additional Response Mode Descriptors:

The documentation of response mode techniques used for this EMS response.

- o 2224001 Intersection Navigation-Against Normal Light Patterns
 - Traveled through intersections controlled by traffic lights or stop signs against the right-of-way according to standard, nonemergency traffic laws with, or without, the use of emergency lights and sirens (e.g., approached a red traffic light and proceeded through the intersection, while the light was still red, when there was cross-road traffic traveling through the intersection on their own green light).
- 2224003 Intersection Navigation-With Automated Light Changing Technology
 - Intersection navigated with the use of technology for traffic signal preemption (also called traffic signal prioritization) to manipulate traffic signals in the path of an emergency vehicle. These types of systems allow the normal operation of traffic lights to be preempted or controlled using radio or strobe light based signaling systems and may be used in conjunction with emergency lights and sirens.
- 2224005 Intersection Navigation-With Normal Light Patterns
 - Traveled through intersection-controlled traffic lights or stop signs according to standard, non- emergency state and federal traffic laws (e.g., approached a red traffic light and waited for the light to change to green before proceeding through the intersection).
- o 2224007 Scheduled
 - For use when there is a planned "Unit Arrived on Scene Date/Time."
- 2224009 Speed-Enhanced per Local Policy
 - For use when an emergency service vehicle exceeded posted speed limits within the limits of state or local laws or agency policy when responding to an emergency (e.g., some laws allow emergency services vehicles to exceed posted speed limits by 10 mph when responding to an emergency event, provided the vehicle driver exercises due caution/regard).
- o 2224011 Speed-Normal Traffic
 - Adhered to posted speed limits when responding to a request for service, regardless of dispatch priority and use of lights and sirens, in order to arrive in a safe and timely manner.

- o 2224013 Unscheduled
 - For use when there is not a planned "Unit Arrived on Scene" and it is not an emergency response in eResponse.05.
- o 2224015 Lights and Sirens
 - Used emergency lights and audible warning devices on a responding vehicle, to manage and alert traffic that they need to yield the right-of- way to the emergency vehicle.
- 2224017 Lights and No Sirens
 - This traffic alert mode uses lights only without any use of audible warning devices.
- o 2224019 No Lights or Sirens
 - Responded in an emergency services vehicle without the use of any emergency traffic alert lights or sirens.
- 2224021 Initial No Lights or Sirens, Upgraded to Lights and Sirens
 - A response where the responding vehicle initiated the response without the use of lights or sirens, but either received new information from the incident increasing the response priority, or where traffic conditions changed requiring the use of lights and sirens for a safe and timely response.
- o 2224023 Initial Lights and Sirens, Downgraded to No Lights or Sirens
 - A response where the responding vehicle initiated the response with the use of lights or sirens, but either received new information from the incident decreasing the response priority, or where traffic conditions changed and the use of lights and sirens was no longer required for a safe and timely response.

eDispatch Section

• *eDispatch.01 - Dispatch Reason:

The dispatch reason reported to the responding unit.

- o 2301001 Abdominal Pain/Problems
- 2301003 Allergic Reaction/Stings
- o 2301005 Animal Bite
- o 2301007 Assault
- o 2301009 Automated Crash Notification
- o 2301011 Back Pain (Non-Traumatic)
- o 2301013 Breathing Problem
- o 2301015 Burns/Explosion
- 2301017 Carbon Monoxide/Hazmat/Inhalation/CBRN
- 2301019 Cardiac Arrest/Death
- 2301021 Chest Pain (Non-Traumatic)
- 2301023 Choking
- o 2301025 Convulsions/Seizure
- 2301027 Diabetic Problem
- 2301029 Electrocution/Lightning
- o 2301031 Eye Problem/Injury
- o 2301033 Falls

- o 2301035 Fire
- o 2301037 Headache
- 2301039 Healthcare Professional/Admission
- 2301041 Heart Problems/AICD
- 2301043 Heat/Cold Exposure
- o 2301045 Hemorrhage/Laceration
- 2301047 Industrial Accident/Inaccessible Incident/Other Entrapments (Non-Vehicle)
- 2301049 Medical Alarm
- 2301051 No Other Appropriate Choice
- 2301053 Overdose/Poisoning/Ingestion
- o 2301055 Pandemic/Epidemic/Outbreak
- 2301057 Pregnancy/Childbirth/Miscarriage
- 2301059 Psychiatric Problem/Abnormal Behavior/Suicide Attempt
- o 2301061 Sick Person
- o 2301063 Stab/Gunshot Wound/Penetrating Trauma
- 2301065 Standby
- 2301067 Stroke/CVA
- o 2301069 Traffic/Transportation Incident
- 2301071 Transfer/Interfacility/Palliative Care
- 2301073 Traumatic Injury
- o 2301075 Well Person Check
- 2301077 Unconscious/Fainting/Near-Fainting
- o 2301079 Unknown Problem/Person Down
- 2301081 Drowning/Diving/SCUBA Accident
- 2301083 Air medical Transport
- o 2301085 Altered Mental Status
- o 2301087 Intercept
- o 2301089 Nausea
- 2301091 Vomiting

• *eDispatch.02 - EMD Performed:

Indicates whether Emergency Medical Dispatch (EMD) instructions were provided during the call.

Possible Values:

- o 2302001 No
- 2302003 Yes, With Pre-Arrival Instructions
- o 2302005 Yes, Without Pre-Arrival Instructions
- o 2302007 Yes, Unknown if Pre-Arrival Instructions Given

• eDispatch.03 - EMD Card Number:

The Emergency Medical Dispatch (EMD) card reference number used during call processing.

• eDispatch.04 - Dispatch Center Name or ID:

The name or identification number of the dispatch center responsible for dispatching the EMS unit.

*eDispatch.05 - Dispatch Priority:

The acuity level assigned to the call based on information gathered during the dispatch process.

- o 2305001 Critical
 - A patient condition that is immediately life-threatening or poses an immediate risk of significant morbidity without rapid intervention.
 Examples often include cardiac arrest, severe trauma, respiratory failure, or major stroke.
- 2305003 Emergent
 - A serious condition that is not immediately life-threatening but requires prompt medical attention to prevent deterioration. This includes issues such as moderate respiratory distress, altered mental status, or chest pain with stable vitals.
- o 2305005 Lower Acuity
 - A minor medical or trauma-related condition that is not timesensitive and does not require immediate intervention. Examples include minor cuts, flu-like symptoms, or chronic issue flare-ups without acute distress.
- o 2305007 Non-Acute [e.g., Scheduled Transfer or Standby]
 - A condition that is not urgent, time-sensitive, or medically significant at the time of dispatch. These patients typically require basic assistance or evaluation without any signs of acute illness or injury. Examples may include non-injury lift assists, welfare checks, or transportation for non-medical reasons.
- Patient Acuity definitions related to "Critical, Emergent, and Lower Acuity" can be found in the National EMS Core Content document from NHTSA EMS (DOT HS 809-898 July 2005) at
 - http://www.nhtsa.gov/people/injury/ems/emscorecontent/images/EMSCoreContent.pdf
 - For Air Medical Transports the most appropriate values choices should be limited to two: Emergent and Non-Acute.
- eDispatch.06 Unit Dispatched CAD Record ID:

Unique identifier from the Computer-Aided Dispatch (CAD) system associated with the dispatched EMS unit.

eCrew Section

*eCrew.01 - Crew Member ID:

A unique identification number or code assigned to each crew member participating in the response.

Possible Values: Alphanumeric codes specific to the agency's personnel system.

• *eCrew.02 - Crew Member Level:

The certification or licensure level of the crew member at the time of the response.

- o 9925001 Advanced Emergency Medical Technician (AEMT)
- o 9925002 Emergency Medical Technician Intermediate
- 9925003 Emergency Medical Responder (EMR)

- 9925005 Emergency Medical Technician (EMT)
- o 9925007 Paramedic
- 9925023 Other Healthcare Professional
- 9925025 Other Non-Healthcare Professional
- 9925027 Physician
- o 9925029 Respiratory Therapist
- o 9925031 Student
- o 9925033 Critical Care Paramedic
- o 9925035 Community Paramedicine
- 9925037 Nurse Practitioner
- o 9925039 Physician Assistant
- 9925041 Licensed Practical Nurse (LPN)
- 9925043 Registered Nurse

*eCrew.03 - Crew Member Response Role:

The role or function the crew member performed during the EMS response.

- o 2403001 Driver/Pilot-Response
- o 2403003 Driver/Pilot-Transport
- o 2403005 Other
- o 2403007 Other Patient Caregiver-At Scene
- 2403009 Other Patient Caregiver-Transport
- 2403011 Primary Patient Caregiver-At Scene
- 2403013 Primary Patient Caregiver-Transport

eTimes Section

*eTimes.01 - PSAP Call Date/Time:

The date/time when the 911 call was received by the Public Safety Answering Point (PSAP).

• *eTimes.02 - Dispatch Notified Date/Time:

The date/time dispatch was notified by the 911 call taker (if different from the PSAP).

• *eTimes.03 - Unit Notified by Dispatch Date/Time:

The date/time the responding unit was notified by dispatch.

• eTimes.04 - Dispatch Acknowledged Date/Time:

The date/time the dispatch was acknowledged by the EMS unit.

• *eTimes.05 - Unit En Route Date/Time:

The date/time the unit started moving toward the incident scene.

• *eTimes.06 - Unit Arrived on Scene Date/Time:

The date/time the unit arrived at the incident scene.

*eTimes.07 - Arrived at Patient Date/Time:

The date/time the EMS personnel reached the patient.

• *eTimes.08 - Transfer of EMS Patient Care Date/Time:

The date/time the patient was transferred from this EMS agency to another for care.

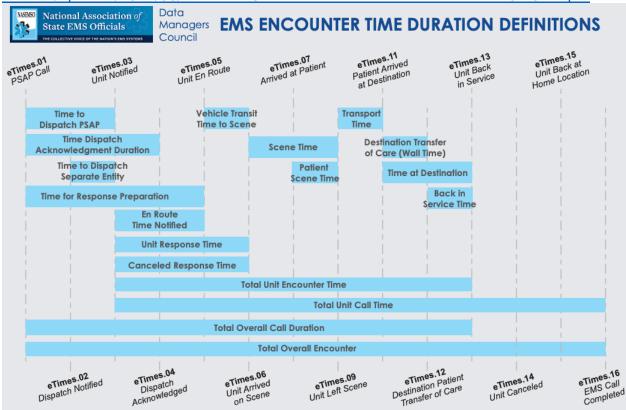
*eTimes.09 - Unit Left Scene Date/Time:

The date/time the EMS unit left the incident scene.

- eTimes.10 Arrival at Destination Landing Area Date/Time:
 The date/time an air medical vehicle arrived at the destination landing area.
- *eTimes.11 Patient Arrived at Destination Date/Time:
 The date/time the EMS unit arrived at the hospital or destination with the patient.
- *eTimes.12 Destination Patient Transfer of Care Date/Time:
 The date/time the patient was transferred to the hospital or destination staff.
- *eTimes.13 Unit Back in Service Date/Time:
 The date/time the EMS unit was back in service and ready for another call.
- *eTimes.14 Unit Canceled Date/Time:
 The date/time the unit was canceled before arrival or patient contact.
- *eTimes.15 Unit Back at Home Location Date/Time:
 The date/time the responding unit returned to its home or service area.

 *eTimes 16 FMS Call Completed Date/Time:
- *eTimes.16 EMS Call Completed Date/Time:
 The date/time when all EMS-related activities were completed, including cleaning and restocking.
- eTimes.17 Unit Arrived at Staging Area Date/Time:
 The date/time the unit arrived at a staging area before entering the scene for safety or operational reasons.

https://nemsis.org/wpcontent/uploads/2024/06/NASEMSO EMS Time Duration Definitions-6-18-24.pdf



These data elements are critical for measuring EMS response times, patient care intervals, and overall operational efficiency.

ePatient Section

ePatient.01 - EMS Patient ID:

A unique identifier assigned to the patient by the EMS agency.

• *ePatient.02 - Last Name:

The patient's family (last) name.

• *ePatient.03 - First Name:

The patient's given (first) name.

• ePatient.04 - Middle Initial/Name:

The patient's middle name or initial.

*ePatient.05 - Patient's Home Address:

The residential address of the patient.

*ePatient.06 - Patient's Home City:

The city where the patient resides.

*ePatient.07 - Patient's Home County:

The county or parish of the patient's residence.

*ePatient.08 - Patient's Home State:

The state where the patient resides.

• *ePatient.09 - Patient's Home ZIP Code:

The ZIP code of the patient's residence.

ePatient.10 - Patient's Country of Residence:

The country where the patient resides.

• ePatient.11 - Patient Home Census Tract:

Census tract of the patient's residence for demographic and analysis purposes.

• ePatient.12 - Social Security Number:

The patient's Social Security Number, if collected.

*ePatient.13 - Gender:

The patient's gender as identified during the encounter.

- o 9906001 Female
- o 9906003 Male
- o 9906007 Female-to-Male, Transgender Male
- o 9906009 Male-to-Female, Transgender Female
- o 9906011 Other, neither exclusively male or female
- 9906005 Unknown (Unable to Determine)

*ePatient.14 - Race:

The patient's race, as defined by standard classification systems.

NEMSIS Comment: Definitions for racial and ethnic categories are established by the Office of Management and Budget (OMB) Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity.

https://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-089.html

2514001 American Indian or Alaska Native
 A person having origins in any of the original peoples of North, Central, and South America and who maintains tribal affiliation or community attachment.

o 2514003 Asian

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

o 2514005 Black or African American

A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."

o 2514007 Hispanic or Latino

When selecting this value, you should also select at least one additional value (e.g., "Hispanic" and "Black", or "Hispanic" and "White").

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic or Latino."

- 2514009 Native Hawaiian or Other Pacific Islander
 A person having origins in any of the original peoples of Hawaii, Guam,
 Samoa, or other Pacific Islands.
- 2514011 White
 A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

*ePatient.15 - Age:

The patient's age at the time of the incident.

• *ePatient.16 - Age Units:

The unit of measurement for age (e.g., years, months, days).

- o 2516001 Days
- o 2516003 Hours
- o 2516005 Minutes
- o 2516007 Months
- o 2516009 Years

• *ePatient.17 - Date of Birth:

The patient's date of birth.

ePatient.18 - Patient's Phone Number:

The patient's phone number, including type (home, mobile, work).

- o 9913001 Fax
- o 9913003 Home
- o 9913005 Mobile
- o 9913007 Pager
- o 9913009 Work

ePatient.19 - Patient's Email Address:

Email address for patient communication and billing.

ePatient.20 - State Issuing Driver's License:

The state that issued the patient's driver's license.

• ePatient.21 - Driver's License Number:

The patient's driver's license number.

ePatient.22 - Alternate Home Residence:

Documentation of alternate residence status, such as homeless or foreign visitor.

- 2522001 Homeless
- o 2522003 Migrant Worker
- 2522005 Foreign Visitor

ePayment Section

*ePayment.01 - Primary Method of Payment:

The primary payment method or insurance type associated with the EMS encounter.2601001 Insurance

- o 2601003 Medicaid
- o 2601005 Medicare
- 2601007 Not Billed (for any reason)
- o 2601009 Other Government
- 2601011 Self Pay
- 2601013 Workers Compensation
- 2601015 Payment by Facility
- 2601017 Contracted Payment
- o 2601019 Community Network
- 2601021 No Insurance Identified
- 2601023 Other Payment Option

• ePayment.02 - Physician Certification Statement:

Documentation indicating whether a physician's certification statement was provided.

- o 9922001 No
- o 9922003 Unknown
- o 9922005 Yes

• ePayment.03 - Date Physician Certification Statement Signed:

The date the physician certification statement was signed.

• ePayment.04 - Reason for Physician Certification Statement:

The reason a physician certification statement was required.

- 2604001 Bed Confined
- 2604003 Cardiac/Hemodynamic monitoring required during transport
- 2604005 Confused, combative, lethargic, comatose
- o 2604007 Contractures
- 2604009 Danger to self or others-monitoring
- 2604011 Danger to self or others-seclusion (flight risk)
- 2604013 DVT requires elevation of lower extremity
- o 2604015 IV medications/fluids required during transport
- 2604017 Moderate to severe pain on movement
- 2604019 Morbid Obesity requires additional personnel/equipment to handle
- 2604021 Non-healing fractures
- 2604023 Orthopedic device (backboard, halo, use of pins in traction, etc.)
 requiring special handling in transit

- 2604025 Restraints (Physical or Chemical) anticipated or used during transport
- 2604027 Risk of falling off wheelchair or stretcher while in motion (not related to obesity)
- 2604029 Severe Muscular weakness and de-conditioned state precludes any significant physical activity
- 2604031 Special handling en route-Isolation
- 2604033 Third Party assistance/attendant required to apply, administer, or regulate or adjust oxygen en route
- 2604035 Unable to maintain erect sitting position in a chair for time needed to transport, due to moderate muscular
- weakness and de-conditioning.
- 2604037 Unable to sit in chair or wheelchair due to Grade II or greater decubitus ulcers on buttocks.

ePayment.05 - Healthcare Provider Type Signing Physician Certification Statement:

Type of provider signing the certification statement.

- o 2605001 Clinical Nurse Specialist
- o 2605003 Discharge Planner
- 2605005 Physician (MD or DO)
- o 2605007 Physician Assistant
- o 2605009 Registered Nurse
- o 2605011 Registered Nurse Practitioner
- 2605013 Licensed Practical Nurse (LPN)
- o 2605015 Case Manager
- o 2605017 Social Worker

ePayment.06 - Last Name of Individual Signing Physician Certification Statement:

Last name of the signing provider.

• ePayment.07 - First Name of Individual Signing Physician Certification Statement:

First name of the signing provider.

• ePayment.08 - Patient Resides in Service Area:

Indicates whether the patient resides within the EMS service area.

- o 2608001 Resident Within EMS Service Area
- 2608003 Not a Resident Within EMS Service Area

• ePayment.09 - Insurance Company ID:

The unique ID of the patient's insurance company.

• ePayment.10 - Insurance Company Name:

Name of the insurance company covering the patient.

• ePayment.11 - Insurance Company Billing Priority:

Priority of the insurance for billing purposes (e.g., primary, secondary).

- o 2611001 Other
- 2611003 Primary
- 2611005 Secondary
- o 2611007 Tertiary

- o 2611009 Payer Responsibility Four
- 2611011 Payer Responsibility Five
- o 2611013 Payer Responsibility Six
- 2611015 Payer Responsibility Seven
- 2611017 Payer Responsibility Eight
- 2611019 Payer Responsibility Nine
- 2611021 Payer Responsibility Ten
- 2611023 Payer Responsibility Eleven
- o 2611025 Unknown
- ePayment.12 Insurance Company Address:

Mailing address of the insurance company.

- ePayment.13 Insurance Company City: City of the insurance company's address.
- ePayment.14 Insurance Company State: State of the insurance company's location.
- ePayment.15 Insurance Company ZIP Code: ZIP code of the insurance company.
- ePayment.16 Insurance Company Country: Country where the insurance company is based.
- ePayment.17 Insurance Group ID: Group ID of the patient's insurance plan.
- ePayment.18 Insurance Policy ID Number: Policy number under which the patient is covered.
- ePayment.19 Last Name of the Insured: Last name of the insured individual.
- ePayment.20 First Name of the Insured: First name of the insured individual.
- ePayment.21 Middle Initial/Name of the Insured: Middle name or initial of the insured individual.
- ePayment.22 Relationship to the Insured:

Relationship of the patient to the insured (e.g., self, spouse).

- o 2622001 Self
- o 2622003 Spouse
- o 2622005 Child/Dependent
- o 2622009 Cadaver Donor
- 2622011 Employee
- 2622013 Life/Domestic Partner
- o 2622015 Organ Donor
- o 2622017 Unknown
- 2622019 Other Relationship
- ePayment.23 Closest Relative/Guardian Last Name:

Last name of the patient's closest relative or guardian.

- ePayment.24 Closest Relative/Guardian First Name:
 - First name of the patient's closest relative or guardian.

• ePayment.25 - Closest Relative/Guardian Middle Initial/Name: Middle name of the patient's closest relative or guardian.

- ePayment.26 Closest Relative/Guardian Street Address: Address of the patient's closest relative or guardian.
- ePayment.27 Closest Relative/Guardian City: City of the closest relative or guardian's residence.
- ePayment.28 Closest Relative/Guardian State: State of the relative or guardian's residence.
- ePayment.29 Closest Relative/Guardian ZIP Code: ZIP code of the closest relative or guardian.
- ePayment.30 Closest Relative/Guardian Country: Country of residence of the closest relative or guardian.
- ePayment.31 Closest Relative/Guardian Phone Number: Phone number of the closest relative or guardian.
 - o 9913001 Fax
 - o 9913003 Home
 - o 9913005 Mobile
 - o 9913007 Pager
 - o 9913009 Work
- ePayment.32 Closest Relative/Guardian Relationship:

Relationship of the closest relative or guardian to the patient.

- 2632001 Appointed Guardian
- o 2632003 Child/Dependent
- o 2632005 Father
- o 2632007 Mother
- o 2632009 Other (Non-Relative)
- 2632011 Other (Relative)
- o 2632013 Sibling
- o 2632015 Spouse
- 2632017 Employee
- o 2632019 Life/Domestic Partner
- o 2632021 Unknown
- *ePayment.33 Patient's Employer:

Name of the patient's employer.

• ePayment.34 - Patient's Employer's Address:

Address of the patient's employer.

ePayment.35 - Patient's Employer's City:

City where the patient's employer is located.

• ePayment.36 - Patient's Employer's State:

State of the patient's employer.

• ePayment.37 - Patient's Employer's ZIP Code:

ZIP code of the patient's employer.

• ePayment.38 - Patient's Employer's Country:

Country of the patient's employer.

• ePayment.39 - Patient's Employer's Primary Phone Number:

Primary contact number of the patient's employer.

- o 9913001 Fax
- o 9913003 Home

- 9913005 Mobile
- o 9913007 Pager
- o 9913009 Work

• ePayment.40 - Response Urgency:

Level of urgency for the EMS response (e.g., immediate, non-immediate).

- o 2640001 Immediate
- o 2640003 Non-Immediate

• ePayment.41 - Patient Transport Assessment:

Assessment of the patient's need for transport.

- o 2641001 Unable to sit without assistance
- 2641003 Unable to stand without assistance
- 2641005 Unable to walk without assistance

• ePayment.42 - Specialty Care Transport Care Provider:

Provider responsible for specialty care transport services.

- 2642001 Advanced EMT-Paramedic
- o 2642003 Nurse
- 2642005 Nurse Practitioner
- 2642007 Physician (MD, DO)
- o 2642009 Physician Assistant
- 2642011 Emergency Medical Responder (EMR)
- 2642013 Emergency Medical Technician (EMT)
- 2643014 Emergency Medical Technician Intermediate
- 2642015 Advanced Emergency Medical Technician (AEMT)
- 2642017 Paramedic
- o 2642027 Other Healthcare Professional
- 2642029 Other Non-Healthcare Professional
- 2642031 Respiratory Therapist
- o 2642033 Student
- 2642035 Critical Care Paramedic
- 2642037 Community Paramedicine
- 2642039 Registered Nurse

ePayment.44 - Ambulance Transport Reason Code:

Reason for the ambulance transport request.

- A Patient was transported to the nearest facility for care of symptoms, complaints, or both
- B Patient was transported for the benefit of a preferred physician
- C Patient was transported for the nearness of family members
- D Patient was transported for the care of a specialist or for availability of equipment
- E Patient was transferred to a Rehabilitation Facility

• ePayment.45 - Round Trip Purpose Description:

Purpose of the round-trip ambulance transport.

• ePayment.46 - Stretcher Purpose Description:

Reason for stretcher use during transport.

• ePayment.47 - Ambulance Conditions Indicator:

Conditions requiring ambulance use.

- 01 Patient was admitted to a hospital
- 04 Patient was moved by stretcher
- o 05 Patient was unconscious or in shock
- o 06 Patient was transported in an emergency situation
- 07 Patient had to be physically restrained
- 08 Patient had visible hemorrhaging
- 09 Ambulance service was medically necessary
- 12 Patient is confined to a bed or chair (Use code 12 to indicate patient was bedridden during transport.)

• ePayment.48 - Mileage to Closest Hospital Facility:

Mileage from the scene to the closest hospital.

• ePayment.49 - ALS Assessment Performed and Warranted:

Whether an Advanced Life Support (ALS) assessment was performed and medically necessary.

- o 9923001 No
- o 9923003 Yes

*ePayment.50 - CMS Service Level:

Centers for Medicare & Medicaid Services (CMS) designated service level (e.g., ALS, BLS).

- o 2650001 ALS, Level 1
 - Transportation by ground ambulance vehicle and the provision of medically necessary supplies and services including the provision of at least one ALS intervention by ALS personnel trained to the level of the EMT-Intermediate or paramedic.
 - ALS Intervention: An ALS intervention must be medically necessary to qualify as an intervention for payment for an ALS level of service. An ALS intervention applies only to ground transports.
- 2650003 ALS, Level 1 Emergency
 When medically necessary, the provision of ALS1 services (ALS
 - assessment or ALS intervention per state guidelines), are performed in the context of an emergency response and responds immediately. ALS personnel trained to the level of the EMT- Intermediate or paramedic. ALS Assessment: An ALS assessment is an assessment performed by an ALS crew as part of an emergency response that was necessary because
 - ALS crew as part of an emergency response that was necessary because the patient's reported condition at the time of dispatch was such that only an ALS crew was qualified to perform the assessment.
 - ALS Intervention: An ALS intervention must be medically necessary to qualify as an intervention for payment for an ALS level of service. An ALS intervention applies only to ground transports.
- o 2650005 ALS, Level 2
 - Transportation by ground ambulance vehicle staffed with ALS personnel and the provision of medically necessary supplies and services including:

- 1. At least three separate administrations of one or more medications by intravenous push/bolus or by continuous infusion (excluding crystalloid fluids), OR
- 2. Ground ambulance transport, medically necessary supplies and services, and the provision of at least one of the following ALS2 procedures:
 - a. Manual defibrillation/cardioversion;
 - b. Endotracheal intubation;
 - c. Central venous line;
 - d. Cardiac pacing;
 - e. Chest decompression;
 - f. Surgical airway;
 - g. Intraosseous line.

Application: Crystalloid fluids include fluids such as 5 percent Dextrose in water, Saline and Lactated Ringer's. Medications that are administered by other means (e.g., intramuscular/subcutaneous injection, oral, sublingually, or nebulized) do not qualify to determine whether the ALS2 level rate is payable. The criterion of multiple administrations of the same drug requires a suitable quantity and amount of time between administrations that is in accordance with standard medical practice guidelines.

o 2650007 BLS

Transportation by ground ambulance vehicle as defined by the state. The ambulance must be staffed by an individual who is qualified as an EMT per state guidelines.

- o 2650009 BLS, Emergency
 - When the ambulance provider or supplier is called, it responds immediately. The ambulance must be staffed by an individual who is qualified as an EMT per state guidelines.
- 2650011 Fixed Wing (Airplane) Furnished when the beneficiary's medical condition is such that transport by ground ambulance, in whole or in part, is not appropriate. Generally, transport by fixed-wing air ambulance may be necessary because the beneficiary's condition requires rapid transport to a treatment facility, and either great distances or other obstacles (e.g., heavy traffic) preclude rapid delivery to the nearest appropriate facility. Transport by fixed-wing air ambulance may also be necessary because the beneficiary is inaccessible by a ground or water ambulance vehicle.
- 2650013 Paramedic Intercept
 - ALS emergency services, provided by an entity that does not provide the ambulance transport to a BLS level of service, is dispatched to transport a patient.
 - Paramedic intercept services furnished on or after March 1, 1999, may be payable separate from the ambulance transport, subject to the requirements specified below.

The intercept service(s) is:

- Furnished in a rural area;
- _Furnished under a contract with one or more volunteer ambulance services; and, medically necessary based on the condition of the beneficiary receiving the ambulance service.

In addition, the volunteer ambulance service involved must:

- _Furnish services only at the BLS level at the time of the intercept;
 and.
- Be prohibited by State law from billing anyone for any service.

Finally, the entity furnishing the ALS paramedic intercept service must

• _Bill all recipients who receive ALS paramedic intercept services from the entity, regardless of whether or not those recipients ae Medicare beneficiaries.

For purposes of the paramedic intercept benefit, a rural area is an area that is designated as rural by a state law or regulation or any area outside of a Metropolitan Statistical Area or in New England, outside a New England County Metropolitan Area as defined by the Office of Management and Budget. The current list of these areas is periodically published in the Federal Register.

See the Medicare Claims Processing Manual, Chapter 15, "Ambulance," §20.1.4 for payment of paramedic intercept services.

Services in a Rural Area: Services that are furnished:

- 1. In an area outside a Metropolitan Statistical Area (MSA); or,
- 2. In New England, outside a New England County Metropolitan Area (NECMA); or,
- 3. An area identified as rural using the Goldsmith modification even though the area is within an MSA.
- o 2650015 Specialty Care Transport
 - The interfacility transportation of a critically injured or ill beneficiary by a ground ambulance vehicle at a level of service beyond the scope of the EMT-Paramedic. This transport is necessary when a beneficiary's condition requires ongoing care that must be furnished by one or more health professionals in an appropriate specialty area (e.g., emergency or critical care nursing, emergency medicine, respiratory care, cardiovascular care, or a paramedic with additional training).

Additional training: the specific additional training that a state requires a paramedic to complete in order to qualify to furnish specialty care to a critically ill or injured patient during a specialty care transport.

- 2650017 Rotary Wing (Helicopter)
- Furnished when the beneficiary's medical condition is such that transport by ground ambulance, in whole or in part, is not appropriate. Generally, transport by rotary-wing air ambulance may be necessary because the beneficiary's condition requires rapid transport to a treatment facility, and either great distances or other obstacles (e.g., heavy traffic) precludes such rapid delivery to the nearest appropriate facility. Transport by rotarywing air ambulance may also be necessary because the beneficiary is inaccessible by a ground or water ambulance vehicle.
- ePayment.51 EMS Condition Code:

CMS condition code applicable to the transport.

• ePayment.52 - CMS Transportation Indicator:

Indicates CMS transportation criteria were met.

- C1 Interfacility Transport (Requires Higher level of care)
- C2 Interfacility Transport (service not available)
- C3 Emergency Trauma Dispatch Condition Code (Major Incident or Mechanism of Injury)
- C4 Medically Necessary Transport (Facility on Divert or Services Unavailable)
- C5 BLS Transport of ALS Patient (ALS not available)
- C6 ALS Response (Based on Dispatch Info) to BLS Patient (Condition)
- C7 IV Medications required en route (ALS)
- D1 Long Distance-patient's condition requires rapid transportation over a long distance
- o D2 Rare Circumstances, Traffic Patterns Precludes Ground Transport
- D3 Time to the closest appropriate hospital due to the patient's condition precludes ground transport; maximize
- clinical benefits
- D4 Pick up Point not Accessible by Ground Transport
- ePayment.53 Transport Authorization Code:

Prior authorization code from the payer.

ePayment.54 - Prior Authorization Code Payer:

Insurance payer that provided the prior authorization code.

ePayment.55 - Supply Item Used Name:

Name of the supply item used during patient care.

ePayment.56 - Number of Supply Item(s) Used:

Quantity of each supply item used.

• ePayment.57 - Payer Type:

Type of payer (e.g., private insurance, Medicare, Medicaid).

- 11 Other Non-Federal Programs
- 12 Preferred Provider Organization (PPO)
- 13 Point of Service (POS)
- 14 Exclusive Provider Organization (EPO)
- 15 Indemnity Insurance
- 16 Health Maintenance Organization (HMO) Medicare Risk
- 17 Dental Maintenance Organization

- AM Automobile Medical
- o BL Blue Cross/Blue Shield
- CH Champus
- o CI Commercial Insurance Co.
- DS Disability
- FI Federal Employees Program
- HM Health Maintenance Organization
- LM Liability Medical
- MA Medicare Part A
- MB Medicare Part B
- MC Medicaid
- OF Other Federal Program
- o TV Title V
- VA Veteran Affairs Plan
- WC Workers' Compensation Health Claim
- ZZ Mutually Defined
- ePayment.58 Insurance Group Name:

Group name for the insurance policy.

• ePayment.59 - Insurance Company Phone Number:

Phone number of the insurance company.

- o 9913001 Fax
- o 9913003 Home
- o 9913005 Mobile
- o 9913007 Pager
- o 9913009 Work
- ePayment.60 Date of Birth of the Insured:

Birth date of the insured individual.

eScene Section

*eScene.01 - First EMS Unit on Scene:

Indicates if this EMS unit was the first among all EMS agencies to arrive on the scene.

- o 9923001 No
- o 9923003 Yes
- *eScene.02 Other EMS or Public Safety Agencies at Scene:

Names of other EMS or public safety agencies present at the scene.

• *eScene.03 - Other EMS or Public Safety Agency ID Number:

Identification number of other EMS or public safety agencies at the scene.

eScene.04 - Type of Other Service at Scene:

Type of service provided by other agencies at the scene.

- o 2704001 EMS Mutual Aid
- o 2704003 Fire
- o 2704005 First Responder
- o 2704007 Hazmat
- o 2704009 Law

- o 2704011 Other
- o 2704013 Other EMS Agency
- 2704015 Other Health Care Provider
- o 2704017 Rescue
- o 2704019 Utilities

• eScene.05 - Date/Time Initial Responder Arrived on Scene:

Time when the first responder arrived at the scene.

• *eScene.06 - Number of Patients at Scene:

Number of patients at the scene.

o 2707001 Multiple

There was more than one patient at the scene.

o 2707003 None

This ambulance and crew were unable to locate anyone at the scene locally defined as a patient.

o 2707005 Single

There was one patient at the scene.

• *eScene.07 - Mass Casualty Incident:

Indicates if the incident involved a mass casualty situation.

- o 9923001 No
- o 9923003 Yes

*eScene.08 - Triage Classification for MCI Patient:

Triage category assigned to a patient during a mass casualty incident.

- o 2708001 Red Immediate
- o 2708003 Yellow Delayed
- o 2708005 Green Minimal (Minor)
- o 2708007 Gray Expectant
- o 2708009 Black Deceased

*eScene.09 - Incident Location Type:

Type of location where the incident occurred (e.g., residence, roadway, public building).

• eScene.10 - Incident Facility Code:

Code representing the facility where the incident occurred.

eScene.11 - Scene GPS Location:

Latitude and longitude coordinates of the incident location.

• eScene.12 - Scene US National Grid Coordinates:

US National Grid coordinates for the incident location.

• eScene.13 - Incident Facility or Location Name:

Name of the facility or location where the incident occurred.

• eScene.14 - Mile Post or Major Roadway:

Nearest mile marker or major roadway associated with the incident.

• *eScene.15 - Incident Street Address:

Street address of the incident location.

• *eScene.16 - Incident Apartment, Suite, or Room:

Apartment, suite, or room number where the incident occurred.

• *eScene.17 - Incident City:

City or township where the incident occurred.

*eScene.18 - Incident State:

State or province of the incident location.

*eScene.19 - Incident ZIP Code:

ZIP code of the incident location.

*eScene.20 - Scene Cross Street or Directions:

Nearest cross streets or directions to the incident location.

• *eScene.21 - Incident County:

County where the incident occurred

eScene.22 - Incident Country:

Country of the incident location.

• eScene.23 - Incident Census Tract:

Census tract where the incident occurred for demographic analysis.

 eScene.24 - First Other EMS or Public Safety Agency at Scene to Provide Patient Care:

Identifies the first other agency at the scene that provided patient care.

- o 9923001 No
- o 9923003 Yes

eSituation Section

• *eSituation.01 - Date/Time of Symptom Onset:

The date and time when the patient's symptoms began or were discovered.

• *eSituation.02 - Possible Injury:

Indication whether or not there was an injury. This data element provides documentation to classify the EMS Reason for the Encounter as either injury or non-injury related based on mechanism and not actual injury.

- o 9922001 No
 - There is no indication of a mechanism of injury AND no injury identified with the encounter.
- o 9922003 Unknown
 - Unable to determine whether there was a mechanism of injury related to the event, and no reported, suspected, or actual injury was identified. Not for use when the encounter is medical/diseaserelated and there was a mechanism of possible injury.
- o 9922005 Yes
 - If there is a reported (patient complaint), suspected, or actual injury, the answer is Yes. If there is an observed or reported mechanism of injury and there is no reported, suspected, or actual injury, then the answer is Yes. Mechanism of injury E.g., Assault, Blunt, Bruising, Burns, Drowning, Falls, Laceration, MVA, Overdose, Penetrating, Self-Harm, Suicide Attempts, etc.
- *eSituation.03 Complaint Type:

The type of patient healthcare complaint being documented.

- 2803001 Chief (Primary)
- o 2803003 Other
- 2803005 Secondary

• *eSituation.04 - Complaint:

The statement of the problem by the patient or the history provider.

• *eSituation.05 - Duration of Complaint:

Length of time the patient has experienced the primary complaint.

• *eSituation.06 - Time Units of Duration of Complaint:

Units of time associated with the duration.

- o 2806001 Seconds
- o 2806003 Minutes
- o 2806005 Hours
- o 2806007 Days
- o 2806009 Weeks
- o 2806011 Months
- o 2806013 Years

• *eSituation.07 - Chief Complaint Anatomic Location:

The primary anatomic location of the chief complaint as identified by EMS personnel.

- o 2807001 Abdomen
- o 2807003 Back
- o 2807005 Chest
- 2807007 Extremity-Lower
- o 2807009 Extremity-Upper
- o 2807011 General/Global
- 2807013 Genitalia
- o 2807015 Head
- o 2807017 Neck

*eSituation.08 - Chief Complaint Organ System:

The primary organ system of the patient injured or medically affected.

- 2808001 Behavioral/Psychiatric
- o 2808003 Cardiovascular
- 2808005 CNS/Neuro
- 2808007 Endocrine/Metabolic
- o 2808009 GI
- 2808011 Global/General
- o 2808013 Lymphatic/Immune
- o 2808015 Musculoskeletal/Skin
- o 2808017 Reproductive
- 2808019 Pulmonary
- o 2808021 Renal

*eSituation.09 - Primary Symptom:

The primary sign and symptom present in the patient or observed by EMS personnel.

*eSituation.10 - Other Associated Symptoms:

Any additional symptoms reported or observed beyond the primary symptom.

*eSituation.11 - Provider's Primary Impression:

The EMS personnel's impression of the patient's primary problem or most significant condition which led to the management given to the patient (treatments, medications, or procedures).

https://git.nemsis.org/projects/NES/repos/michigan/browse/Resources/Impressions%20List%20with%20Labels.xlsx

NASEMSO DMC Statement:

- The National Association of State EMS Officials Data Managers Council affirms the NEMSIS Primary Impression definition.
- The primary impression is based on the clinical judgment of the provider and could be considered a field impression or working/differential diagnosis. The value chosen should reflect the EMS professional's determination of the patient's primary condition needing treatment based on assessment. This treatment approach uses the providers training, experience and patient assessment knowledge/skills.
- Primary refers to the highest acuity condition of the patient, not necessarily the first condition noticed. The majority of the treatment will be focused on addressing this issue. This is the field provider's diagnosis and may not necessarily reflect the hospital diagnosis for medical facility transports based on a physician order. Additionally, this record is part of the patient's medical record, and must not get mistaken for a physician's diagnosis; these values should NOT be linked to the hospital's diagnosis fields or their longitudinal diagnosis record.

• *eSituation.12 - Provider's Secondary Impressions:

The EMS personnel's impression of the patient's secondary problem or most significant condition which led to the management given to the patient (treatments, medications, or procedures).

• https://git.nemsis.org/projects/NES/repos/michigan/browse/Resources/Impressions%20List%20with%20Labels.xlsx

NASEMSO Data Managers Council Statement:

- The National Association of State EMS Officials Data Managers Council affirms the NEMSIS Secondary Impression definition.
- The secondary impression is based on the clinical judgment of the provider and could be considered a field impression or working/differential diagnosis. The value(s) chosen should reflect the EMS professional's determination of any or all of the patient's secondary condition(s) needing treatment based on assessment. This treatment approach uses the providers training, experience and patient assessment knowledge/skills.
- Additionally, this record is part of the patient's medical record, and must not get mistaken for a physician's diagnosis or medical history.

*eSituation.13 - Initial Patient Acuity:

The acuity level of the patient's condition at the time of EMS arrival.

- o 2813001 Critical (Red)
- o 2813003 Emergent (Yellow)
- o 2813005 Lower Acuity (Green)
- o 2813007 Dead without Resuscitation Efforts (Black)
- 2813009 Non-Acute/Routine

*eSituation.14 - Work-Related Illness/Injury:

Indicates if the patient's complaint is related to a workplace incident.

- o 9922001 No
- o 9922003 Unknown
- o 9922005 Yes

eSituation.15 - Patient's Occupational Industry:

The industry in which the patient works (e.g., construction, healthcare).

- 2815001 Accommodation and Food Services
- 2815003 Administrative and Support and Waste Management and Remediation Services
- 2815005 Agriculture, Forestry, Fishing and Hunting
- o 2815007 Arts, Entertainment, and Recreation
- o 2815009 Construction
- o 2815011 Educational Services
- 2815013 Finance and Insurance
- o 2815015 Health Care and Social Assistance
- 2815017 Information
- 2815019 Management of Companies and Enterprises
- 2815021 Manufacturing
- o 2815023 Mining, Quarrying, and Oil and Gas Extraction
- 2815025 Other Services (except Public Administration)
- 2815027 Professional, Scientific, and Technical Services
- o 2815029 Public Administration
- 2815031 Real Estate and Rental and Leasing
- o 2815033 Retail Trade
- 2815035 Transportation and Warehousing
- o 2815037 Utilities
- 2815039 Wholesale Trade

eSituation.16 - Patient's Occupation:

The occupation of the patient.

- 2816001 Architecture and Engineering Occupations
- o 2816003 Arts, Design, Entertainment, Sports, and Media Occupations
- 2816005 Building and Grounds Cleaning and Maintenance Occupations
- 2816007 Business and Financial Operations Occupations
- 2816009 Community and Social Services Occupations
- o 2816011 Computer and Mathematical Occupations
- 2816013 Construction and Extraction Occupations
- 2816015 Educational Instruction and Library Occupations
- 2816017 Farming, Fishing and Forestry Occupations

- 2816019 Food Preparation and Serving Related Occupations
- 2816021 Healthcare Practitioners and Technical Occupations
- 2816023 Healthcare Support Occupations
- o 2816025 Installation, Maintenance, and Repair Occupations
- 2816027 Legal Occupations
- 2816029 Life, Physical, and Social Science Occupations
- 2816031 Management Occupations
- 2816033 Military Specific Occupations
- 2816035 Office and Administrative Support Occupations
- 2816037 Personal Care and Service Occupations
- 2816039 Production Occupations
- 2816041 Protective Service Occupations
- 2816043 Sales and Related Occupations
- o 2816045 Transportation and Material Moving Occupations

• eSituation.17 - Patient Activity:

Activity the patient was performing at the time of the incident or symptom onset.

*eSituation.18 - Date/Time Last Known Well:

The estimated date and time the patient was last known to be well or in their usual state of health. This is described or estimated by the patient, family, and/or bystanders.

• *eSituation.19 - Justification for Transfer or Encounter:

Reason or medical necessity for the EMS transfer or encounter as stated by a provider.

*eSituation.20 - Reason for Interfacility Transfer/Medical Transport:

The general categories of the reason for an interfacility transfer/medical transport.

- 2820001 Cardiac Specialty
- 2820003 Convenience Transfer (Patient Request)
- o 2820005 Diagnostic Testing
- 2820007 Dialysis
- o 2820009 Drug and/or Alcohol Rehabilitation Care
- 2820011 Extended Care
- 2820013 Maternal/Neonatal
- 2820015 Medical Specialty Care (Other, Not Listed)
- 2820017 Neurological Specialty Care
- 2820019 Palliative/Hospice Care (Home or Facility)
- 2820021 Pediatric Specialty Care
- 2820023 Psychiatric/Behavioral Care
- 2820025 Physical Rehabilitation Care
- o 2820027 Return to Home/Residence
- 2820029 Surgical Specialty Care (Other, Not Listed)
- 2820031 Trauma/Orthopedic Specialty Care

elnjury Section

*elnjury.01 - Cause of Injury:

The category of the reported or suspected external cause of the injury.

*elnjury.02 - Mechanism of Injury:

The mechanism of the event that caused the injury.

- o 2902001 Blunt
- o 2902003 Burn
- 2902005 Other
- o 2902007 Penetrating

• *elnjury.03 - Trauma Triage Criteria (High Risk for Serious Injury):

Trauma triage criteria for the red boxes (Injury Patterns and Mental Status and Vital Signs) in the 2021 ACS National Guideline for the Field Triage of Injured Patients.

- 2903001 Amputation proximal to wrist or ankle
- 2903003 Crushed, degloved, mangled, or pulseless extremity
- o 2903005 Chest wall instability, deformity, or suspected flail chest
- 2903007 Glasgow Coma Score <= 13 (DEPRECATED)
- 2903009 Skull deformity, suspected skull fracture
- o 2903011 Paralysis (DEPRECATED)
- o 2903013 Suspected pelvic fracture
- 2903015 Penetrating injuries to head, neck, torso, and proximal extremities
- 2903017 Respiratory Rate <10 or >29 breaths per minute (<20 in infants aged <1 year) or need for ventilatory support
- (DEPRECATED)
- 2903019 Systolic Blood Pressure <90 mmHg (DEPRECATED)
- 2903021 Suspected fracture of two or more proximal long bones
- 2903023 Active bleeding requiring a tourniquet or wound packing with continuous pressure
- 2903025 Age >= 10 years: HR > SBP
- 2903027 Age >= 65 years: SBP < 110 mmHg
- 2903029 Age 0-9 years: SBP < 70mm Hg + (2 x age in years)
- 2903031 Age 10-64 years: SBP < 90 mmHg
- o 2903033 Respiratory distress or need for respiratory support
- 2903035 Room-air pulse oximetry < 90%
- 2903037 RR < 10 or > 29 breaths/min
- 2903039 Suspected spinal injury with new motor or sensory loss
- 2903041 Unable to follow commands (motor GCS < 6)

• *elnjury.04 - Trauma Triage Criteria (Moderate Risk for Serious Injury):

Trauma triage criteria for the yellow boxes (Mechanism of Injury and EMS Judgment) in the 2021 ACS National Guideline for the Field Triage of Injured Patients.

- 2904001 Pedestrian/bicycle rider thrown, run over, or with significant impact
- 2904003 Fall Adults: > 20 ft. (one story is equal to 10 ft.) (DEPRECATED)
- 2904005 Fall Children: > 10 ft. or 2-3 times the height of the child (DEPRECATED)
- 2904007 Auto Crash: Death in passenger compartment
- 2904009 Auto Crash: Partial or complete ejection

- 2904011 Auto Crash: Significant intrusion (including roof): >12 inches occupant site; >18 inches any site; need for
- extrication
- 2904013 Auto Crash: Vehicle telemetry data consistent with severe injury
- 2904015 Motorcycle Crash > 20 MPH (DEPRECATED)
- 2904017 SBP < 110 for age > 65 (DEPRECATED)
- o 2904019 Anticoagulant use
- 2904021 Pregnancy > 20 weeks
- o 2904023 Other EMS judgment
- 2904025 Burn, without other trauma (DEPRECATED)
- 2904027 Burns in conjunction with trauma
- 2904029 Auto Crash: Child (age 0-9 years) unrestrained or in unsecured child safety seat
- 2904031 Fall from height > 10 feet (all ages)
- 2904033 Low-level falls in young children (age <= 5 years) or older adults (age >= 65 years) with significant head impact
- 2904035 Rider separated from transport vehicle with significant impact (eg, motorcycle, ATV, horse, etc.)
- o 2904037 Special, high-resource healthcare needs
- o 2904039 Suspicion of child abuse

*elnjury.05 - Main Area of the Vehicle Impacted by the Collision:

The area or location of initial impact on the vehicle based on 12-point clock diagram.

*elnjury.06 - Location of Patient in Vehicle:

The seat row location of the vehicle at the time of the crash with the front seat numbered as 1.

- 2906001 Front Seat-Left Side (or motorcycle driver)
- 2906003 Front Seat-Middle
- o 2906005 Front Seat-Right Side
- 2906007 Passenger in other enclosed passenger or cargo area (non-trailing unit such as a bus, etc.)
- 2906009 Passenger in unenclosed passenger or cargo area (non-trailing unit such as a pickup, etc.)
- o 2906011 Riding on Vehicle Exterior (non-trailing unit)
- 2906013 Second Seat-Left Side (or motorcycle passenger)
- 2906015 Second Seat-Middle
- 2906017 Second Seat-Right Side
- 2906019 Sleeper Section of Cab (truck)
- 2906021 Third Row-Left Side (or motorcycle passenger)
- o 2906023 Third Row-Middle
- o 2906025 Third Row-Right Side
- 2906027 Trailing Unit
- o 2906029 Unknown

*elnjury.07 - Use of Occupant Safety Equipment:

Safety equipment used by the patient at the time of injury.

o 2907001 Child Booster Seat

- o 2907003 Eye Protection
- o 2907005 Helmet Worn
- 2907007 Infant Car Seat Forward Facing
- 2907009 Infant Car Seat Rear Facing
- o 2907015 None
- o 2907017 Other
- 2907019 Personal Floatation Device
- o 2907021 Protective Clothing
- o 2907023 Protective Non-Clothing Gear
- o 2907027 Shoulder and Lap Belt Used
- 2907029 Lap Belt Only Used
- o 2907031 Shoulder Belt Only Used
- o 2907033 Unable to Determine

• *elnjury.08 - Airbag Deployment:

Indication of airbag deployment.

- 2908001 Airbag Deployed Front
- o 2908003 Airbag Deployed Side
- o 2908005 Airbag Deployed Other (knee, air belt, etc.)
- o 2908007 No Airbag Deployed
- o 2908009 No Airbag Present

• *elnjury.09 - Height of Fall (feet):

Distance in feet from which the patient fell, measured from the lowest point of the patient to the ground.

*elnjury.10 - OSHA Personal Protective Equipment Used:

Documentation of the use of OSHA required protective equipment used by the patient at the time of injury.

- 2910001 Eye and Face Protection
- o 2910003 Foot Protection
- 2910005 Head Protection
- 2910007 Hearing Protection
- 2910009 Respiratory Protection
- o 2910011 Safety Belts, lifelines, and lanyards
- 2910013 Safety Nets

eArrest Section

• *eArrest.01 - Cardiac Arrest:

Indication of the presence of a cardiac arrest at any time during this EMS event.

- o 3001001 No
- 3001003 Yes, Prior to Any EMS Arrival (includes Transport EMS & Medical First Responders)
 - If this EMS event is for an interfacility transfer of a patient with a recent history of a cardiac arrest with ROSC, and who does not experience another cardiac arrest during transport, then do NOT document Cardiac Arrest (eArrest.01) with "Yes, Prior to Any EMS Arrival (includes Transport EMS & Medical First Responders)".

- 3001005 Yes, After Any EMS Arrival (includes Transport EMS & Medical First Responders)
 - EMS is defined as Emergency Medical Services personnel and Medical First Responder personnel who respond to a medical emergency in an official capacity as part of an organized medical response team. By this definition, physicians, nurses, or paramedics who witness a cardiac arrest and initiate CPR but are not part of the organized medical response team are characterized as bystanders and are not part of the EMS system.
 - Medical First Responders are defined as personnel who are dispatched through the 9 - 1-1 system, respond in an official capacity, have the capability and/or training to provide emergency medical care, but are not the designated transporter of the patient. Thus, law enforcement officers who respond in an official capacity to a cardiac arrest, have the capability and/or training to provide emergency medical care (e.g., carry AEDs in their patrol vehicles, hold EMR licensure, are CPR certified, etc.) are considered Medical First Responders for the purposes of this data element.
 - Responders dispatched through the 9-1-1 system with no capability of providing emergency medical care are not considered Medical First Responders. For example, towing and wrecking responding to a vehicle crash, or law enforcement officers who do not provide any emergency medical care would not be considered Medical First Responders.

*eArrest.02 - Cardiac Arrest Etiology:

Indication of the etiology or cause of the cardiac arrest (classified as cardiac, non-cardiac, etc.).

- 3002001 Cardiac (Presumed)
- o 3002003 Drowning/Submersion
- o 3002005 Drug Overdose
- o 3002007 Electrocution
- o 3002009 Exsanguination-Medical (Non-Traumatic)
- o 3002011 Other
- 3002013 Respiratory/Asphyxia
- 3002015 Traumatic Cause

*eArrest.03 - Resuscitation Attempted By EMS:

Indication of an attempt to resuscitate the patient who is in cardiac arrest (attempted, not attempted due to DNR, etc.).

- o 3003001 Attempted Defibrillation
- 3003003 Attempted Ventilation
- 3003005 Initiated Chest Compressions
- 3003007 Not Attempted-Considered Futile
- o 3003009 Not Attempted-DNR Orders
- o 3003011 Not Attempted-Signs of Circulation

*eArrest.04 - Arrest Witnessed By:

Indication of who the cardiac arrest was witnessed by.

- o 3004001 Not Witnessed
- o 3004003 Witnessed by Family Member
- 3004005 Witnessed by Healthcare Provider
- 3004007 Witnessed by Bystander

• *eArrest.07 - AED Use Prior to EMS Arrival:

Documentation of AED use Prior to EMS Arrival.

- o 3007001 No
- o 3007003 Yes, Applied without Defibrillation
- 3007005 Yes, With Defibrillation

• *eArrest.09 - Type of CPR Provided:

Documentation of the type/technique of CPR used by EMS.

- o 3009001 Compressions-Manual
- 3009003 Compressions-External Band Type Device
- 3009005 Compressions-External Plunger Type Device
- 3009007 Compressions-External Thumper Type Device
- o 3009009 Compressions-Intermittent with Ventilation
- o 3009011 Compressions-Other Device
- 3009021 Compressions-Hands Only CPR
- 3009013 Ventilation-Bag Valve Mask
- o 3009015 Ventilation-Impedance Threshold Device
- o 3009017 Ventilation-Mouth to Mouth
- o 3009019 Ventilation-Pocket Mask
- 3009023 Ventilation-with OPA/NPA
- 3009025 Ventilation-Advanced Airway Device
- 3009027 Ventilation-Passive Ventilation with Oxygen

• eArrest.10 - Therapeutic Hypothermia by EMS:

Documentation of EMS initiation of Therapeutic Hypothermia.

- o 9923001 No
- o 9923003 Yes

*eArrest.11 - First Monitored Arrest Rhythm of the Patient:

Documentation of what the first monitored arrest rhythm which was noted. (This includes an AED rhythm if available.

- o 3011001 Asystole
- o 3011005 PEA
- o 3011007 Unknown AED Non-Shockable Rhythm
- 3011009 Unknown AED Shockable Rhythm
- 3011011 Ventricular Fibrillation
- o 3011013 Ventricular Tachycardia-Pulseless

*eArrest.12 - Any Return of Spontaneous Circulation (ROSC):

Indication whether or not there was any return of spontaneous circulation.

- o 3012001 No
- 3012003 Yes, At Arrival at the ED
- 3012005 Yes. Prior to Arrival at the ED
- o 3012007 Yes, Sustained for 20 consecutive minutes

• eArrest.13 - Neurological Outcome at Hospital Discharge:

The level of cerebral performance of the patient at the time of discharge from the Hospital.

- o 3013001 CPC 1 Good Cerebral Performance
- 3013003 CPC 2 Moderate Cerebral Disability
- o 3013005 CPC 3 Severe Cerebral Disability
- 3013007 CPC 4 Coma or Vegetative State

*eArrest.14 - Date/Time of Cardiac Arrest:

The date/time of the cardiac arrest (if not known, please estimate).

• *eArrest.15 - Date/Time Resuscitation Discontinued:

The date/time resuscitation was discontinued.

*eArrest.16 - Reason CPR/Resuscitation Discontinued:

The reason that CPR or the resuscitation efforts were discontinued.

- o 3016001 DNR
- o 3016003 Medical Control Order
- o 3016005 Obvious Signs of Death
- o 3016007 Physically Unable to Perform
- 3016009 Protocol/Policy Requirements Completed
- o 3016011 Return of Spontaneous Circulation (pulse or BP noted)

*eArrest.17 - Cardiac Rhythm on Arrival at Destination:

The patient's cardiac rhythm upon delivery or transfer to the destination.

- o 9901001 Agonal/Idioventricular
- o 9901003 Asystole
- o 9901005 Artifact
- 9901007 Atrial Fibrillation
- o 9901009 Atrial Flutter
- o 9901011 AV Block-1st Degree
- 9901013 AV Block-2nd Degree-Type 1
- o 9901015 AV Block-2nd Degree-Type 2
- 9901017 AV Block-3rd Degree
- o 9901019 Junctional
- 9901021 Left Bundle Branch Block
- 9901023 Non-STEMI Anterior Ischemia
- 9901025 Non-STEMI Inferior Ischemia
- 9901027 Non-STEMI Lateral Ischemia
- 9901029 Non-STEMI Posterior Ischemia
- o 9901030 Non-STEMI Septal Ischemia
- o 9901031 Other
- o 9901033 Paced Rhythm
- o 9901035 PEA
- 9901037 Premature Atrial Contractions
- 9901039 Premature Ventricular Contractions
- 9901041 Right Bundle Branch Block
- o 9901043 Sinus Arrhythmia
- 9901045 Sinus Bradycardia
- o 9901047 Sinus Rhythm

- o 9901049 Sinus Tachycardia
- o 9901051 STEMI Anterior Ischemia
- o 9901053 STEMI Inferior Ischemia
- 9901055 STEMI Lateral Ischemia
- 9901057 STEMI Posterior Ischemia
- o 9901058 STEMI Septal Ischemia
- 9901059 Supraventricular Tachycardia
- o 9901061 Torsades De Points
- 9901063 Unknown AED Non-Shockable Rhythm
- 9901065 Unknown AED Shockable Rhythm
- 9901067 Ventricular Fibrillation
- 9901069 Ventricular Tachycardia (With Pulse)
- 9901071 Ventricular Tachycardia (Pulseless)

*eArrest.18 - End of EMS Cardiac Arrest Event:

The patient's outcome at the end of the EMS event. (As known to EMS)

- 3018001 Expired in ED
- 3018003 Expired in the Field
- 3018005 Ongoing Resuscitation in ED
- 3018007 ROSC in the Field
- o 3018009 ROSC in the ED
- 3018011 Ongoing Resuscitation by Other EMS

*eArrest.19 - Date/Time of Initial CPR:

The initial date and time that CPR was started by anyone.

*eArrest.20 - Who First Initiated CPR:

Who first initiated CPR for this EMS event.

- o 3020001 Bystander
- 3020003 Family Member
- 3020005 Healthcare Provider (non-911 Responder)
- 3020007 First Responder (EMS)
- 3020009 First Responder (Law Enforcement)
- 3020011 First Responder (non-EMS Fire)
- 3020013 EMS Responder (transport EMS)

*eArrest.21 - Who First Applied the AED:

Documentation of who first applied the AED for this EMS event.

- 3021001 Bystander
- o 3021003 Family Member
- 3021005 Healthcare Provider (non-911 Responder)
- 3021007 First Responder (EMS)
- 3021009 First Responder (Law Enforcement)
- 3021011 First Responder (non-EMS Fire)
- 3021013 EMS Responder (transport EMS)

*eArrest.22 - Who First Defibrillated the Patient:

Documentation of who first defibrillated the patient.

- o 22001 Bystander
- o 3022003 Family Member
- o 3022005 Healthcare Provider (non-911 Responder)

- 3022007 First Responder (EMS)
- 3022009 First Responder (Law Enforcement)
- 3022011 First Responder (non-EMS Fire)
- 3022013 EMS Responder (transport EMS)

eHistory Section

*eHistory.01 - Barriers to Patient Care:

Indication of whether or not there were any patient specific barriers to serving the patient at the scene.

- 3101001 Cultural, Custom, Religious (i.e. A male EMS provider unable to touch a female patient and vice versa due to religious or cultural reasons)
- 3101003 Developmentally Impaired
- 3101005 Hearing Impaired
- 3101007 Language
- 3101009 None Noted
- 3101011 Obesity
- 3101013 Physical Barrier (Unable to Access Patient)
- 3101015 Physically Impaired
- 3101017 Physically Restrained
- 3101019 Psychologically Impaired
- 3101021 Sight Impaired
- o 3101023 Speech Impaired
- 3101025 Unattended or Unsupervised (including minors)
- o 3101027 Unconscious
- o 3101029 Uncooperative
- o 3101031 State of Emotional Distress
- 3101033 Alcohol Use, Suspected
- o 3101035 Drug Use, Suspected

eHistory.02 - Last Name of Patient's Practitioner:

The last name of the patient's practitioner.

• eHistory.03 - First Name of Patient's Practitioner:

The last name of the patient's practitioner.

• eHistory.04 - Middle Name/Initial of Patient's Practitioner:

The middle name or initial of the patient's practitioner.

*eHistory.05 - Advance Directives:

The presence of a valid DNR form, living will, or document directing end of life or healthcare treatment decisions.

- 3105001 Family/Guardian request DNR (but no documentation)
- 3105003 Living Will
- o 3105005 None
- o 3105007 Other
- 3105009 Other Healthcare Advanced Directive Form
- 3105011 State EMS DNR or Medical Order Form

*eHistory.06 - Medication Allergies:

The patient's medication allergies.

• *eHistory.07 - Environmental/Food Allergies:

The patient's known allergies to food or environmental agents.

• *eHistory.08 - Medical/Surgical History:

The patient's pre-existing medical and surgery history of the patient.

*eHistory.09 - Medical History Obtained From:

Type of person medical history obtained from.

- o 3109001 Bystander/Other
- o 3109003 Family
- o 3109005 Health Care Personnel
- o 3109007 Patient

• eHistory.10 - The Patient's Type of Immunization:

The immunization type of the patient.

- o 9910001 Anthrax
- o 9910003 Cholera
- o 9910005 DPT / TDaP (Diphtheria, Pertussis, Tetanus)
- 9910007 Hemophilus Influenza B
- o 9910009 Hepatitis A
- 9910011 Hepatitis B
- 9910013 Human Papilloma Virus (HPV)
- 9910015 Influenza-H1N1
- o 9910017 Influenza-Other
- 9910019 Influenza-Seasonal (In past 12 months)
- o 9910021 Lyme Disease
- o 9910023 Meningococcus
- o 9910025 MMR (Measles, Mumps, Rubella)
- 9910027 Other-Not Listed
- o 9910029 Plague
- o 9910031 Pneumococcal (Pneumonia)
- o 9910033 Polio
- 9910035 Rabies
- 9910037 Rotavirus
- 9910039 Shingles
- o 9910041 Small Pox
- 9910043 Tetanus
- 9910045 Tuberculosis
- 9910047 Typhoid
- 9910049 Varicella (Chickenpox)
- o 9910051 Yellow Fever
- o 9910053 None

eHistory.11 - Immunization Year:

The year associated with each immunization type.

*eHistory.12 - Current Medications:

The medications the patient currently takes.

• eHistory.13 - Current Medication Dose:

The numeric dose or amount of the patient's current medication.

• eHistory.14 - Current Medication Dosage Unit:

The dosage unit of the patient's current medication.

- o 3114001 Centimeters (cm)
- o 3114003 Grams (gms)
- 3114005 Drops (gtts)
- o 3114007 Inches (in)
- 3114009 International Units (IU)
- o 3114011 Keep Vein Open (kvo)
- 3114013 Liters Per Minute (I/min [fluid])
- o 3114015 Liters (I)
- o 3114017 Liters Per Minute (LPM [gas])
- o 3114019 Micrograms (mcg)
- 3114021 Micrograms per Kilogram per Minute (mcg/kg/min)
- 3114023 Micrograms per Minute (mcg/min)
- 3114025 Milliequivalents (mEq)
- o 3114027 Metered Dose (MDI)
- o 3114029 Milligrams (mg)
- 3114031 Milligrams per Kilogram (mg/kg)
- 3114033 Milligrams per Kilogram Per Minute (mg/kg/min)
- 3114035 Milligrams per Minute (mg/min)
- 3114037 Milliliters (ml)
- o 3114039 Milliliters per Hour (ml/hr)
- o 3114041 Other
- o 3114043 Puffs
- 3114045 Units per Hour (units/hr)
- 3114047 Micrograms per Kilogram (mcg/kg)
- 3114049 Units
- 3114051 Units per Kilogram per Hour (units/kg/hr)
- 3114053 Units per Kilogram (units/kg)

eHistory.15 - Current Medication Administration Route:

The administration route (po, SQ, etc.) of the patient's current medication.

- 9927001 Blow-By
- o 9927003 Buccal
- 9927005 Endotracheal Tube (ET)
- 9927007 Gastrostomy Tube
- 9927009 Inhalation
- o 9927011 Intraarterial
- 9927013 Intradermal
- 9927015 Intramuscular (IM)
- 9927017 Intranasal
- o 9927019 Intraocular
- 9927021 Intraosseous (IO)
- 9927023 Intravenous (IV)
- 9927025 Nasal Cannula
- 9927027 Nasogastric
- o 9927029 Nasotracheal Tube

- 9927031 Non-Rebreather Mask
- o 9927033 Ophthalmic
- o 9927035 Oral
- 9927037 Other/miscellaneous
- o 9927039 Otic
- 9927041 Re-breather mask
- o 9927043 Rectal
- o 9927045 Subcutaneous
- 9927047 Sublingual
- o 9927049 Topical
- o 9927051 Tracheostomy
- o 9927053 Transdermal
- 9927055 Urethral
- 9927057 Ventimask
- o 9927059 Wound
- o 9927061 Portacath
- o 9927063 Auto Injector
- o 9927065 BVM
- o 9927067 CPAP
- 9927069 IV Pump
- o 9927071 Nebulizer
- 9927073 Umbilical Artery Catheter
- o 9927075 Umbilical Venous Catheter

*eHistory.16 - Presence of Emergency Information Form:

Indication of the presence of the Emergency Information Form associated with patients with special healthcare needs.

- o 9923001 No
- o 9923003 Yes

*eHistory.17 - Alcohol/Drug Use Indicators:

Indicators for the potential use of alcohol or drugs by the patient related to the patient's current illness or injury.

- NONE REPORTED (PN):
 - The patient (or the EMS crew) identified that the use of alcohol or drugs were unrelated to the patient's condition;
 - There was no apparent alcohol or drug use; or
 - Patient denied the use/misuse of drugs or alcohol.
- O UNABLE TO COMPLETE (PN):

Patient was unable to confirm or deny drug or alcohol use for any reason (e.g., unconsciousness, language barrier, or other physical impairment/barrier). This value would also be appropriate if there was not enough patient contact or no other indicators are present to determine.

- 3117001 Alcohol Containers/Paraphernalia at Scene Refers to any material/object used in the intake of alcohol into the human body.
- o 3117003 Drug Paraphernalia at Scene

Any material/object used in manufacturing, producing, processing, preparing, injecting, ingesting, inhaling, or otherwise introducing into the human body or misuse of a substance.

- 3117005 Patient Admits to Alcohol Use
 By written, verbal, or motor action (e.g., head nod), patient admitted to consuming alcohol or being under the influence of alcohol. Patient does not have to meet any legal standard of intoxication for this purpose.
- 3117007 Patient Admits to Drug Use
 By written, verbal, or motor action (e.g., head nod), patient admitted to
 injecting, ingesting, inhaling, or being under the influence of drugs. Patient
 does not have to meet any legal standard of intoxication for this purpose.
- 3117009 Positive Level known from Law Enforcement or Hospital Record Third-party report of drug or alcohol use based on a diagnostic source (e.g., breathalyzer, blood, urine, field narcotic test, field sobriety test, or other patient record).
- 3117013 Physical Exam Indicates Suspected Alcohol or Drug Use EMS clinician observation of an alcohol-like odor coming from the patient or signs and symptoms of suspected drug use. This value would also be appropriate if patient's condition improved after administration of an opioid antagonist.

*eHistory.18 - Pregnancy:

Indication of the possibility by the patient's history of current pregnancy.

- o 3118001 No
- o 3118003 Possible, Unconfirmed
- o 3118005 Yes, Confirmed 12 to 20 Weeks
- 3118007 Yes. Confirmed Greater Than 20 Weeks
- 3118009 Yes, Confirmed Less Than 12 Weeks
- 3118011 Yes. Weeks Unknown

• eHistory.19 - Last Oral Intake:

Date and time of last oral intake.

• eHistory.20 - Current Medication Frequency:

The frequency of administration of the patient's current medication.

- 3120001 qi (every hour)
- 3120003 q2h (every 2 hours)
- 3120005 q3h (every 3 hours)
- 3120007 q4h (every 4 hours)
- 3120009 gid (four times a day)
- 3120011 tad (three times a day)
- 3120013 ac (before meals)
- 3120015 pc (after meals)
- 3120017 bid (twice a day)
- 3120019 qd (every day)
- 3120021 gd-am (every day in the morning)
- 3120023 qd-pm (every day in the evening)
- 3120025 has (at bedtime)
- 3120027 sod (every other day)

3120029 prn (as needed)

eVitals Section

*eVitals.01 - Date/Time Vital Signs Taken:

The date and time vital signs were taken on the patient.

- o 9923001 No
- o 9923003 Yes

• *eVitals.02 - Obtained Prior to this Unit's EMS Care:

Indicates that the information which is documented was obtained prior to the documenting EMS unit's care.

*eVitals.03 - Cardiac Rhythm / Electrocardiography (ECG):

The cardiac rhythm / ECG and other electrocardiography findings of the patient as interpreted by EMS personnel.

- o 9901001 Agonal/Idioventricular
- 9901003 Asystole
- o 9901005 Artifact
- 9901007 Atrial Fibrillation
- o 9901009 Atrial Flutter
- o 9901011 AV Block-1st Degree
- o 9901013 AV Block-2nd Degree-Type 1
- 9901015 AV Block-2nd Degree-Type 2
- o 9901017 AV Block-3rd Degree
- o 9901019 Junctional
- o 9901021 Left Bundle Branch Block
- o 9901023 Non-STEMI Anterior Ischemia
- 9901025 Non-STEMI Inferior Ischemia
- 9901027 Non-STEMI Lateral Ischemia
- o 9901029 Non-STEMI Posterior Ischemia
- 9901030 Non-STEMI Septal Ischemia
- o 9901031 Other
- o 9901033 Paced Rhythm
- o 9901035 PEA
- 9901037 Premature Atrial Contractions
- 9901039 Premature Ventricular Contractions
- 9901041 Right Bundle Branch Block
- o 9901043 Sinus Arrhythmia
- o 9901045 Sinus Bradycardia
- o 9901047 Sinus Rhythm
- o 9901049 Sinus Tachycardia
- 9901051 STEMI Anterior Ischemia
- o 9901053 STEMI Inferior Ischemia
- 9901055 STEMI Lateral Ischemia
- 9901057 STEMI Posterior Ischemia
- 9901058 STEMI Septal Ischemia
- o 9901059 Supraventricular Tachycardia
- o 9901061 Torsades De Points

- 9901063 Unknown AED Non-Shockable Rhythm
- 9901065 Unknown AED Shockable Rhythm
- 9901067 Ventricular Fibrillation
- 9901069 Ventricular Tachycardia (With Pulse)
- o 9901071 Ventricular Tachycardia (Pulseless)

*eVitals.04 - ECG Type:

The type of ECG associated with the cardiac rhythm.

- o 3304000 2 Lead ECG (pads or paddles)
- o 3304001 3 Lead
- o 3304003 4 Lead
- o 3304005 5 Lead
- o 3304007 12 Lead-Left Sided (Normal)
- o 3304009 12 Lead-Right Sided
- o 3304011 15 Lead
- o 3304013 18 Lead
- o 3304015 Other

*eVitals.05 - Method of ECG Interpretation:

The method of ECG interpretation.

- o 3305001 Computer Interpretation
- o 3305003 Manual Interpretation
- o 3305005 Transmission with No Interpretation
- o 3305007 Transmission with Remote Interpretation

*eVitals.06 - SBP (Systolic Blood Pressure):

The patient's systolic blood pressure.

• *eVitals.07 - DBP (Diastolic Blood Pressure):

The patient's diastolic blood pressure.

*eVitals.08 - Method of Blood Pressure Measurement:

Indication of method of blood pressure measurement.

- o 3308001 Arterial Line
- 3308003 Doppler
- 3308005 Cuff-Automated
- 3308007 Cuff-Manual Auscultated
- o 3308009 Cuff-Manual Palpated Only
- o 3308011 Venous Line

• eVitals.09 - Mean Arterial Pressure:

The patient's mean arterial pressure.

• *eVitals.10 - Heart Rate:

The patient's heart rate expressed as a number per minute.

*eVitals.11 - Method of Heart Rate Measurement:

The method in which the Heart Rate was measured. Values include auscultated, palpated, electronic monitor.

- o 3311001 Auscultated
- o 3311003 Doppler
- o 3311005 Electronic Monitor Cardiac
- o 3311007 Electronic Monitor Pulse Oximeter
- 3311009 Electronic Monitor (Other)

3311011 Palpated

• *eVitals.12 - Pulse Oximetry:

The patient's oxygen saturation.

*eVitals.13 - Pulse Rhythm:

The clinical rhythm of the patient's pulse.

- o 3313001 Irregularly Irregular
- 3313003 Regular
- 3313005 Regularly Irregular

*eVitals.14 - Respiratory Rate:

The patient's respiratory rate expressed as a number per minute.

• *eVitals.15 - Respiratory Effort:

The patient's respiratory effort.

- o 3315001 Apneic
- o 3315003 Labored
- o 3315005 Mechanically Assisted (BVM, CPAP, etc.)
- 3315007 Normal
- o 3315009 Rapid
- o 3315011 Shallow
- o 3315013 Weak/Agonal

*eVitals.16 - End Tidal Carbon Dioxide (ETCO2):

The numeric value of the patient's exhaled end tidal carbon dioxide (ETCO2) level measured as a unit of pressure in millimeters of mercury (mmHg), percentage or kilopascal (kPa).

• eVitals.17 - Carbon Monoxide (CO):

The numeric value of the patient's carbon monoxide level measured as a percentage (%) of carboxyhemoglobin (COHb).

*eVitals.18 - Blood Glucose Level:

The patient's blood glucose.

*eVitals.19 - Glasgow Coma Score-Eye:

The patient's Glasgow Coma Score Eye opening response.

- 1 No eye movement when assessed (All Age Groups)
- 2 Opens Eyes to painful stimulation (All Age Groups)
- 3 Opens Eyes to verbal stimulation (All Age Groups)
- 4 Opens Eyes spontaneously (All Age Groups)

*eVitals.20 - Glasgow Coma Score-Verbal:

The patient's Glasgow Coma Score Verbal response.

- 1 No verbal/vocal response (All Age Groups)
- 2 Incomprehensible sounds (>2 Years); Inconsolable, agitated
- o 3 Inappropriate words (>2 Years); Inconsistently consolable, moaning
- 4 Confused (>2 Years); Cries but is consolable, inappropriate interactions
- 5 Oriented (>2 Years); Smiles, oriented to sounds, follows objects, interacts

• *eVitals.21 - Glasgow Coma Score-Motor:

The patient's Glasgow Coma Score Motor response.

- 1 No Motor Response (All Age Groups)
- 2 Extension to pain (All Age Groups)

- o 3 Flexion to pain (All Age Groups)
- 4 Withdrawal from pain (All Age Groups)
- 5 Localizing pain (All Age Groups)
- 6 Obeys commands (>2Years); Appropriate response to stimulation

*eVitals.22 - Glasgow Coma Score-Qualifier:

Documentation of factors which make the GCS score more meaningful.

- 3322001 Eye Obstruction Prevents Eye Assessment
- 3322003 Initial GCS has legitimate values without interventions such as intubation and sedation
- 3322005 Patient Chemically Paralyzed
- 3322007 Patient Chemically Sedated
- o 3322009 Patient Intubated

*eVitals.23 - Total Glasgow Coma Score:

The patient's total Glasgow Coma Score.

• *eVitals.24 - Temperature:

The patient's body temperature in degrees Celsius/centigrade.

*eVitals.25 - Temperature Method:

The method used to obtain the patient's body temperature.

- o 3325001 Axillary
- 3325003 Central (Venous or Arterial)
- o 3325005 Esophageal
- o 3325007 Oral
- 3325009 Rectal
- o 3325011 Temporal Artery
- 3325013 Tympanic
- o 3325015 Urinary Catheter
- o 3325017 Skin Probe

*eVitals.26 - Level of Responsiveness (AVPU):

The patient's highest level of responsiveness.

- o 3326001 Alert
- 3326003 Verbal
- o 3326005 Painful
- o 3326007 Unresponsive

• *eVitals.27 - Pain Scale Score:

The patient's indication of pain from a scale of 0–10.

*eVitals.28 - Pain Scale Type:

The type of pain scale used.

- o 3328001 FLACC (Face, Legs, Activity, Cry, Consolability)
- o 3328003 Numeric (0-10)
- o 3328005 Other
- 3328007 Wong-Baker (FACES)

*eVitals.29 - Stroke Scale Score:

The findings or results of the Stroke Scale Type (eVitals.30) used to assess the patient exhibiting stroke-like symptoms.

o 3329001 Negative

- A negative stroke scale score does not mean a patient does not have a stroke, but simply that the stroke exam itself did not return any positive findings to indicate a stroke.
- This is a normal test finding. This score means each of the stroke assessment criteria for the stroke scale exam used by the clinician was negative or "normal/baseline" for the patient (e.g., using the Cincinnati Prehospital Stroke Scale, the patient is "Negative" if they had NO facial droop, NO arm drift and NO slurred speech).

3329003 Non-Conclusive

This score indicates there may be very subtle finding in the stroke scale exam that can't be concluded to be positive or negative. This may be due a pre-existing condition that is normal for the patient, but which makes it difficult to determine if you are seeing new findings or baseline (e.g., a patient with a history of a previous stroke or arm or shoulder injury; a patient with loose facial skin who has one side of the mouth slightly lower than the other whose face may just be that way).

3329005 Positive

- This is an abnormal test finding. A positive score means a positive or "abnormal from baseline" finding in any ONE of the stroke assessment criteria for the stroke scale exam used by the clinician and indicates that the patient may be experiencing a stroke (e.g., using the Cincinnati Prehospital Stroke Scale, the patient is "Positive" if they have a positive or "abnormal from baseline" finding for Facial Droop, and/or Arm Drift and/or Slurred Speech).
- A Positive stroke scale score indicates an increased probability of the patient having a stroke.

*eVitals.30 - Stroke Scale Type:

The type of stroke scale used.

- o 3330001 Cincinnati Prehospital Stroke Scale (CPSS)
- 3330004 Los Angeles Prehospital Stroke Screen (LAPSS)
- 3330005 Massachusetts Stroke Scale (MSS)
- 3330007 Miami Emergency Neurologic Deficit Exam (MEND)
- 3330009 NIH Stroke Scale (NIHSS)
- 3330011 Other Stroke Scale Type
- o 3330013 FAST-ED
- 3330015 Boston Stroke Scale (BOSS)
- 3330017 Ontario Prehospital Stroke Scale (OPSS)
- 3330019 Melbourne Ambulance Stroke Screen (MASS)
- o 3330021 Rapid Arterial oCclusion Evaluation (RACE)
- 3330023 Los Angeles Motor Score (LAMS)

• *eVitals.31 - Reperfusion Checklist:

The results of the patient's Reperfusion Checklist for potential Thrombolysis use.

- o 3331001 Definite Contraindications to Thrombolytic Use
- 3331003 No Contraindications to Thrombolytic Use

- 3331005 Possible Contraindications to Thrombolytic Use
- *eVitals.32 APGAR:

The patient's total APGAR score (0-10).

• *eVitals.33 - Revised Trauma Score:

The patient's Revised Trauma Score.

eExam Section

*eExam.01 - Estimated Body Weight in Kilograms:

The patient's body weight in kilograms, either measured or estimated.

• *eExam.02 - Length-Based Tape Measure:

The length-based color as taken from the tape.

- o 3502001 Blue
- o 3502003 Green
- o 3502005 Grey
- o 3502007 Orange
- o 3502009 Pink
- o 3502011 Purple
- o 3502013 Red
- o 3502015 White
- o 3502017 Yellow

*eExam.03 - Date/Time of Assessment:

The date and time of the assessment.

• *eExam.04 - Skin Assessment:

The assessment findings associated with the patient's skin.

- o 3504001 Clammy
- o 3504003 Cold
- o 3504005 Cyanotic
- o 3504007 Diaphoretic
- o 3504009 Dry
- o 3504011 Flushed
- o 3504013 Hot
- 3504015 Jaundiced
- 3504017 Lividity
- 3504019 Mottled
- o 3504021 Normal
- o 3504023 Not Done
- o 3504025 Pale
- o 3504027 Poor Turgor
- 3504029 Red (Erythematous)
- 3504031 Tenting
- o 3504033 Warm
- 3504035 Capillary Nail Bed Refill less than 2 seconds
- o 3504037 Capillary Nail Bed Refill 2-4 seconds
- 3504039 Capillary Nail Bed Refill more than 4 seconds

*eExam.05 - Head Assessment:

The assessment findings associated with the patient's head.

- o 3505001 Abrasion
- o 3505003 Avulsion
- 3505005 Bleeding Controlled
- o 3505007 Bleeding Uncontrolled
- o 3505009 Burn-Blistering
- o 3505011 Burn-Charring
- o 3505013 Burn-Redness
- 3505015 Burn-White/Waxy
- o 3505017 Decapitation
- 3505019 Deformity
- o 3505021 Drainage
- o 3505023 Foreign Body
- o 3505029 Laceration
- 3505031 Mass/Lesion
- o 3505033 Normal
- o 3505035 Not Done
- o 3505037 Pain
- o 3505039 Puncture/Stab Wound
- o 3505045 Gunshot Wound
- o 3505047 Crush Injury
- 3505049 Swelling
- o 3505051 Contusion
- o 3505053 Tenderness

• *eExam.06 - Face Assessment:

The assessment findings associated with the patient's face.

- 3506001 Abrasion
- 3506003 Asymmetric Smile or Droop
- 3506005 Avulsion
- o 3506007 Bleeding Controlled
- o 3506009 Bleeding Uncontrolled
- o 3506011 Burn-Blistering
- 3506013 Burn-Charring
- o 3506015 Burn-Redness
- 3506017 Burn-White/Waxy
- 3506021 Deformity
- 3506023 Drainage
- o 3506025 Foreign Body
- o 3506031 Laceration
- 3506033 Mass/Lesion
- 3506035 Normal
- o 3506037 Not Done
- o 3506039 Pain
- o 3506041 Puncture/Stab Wound
- o 3506047 Gunshot Wound
- 3506049 Crush Injury
- o 3506051 Tenderness

- 3506053 Swelling
- 3506055 Contusion

*eExam.07 - Neck Assessment:

The assessment findings associated with the patient's neck.

- o 3507001 Abrasion
- o 3507003 Avulsion
- 3507005 Bleeding Controlled
- o 3507007 Bleeding Uncontrolled
- o 3507009 Burn-Blistering
- o 3507011 Burn-Charring
- o 3507013 Burn-Redness
- 3507015 Burn-White/Waxy
- o 3507017 Decapitation
- o 3507019 Foreign Body
- o 3507025 JVD
- o 3507027 Laceration
- 3507029 Normal
- o 3507031 Not Done
- o 3507033 Pain
- o 3507035 Puncture/Stab Wound
- o 3507037 Stridor
- 3507039 Subcutaneous Air
- 3507045 Tracheal Deviation-Left
- 3507047 Tracheal Deviation-Right
- o 3507049 Gunshot Wound
- 3507051 Crush Injury
- 3507053 Swelling
- o 3507055 Contusion
- 3507057 Deformity
- o 3507059 Tenderness

*eExam.09 - Heart Assessment:

The assessment findings associated with the patient's heart.

- o 3509001 Clicks
- 3509003 Heart Sounds Decreased
- o 3509005 Murmur-Diastolic
- o 3509007 Murmur-Systolic
- o 3509009 Normal
- o 3509011 Not Done
- o 3509013 Rubs
- o 3509015 S1
- o 3509017 S2
- o 3509019 S3
- o 3509021 S4

*eExam.10 - Abdominal Assessment Finding Location:

The location of the patient's abdomen assessment findings.

3510001 Generalized

- o 3510003 Left Lower Quadrant
- o 3510005 Left Upper Quadrant
- o 3510007 Periumbilical
- 3510009 Right Lower Quadrant
- o 3510011 Right Upper Quadrant
- o 3510013 Epigastric

• *eExam.11 - Abdomen Assessment:

The assessment findings associated with the patient's abdomen.

- o 3511001 Abrasion
- o 3511003 Avulsion
- o 3511005 Bleeding Controlled
- o 3511007 Bleeding Uncontrolled
- o 3511009 Bowel Sounds-Absent
- o 3511011 Bowel Sounds-Present
- o 3511013 Burn-Blistering
- o 3511015 Burn-Charring
- o 3511017 Burn-Redness
- 3511019 Burn-White/Waxy
- 3511021 Distention
- o 3511023 Foreign Body
- 3511025 Guarding
- o 3511031 Laceration
- o 3511033 Mass/Lesion
- o 3511035 Mass-Pulsating
- o 3511037 Normal
- o 3511039 Not Done
- o 3511041 Pain
- o 3511043 Pregnant-Palpable Uterus
- o 3511045 Puncture/Stab Wound
- o 3511051 Tenderness
- 3511053 Gunshot Wound
- 3511055 Crush Injury
- 3511057 Swelling
- o 3511059 Contusion
- 3511061 Deformity
- o 3511063 Rebound Tenderness
- o 3511065 Rigidity

• *eExam.12 - Pelvis/Genitourinary Assessment:

The assessment of findings associated with the patient's pelvis and genitourinary.

- o 3512001 Abrasion
- o 3512003 Avulsion
- 3512005 Bleeding Controlled
- 3512007 Bleeding Uncontrolled
- o 3512009 Bleeding-Rectal
- 3512011 Bleeding-Urethral

- o 3512013 Bleeding-Vaginal
- 3512015 Burn-Blistering
- 3512017 Burn-Charring
- o 3512019 Burn-Redness
- o 3512021 Burn-White/Waxy
- 3512023 Deformity
- o 3512025 Foreign Body
- o 3512027 Genital Injury
- o 3512033 Laceration
- 3512035 Mass/Lesion
- 3512037 Normal
- o 3512039 Not Done
- o 3512041 Pain
- o 3512043 Pelvic Fracture
- 3512045 Pelvic Instability
- o 3512047 Penile Priapism/Erection
- o 3512049 Pregnant-Crowning
- o 3512051 Puncture/Stab Wound
- o 3512057 Tenderness
- o 3512059 Gunshot Wound
- 3512061 Crush Injury
- o 3512063 Swelling
- 3512065 Contusion

• *eExam.13 - Back and Spine Assessment Finding Location:

The location of the patient's back and spine assessment findings.

- o 3513001 Back-General
- 3513003 Cervical-Left
- o 3513005 Cervical-Midline
- 3513007 Cervical-Right
- o 3513009 Lumbar-Left
- o 3513011 Lumbar-Midline
- o 3513013 Lumbar-Right
- o 3513015 Thoracic-Left
- 3513017 Thoracic-Midline
- o 3513019 Thoracic-Right
- 3513021 Sacral-Left
- o 3513023 Sacral-Midline
- o 3513025 Sacral-Right

*eExam.14 - Back and Spine Assessment:

The assessment findings associated with the patient's spine (Cervical, Thoracic, Lumbar, and Sacral) and back exam.

- o 3514001 Abrasion
- o 3514003 Avulsion
- 3514005 Bleeding Controlled
- o 3514007 Bleeding Uncontrolled
- o 3514009 Burn-Blistering

- o 3514011 Burn-Charring
- o 3514013 Burn-Redness
- 3514015 Burn-White/Waxy
- 3514017 Deformity
- o 3514019 Foreign Body
- o 3514025 Laceration
- o 3514027 Normal
- o 3514029 Not Done
- o 3514031 Pain
- o 3514033 Pain with Range of Motion
- 3514035 Puncture/Stab Wound
- o 3514041 Tenderness Costovertebral Angle
- 3514043 Tenderness Midline Spinous Process
- o 3514045 Tenderness Paraspinous
- o 3514047 Gunshot Wound
- 3514049 Crush Injury
- o 3514051 Swelling
- o 3514053 Contusion
- o 3514055 Tenderness

• *eExam.15 - Extremity Assessment Finding Location:

The location on the patient's extremity assessment findings.

- o 3515001 Ankle-Left
- o 3515003 Ankle-Right
- o 3515005 Arm-Upper-Left
- o 3515007 Arm-Upper-Right
- o 3515009 Elbow-Left
- o 3515011 Elbow-Right
- o 3515013 Finger-2nd (Index)-Left
- o 3515015 Finger-2nd (Index)-Right
- o 3515017 Finger-3rd (Middle)-Left
- o 3515019 Finger-3rd (Middle)-Right
- 3515021 Finger-4th (Ring)-Left
- o 3515023 Finger-4th (Ring)-Right
- o 3515025 Finger-5th (Smallest)-Left
- o 3515027 Finger-5th (Smallest)-Right
- 3515029 Foot-Dorsal-Left
- o 3515031 Foot-Dorsal-Right
- o 3515033 Foot-Plantar-Left
- o 3515035 Foot-Plantar-Right
- o 3515037 Arm-Lower-Left
- o 3515039 Arm-Lower-Right
- o 3515041 Hand-Dorsal-Left
- o 3515043 Hand-Dorsal-Right
- o 3515045 Hand-Palm-Left
- o 3515047 Hand-Palm-Right
- o 3515049 Hip-Left

- o 3515051 Hip-Right
- o 3515053 Knee-Left
- o 3515055 Knee-Right
- o 3515057 Leg-Lower-Left
- o 3515059 Leg-Lower-Right
- o 3515061 Leg-Upper-Left
- o 3515063 Leg-Upper-Right
- o 3515065 Shoulder-Left
- o 3515067 Shoulder-Right
- o 3515069 Thumb-Left
- o 3515071 Thumb-Right
- o 3515073 Toe-1st (Big)-Left
- o 3515075 Toe-1st (Big)-Right
- o 3515077 Toe-2nd-Left
- o 3515079 Toe-2nd-Right
- o 3515081 Toe-3rd-Left
- o 3515083 Toe-3rd-Right
- o 3515085 Toe-4th-Left
- o 3515087 Toe-4th-Right
- o 3515089 Toe-5th (Smallest)-Left
- o 3515091 Toe-5th (Smallest)-Right
- o 3515093 Wrist-Left
- o 3515095 Wrist-Right
- o 3515097 Arm-Whole Arm and Hand-Left
- 3515099 Arm-Whole Arm and Hand-Right
- 3515101 Hand-Whole Hand-Left
- 3515103 Hand-Whole Hand-Right
- o 3515105 Leg-Whole Leg-Left
- o 3515107 Leg-Whole Leg-Right
- o 3515109 Foot-Whole Foot-Left
- o 3515111 Foot-Whole Foot-Right

• *eExam.16 - Extremities Assessment:

The assessment findings associated with the patient's extremities.

- o 3516001 Abrasion
- o 3516003 Amputation-Acute
- o 3516005 Amputation-Previous
- 3516007 Avulsion
- 3516009 Bleeding Controlled
- o 3516011 Bleeding Uncontrolled
- 3516013 Burn-Blistering
- 3516015 Burn-Charring
- o 3516017 Burn-Redness
- 3516019 Burn-White/Waxy
- 3516021 Clubbing (of fingers)
- 3516023 Crush Injury
- 3516025 Deformity

- o 3516027 Dislocation
- o 3516029 Edema
- o 3516031 Foreign Body
- o 3516033 Fracture-Closed
- o 3516035 Fracture-Open
- o 3516041 Laceration
- 3516043 Motor Function-Abnormal/Weakness
- o 3516045 Motor Function-Absent
- 3516047 Motor Function-Normal
- o 3516049 Normal
- o 3516051 Not Done
- o 3516053 Pain
- 3516055 Paralysis
- o 3516057 Pulse-Abnormal
- o 3516059 Pulse-Absent
- o 3516061 Pulse-Normal
- o 3516063 Puncture/Stab Wound
- 3516065 Sensation-Abnormal
- 3516067 Sensation-Absent
- 3516069 Sensation-Normal
- o 3516075 Tenderness
- o 3516077 Gunshot Wound
- 3516079 Swelling
- o 3516081 Contusion
- o 3516083 Arm Drift

• *eExam.17 - Eye Assessment Finding Location:

The location of the patient's eye assessment findings.

- o 3517001 Bilateral
- o 3517003 Left
- o 3517005 Right

• *eExam.18 - Eye Assessment:

The assessment findings of the patient's eye examination.

- o 3518001 1-mm
- o 3518003 2-mm
- o 3518005 3-mm
- o 3518007 4-mm
- o 3518009 5-mm
- o 3518011 6-mm
- o 3518013 7-mm
- o 3518015 8-mm or >
- o 3518017 Blind
- o 3518019 Cataract Present
- o 3518021 Clouded
- 3518023 Deformity
- 3518025 Dysconjugate Gaze
- o 3518027 Foreign Body

- o 3518029 Glaucoma Present
- o 3518031 Hyphema
- o 3518033 Jaundiced Sclera
- 3518035 Missing
- o 3518037 Non-Reactive
- o 3518039 Not Done
- 3518041 Non-Reactive Prosthetic
- o 3518043 Nystagmus Noted
- o 3518045 Open Globe
- o 3518047 PERRL
- 3518049 Pupil-Irregular/Teardrop
- o 3518051 Reactive
- o 3518053 Sluggish
- 3518055 Swelling
- o 3518057 Contusion
- o 3518059 Puncture/Stab Wound
- 3518061 Dilated
- o 3518063 Pin Point

*eExam.19 - Mental Status Assessment:

The assessment findings of the patient's mental status examination.

- 3519001 Combative
- o 3519003 Confused
- 3519005 Hallucinations
- o 3519007 Normal Baseline for Patient
- o 3519009 Not Done
- o 3519011 Oriented-Person
- 3519013 Oriented-Place
- 3519015 Oriented-Event
- o 3519017 Oriented-Time
- o 3519021 Unresponsive
- 3519023 Agitation
- 3519025 Somnolent
- 3519027 Stupor
- 3519029 Altered mental status, unspecified
- 3519031 Developmentally Impaired
- 3519033 Disorientation, unspecified
- 3519035 Pharmacologically Paralyzed
- 3519037 Pharmacologically Sedated
- o 3519039 Psychologically Impaired
- 3519041 Slowness and poor responsiveness
- 3519043 State of emotional shock and stress, unspecified
- 3519045 Strange and inexplicable behavior
- 3519047 Uncooperative
- o 3519049 Unspecified coma

• *eExam.20 - Neurological Assessment:

The assessment findings of the patient's neurological examination.

- o 3520001 Aphagia
- o 3520003 Aphasia
- 3520005 Cerebellar Function-Abnormal
- 3520007 Cerebellar Function-Normal
- 3520009 Decerebrate Posturing
- 3520011 Decorticate Posturing
- o 3520013 Gait-Abnormal
- o 3520015 Gait-Normal
- o 3520017 Hemiplegia-Left
- o 3520019 Hemiplegia-Right
- 3520021 Normal Baseline for Patient
- o 3520023 Not Done
- o 3520026 Status Seizure
- o 3520055 Other Seizures
- o 3520027 Speech Normal
- 3520029 Speech Slurring
- 3520031 Strength-Asymmetric
- 3520033 Strength-Normal
- 3520035 Strength-Symmetric
- 3520037 Tremors
- 3520039 Weakness-Facial Droop-Left
- o 3520041 Weakness-Facial Droop-Right
- 3520043 Weakness-Left Sided
- o 3520045 Weakness-Right Sided
- o 3520051 Arm Drift-Left
- o 3520053 Arm Drift-Right

*eExam.21 - Stroke/CVA Symptoms Resolved:

Indication if the Stroke/CVA Symptoms resolved and when.

- o 3521001 No
- 3521003 Yes-Resolved Prior to EMS Arrival
- o 3521005 Yes-Resolved in EMS Presence

*eExam.22 - Lung Assessment Finding Location:

The location of the patient's lung assessment findings.

- o 3522001 Left
- o 3522003 Right
- 3522005 Bilateral

*eExam.23 - Lung Assessment:

The assessment findings associated with the patient's lungs.

- 3523001 Breath Sounds-Absent
- 3523003 Breath Sounds-Decreased
- 3523005 Breath Sounds-Equal
- 3523007 Breath Sounds-Normal
- o 3523009 Foreign Body
- 3523011 Increased Respiratory Effort

- 3523013 Normal
- o 3523015 Not Done
- o 3523017 Pain
- o 3523019 Pain with Inspiraton/Expiration
- o 3523021 Rales
- o 3523023 Rhonchi
- o 3523025 Rhonchi/Wheezing
- o 3523027 Stridor
- 3523029 Wheezing-Expiratory
- 3523031 Wheezing-Inspiratory

• *eExam.24 - Chest Assessment Finding Location:

The location of the patient's chest assessment findings.

- o 3524001 Left Anterior
- o 3524003 Left Posterior
- o 3524005 Right Anterior
- o 3524007 Right Posterior
- o 3524009 General Anterior
- o 3524011 General Posterior
- o 3524013 Left Side
- o 3524015 Right Side

*eExam.25 - Chest Assessment:

The assessment findings associated with the patient's chest.

- o 3525001 Abrasion
- o 3525003 Avulsion
- o 3525005 Accessory Muscles Used with Breathing
- o 3525007 Bleeding Controlled
- 3525009 Bleeding Uncontrolled
- 3525011 Burn-Blistering
- o 3525013 Burn-Charing
- o 3525015 Burn-Redness
- 3525017 Burn-White/Waxy
- 3525019 Crush Injury
- 3525021 Deformity
- 3525023 Flail Segment
- 3525025 Implanted Device
- o 3525027 Laceration
- o 3525029 Normal
- 3525031 Not Done
- o 3525033 Pain
- 3525035 Pain with Inspiration/Expiration
- 3525037 Puncture/Stab Wound
- o 3525039 Retraction
- o 3525041 Tenderness
- 3525043 Gunshot Wound
- 3525045 Swelling
- o 3525047 Contusion

3525049 Tenderness-General

eProtocols section

*eProtocols.01 - Protocols Used:

The protocol used by EMS personnel to direct the clinical care of the patient. Note: Agencies may alter the specific data selection to match State of Michigan protocols or local MCA protocols. In parentheses, matching State of Michigan protocol.

- 9914001 Airway (Airway Management Protocol)
- 9914003 Airway-Failed (Airway Management Protocol)
- 9914005 Airway-Obstruction/Foreign Body (Airway Management Protocol)
- 9914007 Airway-Rapid Sequence Induction (RSI-Paralytic)
- 9914009 Airway-Sedation Assisted (Non-Paralytic)
- 9914011 Cardiac Arrest-Asystole (Cardiac Arrest General)
- o 9914013 Cardiac Arrest-Hypothermia-Therapeutic
- 9914015 Cardiac Arrest-Pulseless Electrical Activity (Cardiac Arrest General)
- 9914017 Cardiac Arrest-Ventricular Fibrillation/ Pulseless Ventricular Tachycardia (Cardiac Arrest General)
- 9914019 Cardiac Arrest-Post Resuscitation Care (Return of Spontaneous Circulation)
- 9914021 Environmental-Altitude Sickness (Poisoning/Overdose/Environmental Exposure)
- 9914023 Environmental-Cold Exposure (Hypothermia/Frostbite)
- 9914025 Environmental-Frostbite/Cold Injury (Hypothermia/Frostbite)
- o 9914027 Environmental-Heat Exposure/Exhaustion (Heat Emergencies)
- o 9914029 Environmental-Heat Stroke/Hyperthermia (Heat Emergencies)
- o 9914031 Environmental-Hypothermia (Hypothermia/Frostbite)
- 9914033 Exposure-Airway/Inhalation Irritants (Poisoning/Overdose/Environmental Exposure)
- 9914035 Exposure-Biological/Infectious (General CBRNE Identification of Agents)
- 9914037 Exposure-Blistering Agents (General CBRNE Identification of Agents)
- 9914041 Exposure-Chemicals to Eye (Poisoning/Overdose/Environmental Exposure)
- 9914043 Exposure-Cyanide (Cyanide Exposure)
- 9914045 Exposure-Explosive/ Blast Injury (General CBRNE Identification of Agents)
- 9914047 Exposure-Nerve Agents (General CBRNE Identification of Agents)
- 9914049 Exposure-Radiologic Agents (General CBRNE Identification of Agents)
- 9914051 General-Back Pain (Pain Management)
- 9914053 General-Behavioral/Patient Restraint (Behavioral Emergencies)
- 9914055 General-Cardiac Arrest (Cardiac Arrest General)

- 9914057 General-Dental Problems
- 9914059 General-Epistaxis
- 9914061 General-Fever (Pediatric Fever)
- 9914063 General-Individualized Patient Protocol (General Pre-Hospital Care)
- o 9914065 General-Indwelling Medical Devices/Equipment
- 9914067 General-IV Access (Vascular Access & IV Fluid Therapy)
- o 9914069 General-Medical Device Malfunction
- 9914071 General-Pain Control (Pain Management)
- 9914073 General-Spinal Immobilization/Clearance (Spinal Injury Assessment)
- 9914075 General-Universal Patient Care/ Initial Patient Contact (General Pre-Hospital Care)
- 9914077 Injury-Amputation (Soft Tissue and Orthopedic Injuries)
- 9914079 Injury-Bites and Envenomations-Land (Poisoning/Overdose/Environmental Exposure)
- 9914081 Injury-Bites and Envenomations-Marine (Poisoning/Overdose/Environmental Exposure)
- 9914083 Injury-Bleeding/ Hemorrhage Control (Bleeding Control (BCON))
- 9914085 Injury-Burns-Thermal (Burns)
- 9914087 Injury-Cardiac Arrest (Traumatic Arrest)
- 9914089 Injury-Crush Syndrome (General Crush Injury)
- 9914091 Injury-Diving Emergencies (Drowning/Submersion)
- o 9914093 Injury-Drowning/Near Drowning (Drowning/Submersion)
- 9914095 Injury-Electrical Injuries (Burns)
- 9914097 Injury-Extremity (General Trauma)
- 9914099 Injury-Eye
- o 9914101 Injury-Head (Head Injury (TBI))
- 9914103 Injury-Impaled Object (Soft Tissue & Orthopedic Injuries)
- 9914105 Injury-Multisystem (General Trauma)
- o 9914107 Injury-Spinal Cord (Spinal Injury Assessment)
- o 9914109 Medical-Abdominal Pain (Abdominal Pain)
- 9914111 Medical-Allergic Reaction/Anaphylaxis (Anaphylaxis/Allergic Reaction)
- 9914113 Medical-Altered Mental Status (Altered Mental Status/Pediatric Altered Mental Status)
- 9914115 Medical-Bradycardia (Bradycardia/Pediatric Bradycardia)
- 9914117 Medical-Cardiac Chest Pain (Chest Pain/Acute Coronary Syndrome)
- 9914119 Medical-Diarrhea (General Pre-hospital Care)
- 9914121 Medical-Hyperglycemia
- o 9914123 Medical-Hypertension
- 9914125 Medical-Hypoglycemia/Diabetic Emergency (Altered Mental Status/Pediatric Altered Mental Status)
- 9914127 Medical-Hypotension/Shock (Non-Trauma) (Shock)

- 9914129 Medical-Influenza-Like Illness/ Upper Respiratory Infection (Respiratory Distress/Pediatric Respiratory Distress, Failure or Arrest)
- 9914131 Medical-Nausea/Vomiting (Nausea & Vomiting)
- 9914133 Medical-Newborn/ Neonatal Resuscitation (Newborn/Neonatal Assessment and Resuscitation)
- 9914135 General-Overdose/Poisoning/Toxic Ingestion (Poisoning/Overdose/Environmental Exposure)
- 9914137 Medical-Pulmonary Edema/CHF (Pulmonary Edema/Cardiogenic Shock)
- 9914139 Medical-Respiratory Distress/Asthma/COPD/Reactive Airway (Respiratory Distress/Pediatric Respiratory Distress, Failure or Arrest)
- o 9914141 Medical-Seizure (Seizures/Pediatric Seizures)
- 9914143 Medical-ST-Elevation Myocardial Infarction (STEMI) (Chest Pain/Acute Coronary Syndrome)
- 9914145 Medical-Stroke/TIA (Stroke or Suspected Stroke)
- 9914147 Medical-Supraventricular Tachycardia (Including Atrial Fibrillation) (Tachycardia/Pediatric Tachycardia)
- 9914149 Medical-Syncope (Syncope)
- 9914151 Medical-Ventricular Tachycardia (With Pulse) (Tachycardia/Pediatric Tachycardia)
- 9914153 Not Done
- 9914155 OB/GYN-Childbirth/Labor/Delivery (Childbirth and OB Emergencies)
- 9914157 OB/GYN-Eclampsia (Childbirth and OB Emergencies)
- 9914159 OB/GYN-Gynecologic Emergencies (Childbirth and OB Emergencies)
- 9914161 OB/GYN-Pregnancy Related Emergencies (Childbirth and OB Emergencies)
- 9914163 OB/GYN-Post-partum Hemorrhage (Childbirth and OB Emergencies)
- o 9914165 Other
- 9914167 Exposure-Carbon Monoxide (Poisoning/Overdose/Environmental Exposure)
- 9914169 Cardiac Arrest-Do Not Resuscitate (Do Not Resuscitate/MI-POST)
- 9914171 Cardiac Arrest-Special Resuscitation Orders (Cardiac Arrest General)
- 9914173 Exposure-Smoke Inhalation (Poisoning/Overdose/Environmental Exposure)
- 9914175 General-Community Paramedicine / Mobile Integrated Healthcare (Community Paramedicine)
- o 9914177 General-Exception Protocol (Protocol Deviation)
- 9914179 General-Extended Care Guidelines
- 9914181 General-Interfacility Transfers (Interfacility Transports)
- 9914183 General-Law Enforcement Blood for Legal Purposes (Evidentiary Blood Draw)

- o 9914185 General-Law Enforcement Assist with Law Enforcement Activity
- 9914187 General-Neglect or Abuse Suspected (Child Abuse and Neglect/Vulnerable Adult Abuse, Neglect or Exploitation)
- o 9914189 General-Refusal of Care (Refusal of Care; Adult and Minor)
- o 9914191 Injury-Mass/Multiple Casualties (Mass Casualty Injuries)
- 9914193 Injury-Thoracic (General Trauma)
- o 9914195 Medical-Adrenal Insufficiency (Adrenal Crisis)
- 9914197 Medical-Apparent Life Threatening Event (ALTE) (Crashing Adult/Impending Arrest/Pediatric Crashing Patient/Impending Arrest)
- o 9914199 Medical-Tachycardia (Tachycardia/Pediatric Tachycardia)
- 9914201 Cardiac Arrest-Determination of Death / Withholding Resuscitative Efforts (Dead on Scene/Termination of Resuscitation)
- 9914203 Injury-Conducted Electrical Weapon (e.g., Taser) (Soft Tissue & Orthopedic Injuries)
- o 9914205 Injury-Facial Trauma (General Trauma)
- o 9914207 Injury-General Trauma Management (General Trauma)
- 9914209 Injury-Lightning/Lightning Strike (Poisoning/Overdose/Environmental Exposure)
- 9914211 Injury- SCUBA Injury/Accidents (Poisoning/Overdose/Environmental Exposure)
- 9914213 Injury-Topical Chemical Burn (Poisoning/Overdose/Environmental Exposure)
- 9914215 Medical-Beta Blocker Poisoning/Overdose (Poisoning/Overdose/Environmental Exposure)
- 9914217 Medical-Calcium Channel Blocker Poisoning/Overdose (Poisoning/Overdose/Environmental Exposure)
- 9914219 Medical-Opioid Poisoning/Overdose (Opioid Overdose Treatment and Prevention)
- 9914221 Medical-Respiratory Distress-Bronchiolitis (Pediatric Respiratory Distress, Failure or Arrest)
- 9914223 Medical-Respiratory Distress-Croup (Pediatric Respiratory Distress, Failure or Arrest)
- 9914225 Medical-Stimulant Poisoning/Overdose (Poisoning/Overdose/Environmental Exposure)
- *eProtocols.02 Protocol Age Category:

The age group the protocol is written to address.

- 3602001 Adult Only
- o 3602003 General
- o 3602005 Pediatric Only

Notes:

- Recommended data element.
- Helps categorize protocols by patient age group to ensure age-appropriate care.

eMedications Section

• *eMedications.01 - Date/Time Medication Administered:
The date and time when the medication was administered to the patient.

- *eMedications.02 Medication Administered Prior to this Unit's EMS Care: Indicates whether the medication was administered before the current EMS unit began care.
 - o 9923001 No
 - o 9923003 Yes
- *eMedications.03 Medication Administered:

The medication administered to the patient.

*eMedications.04 - Medication Administered Route:

The route medication was administered to the patient.

- o 9927001 Blow-By
- o 9927003 Buccal
- 9927005 Endotracheal Tube (ET)
- o 9927007 Gastrostomy Tube
- o 9927009 Inhalation
- o 9927011 Intraarterial
- o 9927013 Intradermal
- o 9927015 Intramuscular (IM)
- 9927017 Intranasal
- o 9927019 Intraocular
- o 9927021 Intraosseous (IO)
- 9927023 Intravenous (IV)
- o 9927025 Nasal Cannula
- o 9927027 Nasogastric
- 9927029 Nasotracheal Tube
- o 9927031 Non-Rebreather Mask
- o 9927033 Ophthalmic
- o 9927035 Oral
- o 9927037 Other/miscellaneous
- o 9927039 Optic
- o 9927041 Re-breather mask
- o 9927043 Rectal
- o 9927045 Subcutaneous
- 9927047 Sublingual
- 9927049 Topical
- o 9927051 Tracheostomy
- 9927053 Transdermal
- 9927055 Urethral
- 9927057 Ventimask
- 9927059 Wound
- 9927061 Portacath
- 9927063 Auto Injector
- 9927065 BVM
- o 9927067 CPAP
- 9927069 IV Pump
- o 9927071 Nebulizer
- o 9927073 Umbilical Artery Catheter

- 9927075 Umbilical Venous Catheter
- *eMedications.05 Medication Dosage:

The amount or dose of the medication administered to the patient.

*eMedications.06 - Medication Dosage Units:

The unit of measurement for the medication dosage.

- o 3706001 Grams (gms)
- o 3706003 Inches (in)
- 3706005 International Units (IU)
- o 3706007 Keep Vein Open (kvo)
- o 3706009 Liters (I)
- o 3706013 Metered Dose (MDI)
- o 3706015 Micrograms (mcg)
- 3706017 Micrograms per Kilogram per Minute (mcg/kg/min)
- 3706019 Milliequivalents (mEq)
- 3706021 Milligrams (mg)
- 3706023 Milligrams per Kilogram Per Minute (mg/kg/min)
- o 3706025 Milliliters (ml)
- 3706027 Milliliters per Hour (ml/hr)
- o 3706029 Other
- o 3706031 Centimeters (cm)
- 3706033 Drops (gtts)
- 3706035 Liters Per Minute (LPM [gas])
- 3706037 Micrograms per Minute (mcg/min)
- 3706039 Milligrams per Kilogram (mg/kg)
- 3706041 Milligrams per Minute (mg/min)
- o 3706043 Puffs
- 3706045 Units per Hour (units/hr)
- o 3706047 Micrograms per Kilogram (mcg/kg)
- o 3706049 Units
- 3706051 Units per Kilogram per Hour (units/kg/hr)
- 3706053 Units per Kilogram (units/kg)
- o 3706055 Milligrams per Hour (mg/hr)

*eMedications.07 - Response to Medication:

The patient's response to the medication.

- 9916001 Improved
 - The medication had its intended therapeutic effect and the patient's symptoms decreased or clinical condition improved or resolved. The word "effective" could generally be substituted for "improved."
 - If a patient had the intended therapeutic response to the medication, but a side effect that caused a clinical deterioration in another body system, then "Improved" should be chosen and the side effects documented as a complication (e.g., nitroglycerin improved chest pain but dropped the blood pressure).
- o 9916003 Unchanged

The medication was ineffective and had no intended therapeutic effect or had a sub- therapeutic and unnoticeable effect, AND the patient condition did not deteriorate.

o 9916005 Worse

The patient condition deteriorated or continued to deteriorate because either the medication:

- Was ineffective and had no intended therapeutic effect, or
- Had a sub-therapeutic effect that was unable to stop or reverse the decline in patient condition, or
- Administration of the medication preceded the worsening of the patient's condition.

• *eMedications.08 - Medication Complication:

Any complication (abnormal effect on the patient) associated with the administration of the medication to the patient by EMS.

- 3708001 Altered Mental Status
- o 3708003 Apnea
- o 3708005 Bleeding
- o 3708007 Bradycardia
- o 3708009 Bradypnea
- o 3708011 Diarrhea
- 3708013 Extravasation
- o 3708015 Hypertension
- o 3708017 Hyperthermia
- o 3708019 Hypotension
- o 3708021 Hypothermia
- o 3708023 Hypoxia
- o 3708025 Injury
- o 3708029 Nausea
- o 3708031 None
- o 3708033 Other
- o 3708035 Respiratory Distress
- o 3708037 Tachycardia
- 3708039 Tachypnea
- 3708041 Vomiting
- 3708043 Itching
- 3708045 Urticaria

• *eMedications.09 - Medication Crew (Healthcare Professionals) ID:

The statewide assigned ID number of the EMS crew member giving the treatment to the patient.

*eMedications.10 - Role/Type of Person Administering Medication:

The type (level) of EMS or Healthcare Professional Administering the Medication. For medications administered prior to EMS arrival, this may be a non-EMS healthcare professional.

- o 9905001 Advanced Emergency Medical Technician (AEMT)
- o 9905002 Emergency Medical Technician Intermediate
- o 9905003 Emergency Medical Responder (EMR)

- o 9905005 Emergency Medical Technician (EMT)
- o 9905007 Paramedic
- o 9905019 Other Healthcare Professional
- o 9905021 Other Non-Healthcare Professional
- o 9905025 Physician
- o 9905027 Respiratory Therapist
- o 9905029 Student
- 9905031 Critical Care Paramedic
- o 9905033 Community Paramedicine
- o 9905035 Nurse Practitioner
- o 9905037 Physician Assistant
- 9905039 Licensed Practical Nurse (LPN)
- o 9905041 Registered Nurse
- o 9905043 Patient
- 9905045 Lay Person
- o 9905047 Law Enforcement
- o 9905049 Family Member
- 9905051 Fire Personnel (non EMS)

*eMedications.11 - Medication Authorization:

The type of treatment authorization obtained.

- 9918001 On-Line (Remote Verbal Order)
- o 9918003 On-Scene
- 9918005 Protocol (Standing Order)
- 9918007 Written Orders (Patient Specific)

*eMedications.12 - Medication Authorizing Physician:

The name of the authorizing physician ordering the medication administration if the order was provided by any manner other than protocol (standing order) in eMedications.11.

eProcedures Section

*eProcedures.01 - Date/Time Procedure Performed:

The date and time the procedure was performed on the patient.

• *eProcedures.02 - Procedure Performed Prior to this Unit's EMS Care:

Indicates that the procedure which was performed and documented was performed prior to this EMS units care.

- o 9923001 No
- o 9923003 Yes
- *eProcedures.03 Procedure:

The procedure performed on the patient.

*eProcedures.04 - Size of Procedure Equipment:

The size of the equipment used in the procedure on the patient.

*eProcedures.05 - Number of Procedure Attempts:

The number of attempts taken to complete a procedure or intervention regardless of success.

*eProcedures.06 - Procedure Successful:

Indicates that this individual procedure attempt which was performed on the patient was successful.

*eProcedures.07 - Procedure Complication:

Any complication (abnormal effect on the patient) associated with the performance of the procedure on the patient.

- 3907001 Altered Mental Status
- o 3907003 Apnea
- 3907005 Bleeding
- o 3907007 Bradypnea
- 3907009 Diarrhea
- 3907011 Esophageal Intubation-immediately
- o 3907013 Esophageal Intubation-other
- 3907015 Extravasation
- o 3907017 Hypertension
- o 3907019 Hyperthermia
- o 3907021 Hypotension
- 3907023 Hypothermia
- 3907025 Hypoxia
- o 3907027 Injury
- o 3907031 Nausea
- o 3907033 None
- o 3907035 Other
- 3907039 Respiratory Distress
- o 3907041 Tachycardia
- 3907043 Tachypnea
- 3907045 Vomiting
- o 3907047 Bradycardia
- 3907049 Itching
- 3907051 Urticaria

• *eProcedures.08 - Response to Procedure:

The patient's response to the procedure.

9916001 Improved

The procedure performed had the intended effective outcome and/or the patient's symptoms decreased or clinical condition improved or resolved (e.g., defibrillation resolved v-fib into a perfusing rhythm, intubation controlled the airway and allowed effective management of breathing). An effective procedure that caused an improvement in the patient condition may also have resulted in a procedure complication and the complication should be documented (e.g., intubation caused minor airway trauma, but the intubation successfully secured the airway).

9916003 Unchanged

The procedure performed did not have the clinical effect intended, but did not directly worsen the patient's symptoms or clinical condition (e.g., attempted defibrillation and the person remained in v-fib); OR

Had a sub-therapeutic effect and the symptoms continued (e.g., a bandage applied to a bleeding wound failed to stop the bleeding); OR The nature of the procedure has no direct expected clinical response (e.g., patient assessment). "Not Applicable" would also be appropriate to choose for these cases.

o 9916005 Worse

The results of the procedure performed lead to a worsening of the patient's symptoms or condition (e.g., defibrillation converted v-fib into asystole, application of a splint caused significant increase in pain or loss of sensation and pulses).

In the case of worsening condition, documentation of procedure complications may also be appropriate.

Just because a patient got worse, doesn't necessarily mean the clinician performed the procedure incorrectly.

• *eProcedures.09 - Procedure Crew Members ID:

The statewide assigned ID number of the EMS crew member performing the procedure on the patient.

• *eProcedures.10 - Role/Type of Person Performing the Procedure:

The type (level) of EMS or Healthcare Professional performing the procedure. For procedures performed prior to EMS arrival, this may be a non-EMS healthcare professional.

- 9905001 Advanced Emergency Medical Technician (AEMT)
- o 9905002 Emergency Medical Technician Intermediate
- 9905003 Emergency Medical Responder (EMR)
- 9905005 Emergency Medical Technician (EMT)
- o 9905007 Paramedic
- 9905019 Other Healthcare Professional
- 9905021 Other Non-Healthcare Professional
- o 9905025 Physician
- o 9905027 Respiratory Therapist
- 9905029 Student
- 9905031 Critical Care Paramedic
- o 9905033 Community Paramedicine
- 9905035 Nurse Practitioner
- o 9905037 Physician Assistant
- 9905039 Licensed Practical Nurse (LPN)
- o 9905041 Registered Nurse
- o 9905043 Patient
- 9905045 Lay Person
- o 9905047 Law Enforcement
- o 9905049 Family Member
- 9905051 Fire Personnel (non EMS)

*eProcedures.11 - Procedure Authorization:

The type of treatment authorization obtained.

- o 9918001 On-Line (Remote Verbal Order)
- o 9918003 On-Scene

- 9918005 Protocol (Standing Order)
- 9918007 Written Orders (Patient Specific)

• *eProcedures.12 - Procedure Authorizing Physician:

The name of the authorizing physician ordering the procedure, if the order was provided by any manner other than protocol (standing order) in eProcedures.11.

*eProcedures.13 - Vascular Access Location:

The location of the vascular access site attempt on the patient, if applicable.

- o 3913001 Antecubital-Left
- o 3913003 Antecubital-Right
- o 3913005 External Jugular-Left
- 3913007 External Jugular-Right
- 3913009 Femoral-Left IV
- 3913011 Femoral-Right IV
- o 3913013 Foot-Right
- o 3913015 Foot-Left
- o 3913017 Forearm-Left
- o 3913019 Forearm-Right
- o 3913021 Hand-Left
- o 3913023 Hand-Right
- o 3913025 Internal Jugular-Left
- 3913027 Internal Jugular-Right
- 3913029 IO-Iliac Crest-Left
- o 3913031 IO-Iliac Crest-Right
- 3913033 IO-Femoral-Left Distal
- 3913035 IO-Femoral-Right Distal
- 3913037 IO-Humeral-Left
- o 3913039 IO-Humeral-Right
- o 3913041 IO-Tibia-Left Distal
- 3913043 IO-Sternum
- 3913045 IO-Tibia-Right Distal
- o 3913047 IO-Tibia-Left Proximal
- 3913049 IO-Tibia-Right Proximal
- 3913051 Lower Extremity-Left
- o 3913053 Lower Extremity-Right
- 3913055 Other Peripheral
- o 3913057 Other Central (PICC, Portacath, etc.)
- o 3913059 Scalp
- 3913061 Subclavian-Left
- o 3913063 Subclavian-Right
- 3913065 Umbilical
- 3913067 Venous Cutdown-Left Lower Extremity
- 3913069 Venous Cutdown-Right Lower Extremity
- o 3913071 Upper Arm-Left
- 3913073 Upper Arm-Right
- o 3913075 Radial-Left
- o 3913077 Radial-Right

- o 3913079 Wrist-Left
- o 3913081 Wrist-Right

eAirway Section

*eAirway.01 - Indications for Invasive Airway:

Clinical indication for performing invasive airway management.

- o 4001001 Adequate Airway Reflexes/Effort, Potential for Compromise
- 4001003 Airway Reflex Compromised
- 4001005 Apnea or Agonal Respirations
- 4001007 Illness Involving Airway
- 4001009 Injury Involving Airway
- 4001011 Other
- 4001013 Ventilatory Effort Compromised

• *eAirway.02 - Date/Time Airway Device Placement Confirmation:

Date and time when airway device placement was confirmed.

*eAirway.03 - Airway Device Being Confirmed:

The airway device in which placement is being confirmed.

- o 4003001 Cricothyrotomy Tube
- 4003003 Endotracheal Tube
- 4003005 Other-Invasive Airway
- o 4003007 SAD-Combitube
- 4003009 SAD-King
- 4003011 SAD-LMA
- 4003013 SAD-Other
- 4003015 Tracheostomy Tube

*eAirway.04 - Airway Device Placement Confirmed Method:

Method used to confirm airway device placement.

- o 4004001 Auscultation
- 4004003 Bulb/Syringe Aspiration
- 4004005 Colorimetric ETCO2
- o 4004007 Condensation in Tube
- 4004009 Digital (Numeric) ETCO2
- 4004011 Direct Re-Visualization of Tube in Place
- 4004013 Endotracheal Tube Whistle (BAAM, etc.)
- o 4004015 Other
- 4004017 Visualization of Vocal Cords
- 4004019 Waveform ETCO2
- 4004021 Chest Rise

*eAirway.05 - Tube Depth:

The measurement at the patient's teeth/lip of the tube depth in centimeters (cm) of the invasive airway placed.

• *eAirway.06 - Type of Individual Confirming Airway Device Placement:

The type of individual who confirmed the airway device placement.

- o 4006001 Another Person on the Same Crew
- o 4006003 Other
- 4006005 Person Performing Intubation

- 4006007 Receiving Air Medical/EMS Crew
- 4006009 Receiving Hospital Team

• *eAirway.07 - Crew Member ID:

The statewide assigned ID number of the EMS crew member confirming the airway placement.

• *eAirway.08 - Airway Complications Encountered:

The airway management complications encountered during the patient care episode.

- 4008001 Adverse Event from Facilitating Drugs
- 4008003 Bradycardia (<50)
- 4008005 Cardiac Arrest
- 4008007 Esophageal Intubation-Delayed Detection (After Tube Secured)
- 4008009 Esophageal Intubation-Detected in Emergency Department
- o 4008011 Failed Intubation Effort
- 4008013 Injury or Trauma to Patient from Airway Management Effort
- o 4008015 Other
- 4008017 Oxygen Desaturation (<90%)
- 4008019 Patient Vomiting/Aspiration
- o 4008021 Tube Dislodged During Transport/Patient Care
- 4008023 Tube Was Not in Correct Position when EMS Crew/Team Assumed Care of the Patient

*eAirway.09 - Suspected Reasons for Failed Airway Management:

The reason(s) the airway was unable to be successfully managed.

- 4009001 Difficult Patient Airway Anatomy
- 4009003 ETI Attempted, but Arrived At Destination Facility Before Accomplished
- 4009005 Facial or Oral Trauma
- 4009007 Inability to Expose Vocal Cords
- 4009009 Inadequate Patient Relaxation/Presence of Protective Airway Reflexes
- 4009011 Jaw Clenched (Trismus)
- o 4009013 Other
- o 4009015 Poor Patient Access
- 4009017 Secretions/Blood/Vomit
- 4009019 Unable to Position or Access Patient

eAirway.10 - Date/Time Decision to Manage the Patient with an Invasive Airway:

The date and time the decision was made to manage the patient's airway with an invasive airway device.

eAirway.11 - Date/Time Invasive Airway Placement Attempts Abandoned:
The date and time that the invasive airway attempts were abandoned for the
patient.

eDisposition Section

• *eDisposition.01 - Destination/Transferred To, Name:

The destination the patient was delivered or transferred to.

*eDisposition.02 - Destination/Transferred To, Code:

The code of the destination the patient was delivered or transferred to.

• *eDisposition.03 - Destination Street Address:

The street address of the of the destination the patient was delivered or transferred to.

• *eDisposition.04 - Destination City:

The city of the destination the patient was delivered or transferred to (physical address).

• *eDisposition.05 - Destination State:

The state of the destination the patient was delivered or transferred to.

• *eDisposition.06 - Destination County:

The destination county in which the patient was delivered or transferred to.

• *eDisposition.07 - Destination ZIP Code:

The destination ZIP code in which the patient was delivered or transferred to.

• eDisposition.08 - Destination Country:

The country of the destination.

• eDisposition.09 - Destination GPS Location:

The destination GPS coordinates to which the patient was delivered or transferred to.

• eDisposition.10 - Destination Location US National Grid Coordinates:

The US National Grid Coordinates for the Destination Location. This may be the Healthcare Facility US National Grid Coordinates.

• *eDisposition.11 - Number of Patients Transported in this EMS Unit:

The number of patients transported by this EMS crew.

• eDisposition.13 - How Patient Was Moved to Ambulance:

The method by which the patient was moved to the ambulance from the scene.

- o 9909001 Assisted/Walk
- o 9909003 Backboard
- o 9909005 Chair
- o 9909007 Carried
- o 9909009 Other
- o 9909011 Stairchair
- o 9909013 Stretcher
- o 9909015 Wheelchair

• eDisposition.14 - Position of Patient During Transport:

The position of the patient during transport from the scene.

- o 4214001 Car Seat
- 4214003 Fowlers (Semi-Upright Sitting)
- o 4214005 Lateral Left
- o 4214007 Lateral Right
- o 4214009 Other
- o 4214011 Prone
- o 4214013 Semi-Fowlers
- 4214015 Sitting
- 4214017 Supine
- o 4214019 Trendelenburg

• eDisposition.15 - How Patient Was Moved From Ambulance:

The method by which the patient was moved from the ambulance to the destination.

- 9909001 Assisted/Walk
- 9909003 Backboard
- o 9909005 Chair
- o 9909007 Carried
- o 9909009 Other
- o 9909011 Stairchair
- o 9909013 Stretcher
- 9909015 Wheelchair

• *eDisposition.16 - EMS Transport Method:

The method of transport by this EMS Unit.

- 4216001 Air Medical-Fixed Wing
- 4216003 Air Medical-Rotor Craft
- o 4216005 Ground-Ambulance
- o 4216007 Ground-ATV or Rescue Vehicle
- 4216009 Ground-Bariatric
- o 4216011 Ground-Other Not Listed
- 4216013 Ground-Mass Casualty Bus/Vehicle
- 4216015 Ground-Wheelchair Van
- 4216017 Water-Boat

• *eDisposition.17 - Transport Mode from Scene:

Indication whether the transport was emergent or non-emergent.

- 4217001 Emergent (Immediate Response)
- 4217003 Emergent Downgraded to Non-Emergent
- o 4217005 Non-Emergent
- o 4217007 Non-Emergent Upgraded to Emergent

*eDisposition.18 - Additional Transport Mode Descriptors:

The documentation of transport mode techniques for this EMS response.

- 4218001 Intersection Navigation-Against Normal Light Patterns Traveled through intersections controlled by traffic lights or stop signs against the right-of-way according to standard, non-emergency traffic laws with, or without, the use of emergency lights and sirens (e.g., approached a red traffic light and proceeded through the intersection while the light was still red with cross-road traffic traveling through the intersection on their own green light).
- 4218003 Intersection Navigation-With Automated Light Changing Technology
 - Intersection navigation with the use of technology for traffic signal preemption (also called traffic signal prioritization) to manipulate traffic signals in the path of an emergency vehicle, halting conflicting traffic and allowing the emergency vehicle right-of-way, to help reduce response times and enhance traffic safety. These types of systems allow the normal operation of traffic lights to be preempted or controlled using radio or

- strobe light based signaling systems and may be used on conjunction with emergency lights and sirens.
- 4218005 Intersection Navigation-With Normal Light Patterns
 Traveled through intersection-controlled traffic lights or stop signs
 according to standard, non- emergency state and federal traffic laws (e.g.,
 approached a red traffic light and waited for the light to change to green
 before proceeding through the intersection).
- 4218007 Speed-Enhanced per Local Policy
 When an emergency service vehicle exceeded posted speed limits, within
 the limits of state or local laws or agency policy during a patient transport
 (e.g., some laws allow emergency services vehicles to exceed posted
 speed limits by 10 mph when transporting an emergent patient provided
 the vehicle driver exercises due caution/regard).
- 4218009 Speed-Normal Traffic
 Adhered to posted speed limits while transporting a patient, regardless of patient priority or use of lights and sirens, to insure a safe and stable transport environment.
- 4218011 Lights and Sirens Used flashing, blinking, or rotating lights (may be a combination of red, blue, white, and amber colors), and audible sirens mounted on an emergency services vehicle in order to manage and alert traffic that they need to yield the right-of-way to the emergency vehicle during patient transport.
- 4218013 Lights and No Sirens Use of only flashing, blinking, or rotating lights (may be a combination of red, blue, white, and amber colors), mounted on a responding emergency services vehicle in order to manage and alert traffic that they need to yield the right-of-way to the emergency vehicle. This traffic alert mode uses lights only without any use of audible sirens.
- 4218015 No Lights or Sirens
 Transported a patient by an emergency services vehicle without the use of any emergency traffic alert lights or sirens.
- 4218017 Initial No Lights or Sirens, Upgraded to Lights and Sirens A transport where the crew initiated the transport without the use of lights or sirens, but either patient condition changed, increasing the transport priority, or traffic conditions changed requiring the use of lights and sirens for a safe and timely transport.
- 4218019 Initial Lights and Sirens, Downgraded to No Lights or Sirens A transport where the responding vehicle initiated the response with the use of lights or sirens, but either patient condition changed, decreasing the response priority, or traffic conditions improved and the use of lights and sirens was no longer required for a safe and timely response. This value is often used with a paramedic intercept, where a BLS crew used lights and sirens to make contact with a paramedic, who then stabilized the patient such that the transport priority was decreased.

*eDisposition.19 - Final Patient Acuity:

Then acuity of the patient after EMS care.

- 4219001 Critical (Red)
- o 4219003 Emergent (Yellow)
- 4219005 Lower Acuity (Green)
- o 4219007 Dead without Resuscitation Efforts (Black)
- 4219009 Dead with Resuscitation Efforts (Black)
- o 4219011 Non-Acute/Routine

*eDisposition.20 - Reason for Choosing Destination:

The reason the unit chose to deliver or transfer the patient to the destination.

- 4220001 Closest Facility
- 4220003 Diversion
- 4220005 Family Choice
- 4220007 Insurance Status/Requirement
- 4220009 Law Enforcement Choice
- 4220011 On-Line/On-Scene Medical Direction
- o 4220013 Other
- o 4220015 Patient's Choice
- 4220017 Patient's Physician's Choice
- 4220019 Protocol
- 4220021 Regional Specialty Center

*eDisposition.21 - Type of Destination:

The type of destination the patient was delivered or transferred to.

- o 4221001 Home
- o 4221003 Hospital-Emergency Department
- 4221005 Hospital-Non-Emergency Department Bed
- 4221007 Clinic
- 4221009 Morgue/Mortuary
- o 4221013 Other
- 4221015 Other EMS Responder (air)
- 4221017 Other EMS Responder (ground)
- o 4221019 Police/Jail
- 4221021 Urgent Care
- 4221023 Freestanding Emergency Department
- 4221025 Dialvsis Center
- 4221027 Diagnostic Services
- 4221029 Assisted Living Facility
- 4221031 Mental Health Facility
- 4221033 Nursing Home
- 4221035 Other Recurring Care Center
- 4221037 Physical Rehabilitation Facility
- 4221039 Drug and/or Alcohol Rehabilitation Facility
- 4221041 Skilled Nursing Facility

• *eDisposition.22 - Hospital In-Patient Destination:

The location within the hospital that the patient was taken directly by EMS (e.g.,Cath Lab, ICU, etc.).

- o 4222001 Hospital-Burn
- 4222003 Hospital-Cath Lab
- o 4222005 Hospital-CCU
- 4222007 Hospital-Endoscopy
- 4222009 Hospital-Hospice
- 4222011 Hospital-Hyperbaric Oxygen Treatment
- o 4222013 Hospital-ICU
- 4222015 Hospital-Labor and Delivery
- 4222017 Hospital-Med/Surg
- o 4222019 Hospital-Mental Health
- 4222021 Hospital-MICU
- 4222023 Hospital-NICU
- 4222025 Hospital-Nursery
- 4222027 Hospital-Peds (General)
- 4222029 Hospital-Peds ICU
- o 4222031 Hospital-OR
- 4222033 Hospital-Orthopedic
- o 4222035 Hospital-Other
- 4222037 Hospital-Out-Patient Bed
- 4222039 Hospital-Radiology Services MRI
- 4222041 Hospital-Radiology Services CT/PET
- 4222043 Hospital-Radiology Services X-Ray
- 4222045 Hospital-Radiation
- 4222047 Hospital-Rehab
- 4222049 Hospital-SICU
- 4222051 Hospital-Oncology
- 4222053 Hospital-Outpatient Surgery

*eDisposition.23 - Hospital Capability:

The primary hospital capability associated with the patient's condition for this transport (e.g., Trauma, STEMI, Peds, etc.).

- 9908001 Behavioral Health
- o 9908003 Burn Center
- 9908005 Critical Access Hospital
- 9908007 Hospital (General)
- 9908009 Neonatal Center
- o 9908011 Pediatric Center
- 9908019 Rehab Center
- o 9908021 Trauma Center Level 1
- 9908023 Trauma Center Level 2
- o 9908025 Trauma Center Level 3
- 9908027 Trauma Center Level 4
- 9908029 Trauma Center Level 5
- 9908031 Cardiac-STEMI/PCI Capable

- 9908033 Cardiac-STEMI/PCI Capable (24/7)
- o 9908035 Cardiac-STEMI/Non-PCI Capable
- 9908037 Stroke-Acute Stroke Ready Hospital (ASRH)
- 9908039 Stroke-Primary Stroke Center (PSC)
- o 9908041 Stroke-Thrombectomy-Capable Stroke Center (TSC)
- 9908043 Stroke-Comprehensive Stroke Center (CSC)
- o 9908045 Cancer Center
- 9908047 Labor and Delivery
- *eDisposition.24 Destination Team Pre-Arrival Alert or Activation:

Indication that an alert (or activation) was called by EMS to the appropriate destination healthcare facility team. The alert (or activation) should occur prior to the EMS Unit arrival at the destination with the patient.

- o 4224001 No
- 4224003 Yes-Adult Trauma
- 4224005 Yes-Cardiac Arrest
- o 4224007 Yes-Obstetrics
- 4224009 Yes-Other
- o 4224011 Yes-Pediatric Trauma
- 4224013 Yes-STEMI
- o 4224015 Yes-Stroke
- 4224017 Yes-Trauma (General)
- o 4224019 Yes-Sepsis
- *eDisposition.25 Date/Time of Destination Prearrival Alert or Activation:

The Date/Time EMS alerted, notified, or activated the Destination Healthcare Facility prior to EMS arrival. The EMS assessment identified the patient as acutely ill or injured based on exam and possibly specified alert criteria.

- eDisposition.26 Disposition Instructions Provided:
 - Information provided to patient during disposition for patients not transported or treated.
- *eDisposition.27 Unit Disposition:

The patient disposition for an EMS event identifying whether patient contact was made.

- 4227001 Patient Contact Made
 - This crew/unit arrived on-scene and made contact with a patient. The definition of a "Patient" is based on state regulations, protocols or local agency policies. There is too much variation in this definition by region and therefore no global definition should be set in the NEMSIS dataset.
- 4227003 Cancelled on Scene
 - This crew/unit arrived on-scene but was cancelled by another unit prior to having any potential patient contact or providing any services. An example scenario would be a first responder unit arrives, realizes they have a patient refusal as the transport unit arrives on scene and the first responder unit cancels the transport unit before they can do anything.

- 4227005 Cancelled Prior to Arrival at Scene
 This crew/unit was cancelled before arriving on-scene; therefore, it is
 unknown whether there could have been a patient or not. Unit may be
 cancelled prior to, or during response.
- 4227007 No Patient Contact This crew/unit arrived on-scene but this crew/unit made no contact with a patient. Generally, this will mean a patient was present with another unit having patient contact, with this unit not having patient contact. This unit can still be providing rescue and support services to the incident in this case
- 4227009 No Patient Found
 This crew/unit arrived on-scene and looked for a patient, but none was found. The patient may have left the scene, or caller was mistaken and there never was a patient. For example, this unit may have been dispatched to an unconscious person, but arrived to find a college student just taking a nap on the lawn.
- 4227011 Non-Patient Incident (Not Otherwise Listed)
 This crew/unit provided some sort of service that did not involve a patient.
 The definition of a "Patient" is based on state regulations, protocols or local agency policies. This type of incident could be a standby with no patient generated, organ transport, lift or public assist that was truly not a patient, or unit may have provided event command services.

• *eDisposition.28 - Patient Evaluation/Care:

The patient disposition for an EMS event identifying whether a patient was evaluated and care or services were provided.

- 4228001 Patient Evaluated and Care Provided A patient was present, evaluated, and care was provided by this crew. This is the standard situation where a patient was present and cared for or "treated", without refusal, by EMS. This is also the appropriate selection for when a non-transporting crew (agency) assisted with the care of the patient (i.e. administered medication, procedures, vitals).
- 4228003 Patient Evaluated and Refused Care A patient was present and was evaluated by this crew, but the patient refused all care. The patient may or may not be transported in combination with this value. Refusal of individual interventions should be documented in the appropriate medication or procedure and the patient disposition should be patient evaluated and care provided.
- 4228005 Patient Evaluated, No Care Required
 A patient was present and refused any evaluation or care by this crew.
 This value should only be combined with "Patient Refused Transport" or "No Transport."
- 4228007 Patient Refused Evaluation/Care A patient was present and was evaluated by this crew, but no care appeared to be required. Crews would need to evaluate someone in order to determine that no care was required. An example would be a DOA with no resuscitation attempted; obvious death; community paramedicine.

4228009 Patient Support Services Provided
 This unit provided support services to another crew/unit providing care.
 Support services could include extrication, carrying bags or helping to move a patient. This reporting crew/unit did not have patient contact but another crew/unit did.

• *eDisposition.29 - Crew Disposition:

The crew disposition for this EMS event identifying which crew provided primary patient care or whether support services were required.

- 4229001 Initiated and Continued Primary Care This crew began primary care for this patient with no previous care provided on-scene and did not transfer the care to another unit. Generally, this will be a one-unit response where there is only one crew on the responding unit and no other crew or unit was present. If multiple units from the same agency respond to an incident as an organized response and local rules do not require each unit to do a separate report, then this value would apply to the "agency" response of multiple units under one report. For transfers, "Primary Care" is considered to begin once crew receives responsibility for the patient and any care provided by the sending facility does not qualify as previous care for this value.
- 4229003 Initiated Primary Care and Transferred to Another EMS Crew This crew began primary care for this patient with no previous care provided on scene and then transferred the care to another unit.
- 4229005 Provided Care Supporting Primary EMS Crew
 Another crew started and continued primary care and this unit provided
 patient care supporting the primary crew's care. For example, first
 responders arrived at the same time or later than the transport crew and
 helped provide care, but were not the primary crew in charge of patient
 care.
- 4229007 Assumed Primary Care from Another EMS Crew
 This crew assumed primary care of a patient that was initiated by another
 EMS Crew. This would commonly be used by an ALS intercept unit
 arriving and taking over primary care from a BLS unit.
- 4229009 Incident Support Services Provided (Including Standby) This crew/unit provided non-patient care support services to an incident in general or to another unit/crew that is providing patient care. Support services could include extrication, carrying bags or equipment, helping move a patient, standby for police or a fire or fire rehab services where no one rose to the level of a patient.
- 4229011 Back in Service, No Care/Support Services Required This crew/unit is immediately back in service as there was no patient care or support services required of the crew/unit at the incident. This would primarily apply if no patient was found or if unit was cancelled on scene.
- 4229013 Back in Service, Care/Support Services Refused
 This crew/unit is back in service after patient care or support services
 were refused despite being offered. No care or support services should be

provided; however, an evaluation may have occurred prior to refusal of any care.

• *eDisposition.30 - Transport Disposition:

The transport disposition for an EMS event identifying whether a transport occurred and by which unit.

- 4230001 Transport by This EMS Unit (This Crew Only) A patient was transported in this crew's unit by only this crew. This would be a standard ambulance transport. This should also be used if the crew transports the patient any distance to a helicopter or other EMS ground transport unit that subsequently transports to the final destination. In this case, the type of destination for this crew should be "Other EMS Air or Ground."
- 4230003 Transport by This EMS Unit, with a Member of Another Crew A patient was transported in this crew's unit with this crew and member(s) of another crew. Common uses would be when the primary transport crew needs additional assistance from another crew during transport or when an intercepting ALS provider is on board.
- 4230005 Transport by Another EMS Unit The patient was transported, but by another crew/unit. For example, a non-transport unit providing and transferring care to another crew/unit who then transports the patient. A destination for the transport should be the listed so the receiving facility can access the non- transport EMS record.
- 4230007 Transport by Another EMS Unit, with a Member of This Crew The patient is transported in another crew's unit with a member of this crew. This would be used when an ALS intercept provider transports in another crew's unit or this crew provides additional assistance to the other unit during transport.
- 4230009 Patient Refused Transport
 Patient refused EMS transport. This would apply to a standard patient refusal of transport or when a patient was treated and chose to be transported by law enforcement or private vehicle.
- 4230011 Non-Patient Transport (Not Otherwise Listed)
 A transport occurred but did not include a patient. This could include transport of organs, special equipment-such as bariatric equipment or an air crew to or from their aircraft without a patient.
- 4230013 No Transport
 No transport of a patient occurred. For example, following a lift assist that did not require a refusal.

• *eDisposition.31 - Reason for Refusal/Release:

Describes reason(s) for the patient's refusal of care/transport OR the EMS clinician's decision to release the patient.

- 4231001 Against Medical Advice
- 4231003 Patient/Guardian Indicates Ambulance Transport is Not Necessary
- 4231005 Released Following Protocol Guidelines
- o 4231007 Released to Law Enforcement

- o 4231009 Patient/Guardian States Intent to Transport by Other Means
- o 4231011 DNR
- o 4231013 Medical/Physician Orders for Life Sustaining Treatment
- o 4231015 Other, Not Listed

• *eDisposition.32 - Level of Care Provided per Protocol:

The general level of care provided to this patient as defined per provider level in local EMS protocols or clinical guidelines.

- 4232001 BLS All Levels
- 4232003 ALS AEMT/Intermediate
- o 4232005 ALS Paramedic
- 4232007 EMS and Other Health-Care Staff
- o 4232009 Critical Care
- 4232011 Integrated Health Care
- o 4232013 No Care Provided

eOutcome Section

Note: This is not data that the EMS crew is required to enter.

• *eOutcome.03 - External Report ID/Number Type:

The Type of External Report or Record associated with the Report/ID Number.

- 4303001 Disaster Tag
- o 4303003 Fire Incident Report
- 4303005 Hospital-Receiving
- 4303007 Hospital-Transferring
- o 4303009 Law Enforcement Report
- 4303011 Other
- 4303013 Other Registry
- o 4303015 Other Report
- 4303017 Patient ID
- 4303019 Prior EMS Patient Care Report
- 4303021 STEMI Registry
- 4303023 Stroke Registry
- 4303025 Trauma Registry

*eOutcome.04 - External Report ID/Number:

The ID or Number of the external report or record in eOutcome.03.

• eOutcome.05 - Other Report Registry Type:

The type of external report/registry that was documented as "other" in eOutcome.03.

eOther Section

eOther.02 - Potential System of Care/Specialty/Registry Patient

An indication if the patient may meet the entry criteria for an injury or illness specific registry.

- o 4502001 Airway
- o 4502003 Burn
- 4502005 Cardiac/MI

- 4502007 CVA/Stroke
- 4502009 Drowning
- o 4502011 Other
- 4502013 Spinal Cord Injury
- o 4502015 STEMI/Acute Cardiac
- o 4502017 Trauma
- 4502019 Traumatic Brain Injury

eOther.03 - Personal Protective Equipment Used:

The personal protective equipment which was used by EMS personnel during this EMS patient contact.

- 4503001 Eye Protection
- o 4503003 Gloves
- o 4503005 Helmet
- 4503007 Level A Suit
- 4503009 Level B Suit
- o 4503011 Level C Suit
- 4503013 Level D Suit (Turn out gear)
- o 4503015 Mask-N95
- 4503017 Mask-Surgical (Non-Fitted)
- o 4503019 Other
- o 4503021 PAPR
- o 4503023 Reflective Vest

eOther.04 - EMS Professional (Crew Member) ID:

The ID number of the EMS Crew Member associated with eOther.03, eOther.05, eOther.06.

• eOther.05 - Suspected EMS Work Related Exposure, Injury, or Death:

Indication of an EMS work related exposure, injury, or death associated with this EMS event.

- o 9923001 No
- o 9923003 Yes
- eOther.06 The Type of Work-Related Injury, Death or Suspected Exposure:

The type of EMS crew member work-related injury, death, or suspected exposure related to the EMS response.

- 4506001 Death-Cardiac Arrest
- 4506003 Death-Injury Related
- o 4506005 Death-Other
- 4506007 Exposure-Airborne Respiratory/Biological/Aerosolized Secretions
- 4506009 Exposure-Body Fluid Contact to Broken Skin
- 4506011 Exposure-Body Fluid Contact with Eye
- 4506013 Exposure-Body Fluid Contact with Intact Skin
- 4506015 Exposure-Body Fluid Contact with Mucosal Surface
- 4506017 Exposure-Needle Stick with Body Fluid Injection
- 4506019 Exposure-Needle Stick without Body Fluid Injection
- 4506021 Exposure-Toxin/Chemical/Hazmat
- 4506023 Injury-Lifting/Back/Musculoskeletal
- o 4506025 Injury-Other

- o 4506027 None
- 4506029 Other

• eOther.07 - Natural, Suspected, Intentional, or Unintentional Disaster:

Event caused by natural forces or Suspected and Intentional/Unintentional Disasters (terrorism).

- o 4507001 Biologic Agent
- 4507003 Building Failure
- o 4507005 Chemical Agent
- 4507007 Explosive Device
- o 4507009 Fire
- o 4507011 Hostage Event
- o 4507013 Mass Gathering
- o 4507015 Mass Illness
- o 4507017 Nuclear Agent
- 4507019 Radioactive Device
- 4507021 Secondary Destructive Device
- o 4507023 Shooting/Sniper
- o 4507025 Vehicular
- 4507027 Weather (Other)
- o 4507029 Earthquake
- 4507031 Flood
- o 4507033 Land Slide
- o 4507035 Winter Storm
- 4507037 Tornado
- o 4507039 Hurricane

• eOther.08 - Crew Member Completing this Report:

The statewide assigned ID number of the EMS crew member which completed this patient care report.

eOther.09 - External Electronic Document Type:

Document type which has been electronically stored with PCR.

- 4509001 Other Audio Recording
- 4509003 Billing Information
- o 4509005 Diagnostic Image (CT, X-ray, US, etc.)
- o 4509006 DNR
- 4509008 Living Will
- 4509009 ECG/Lab Results
- 4509011 Guardianship/Power of Attorney
- 4509013 Other Healthcare Record
- o 4509015 Other
- 4509017 Patient Identification
- o 4509019 Patient Refusal Sheet
- 4509021 Other Picture/Graphic
- o 4509025 Other Video/Movie
- 4509027 ePCR

• eOther.10 - File Attachment Type:

The description of the file attachment stored in File Attachment Image (eOther.11).

eOther.11 - File Attachment Image:

The file that is attached electronically to the patient care report.

Demographic Data Set (Agency)

Captures information about the EMS agency, personnel, and operational configurations.

This information is generally not available for EMS personnel to complete in the ePCR. It is typically entered by the agency administrator.

dAgency Section

• dAgency.01 - EMS Agency Unique State ID:

A unique ID assigned to the EMS agency which is associated with all state licensure numbers and information.

dAgency.02 - EMS Agency Number:

The state-assigned provider number for the responding agency.

• dAgency.03 - EMS Agency Name:

The formal name of the agency.

• dAgency.04 - EMS Agency State:

The state/territory which assigned the EMS agency number.

dAgency.05 - EMS Agency Service Area States:

The states in which the EMS Agency provides services including the state associated with the EMS Agency Number.

dAgency.06 - EMS Agency Service Area County(ies):

The county(ies) within each state for which the agency formally provides service.

• dAgency.07 - EMS Agency Census Tracts:

The U.S. census tracts in which the EMS agency formally provides service.

dAgency.08 - EMS Agency Service Area ZIP Codes:

The ZIP codes of the EMS Agency's service area.

dAgency.09 - Primary Type of Service:

The primary service type provided by the agency.

- o 9920001 911 Response (Scene) with Transport Capability
- 9920003 911 Response (Scene) without Transport Capability
- o 9920005 Air Medical
- o 9920007 ALS Intercept
- o 9920011 Hazmat
- 9920013 Medical Transport (Convalescent, Interfacility Transfer Hospital and Nursing Home)
- o 9920015 Rescue
- 9920017 Community Paramedicine

9920019 Critical Care (Ground)

dAgency.10 - Other Types of Service:

The other service type(s) which are provided by the agency.

- 9920001 911 Response (Scene) with Transport Capability
- o 9920003 911 Response (Scene) without Transport Capability
- 9920005 Air Medical
- o 9920007 ALS Intercept
- 9920011 Hazmat
- 9920013 Medical Transport (Convalescent, Interfacility Transfer Hospital and Nursing Home)
- 9920015 Rescue
- 9920017 Community Paramedicine
- 9920019 Critical Care (Ground)

dAgency.11 - Level of Service:

The level of service which the agency provides EMS care for every request for service (the minimum certification level). This may be the license level granted by the state EMS office.

- 9917001 Advanced Emergency Medical Technician (AEMT)
- o 9917002 Emergency Medical Technician Intermediate
- 9917003 Emergency Medical Responder (EMR)
- 9917005 Emergency Medical Technician (EMT)
- 9917007 Paramedic
- 9917019 Physician
- 9917021 Critical Care Paramedic
- 9917023 Community Paramedicine
- 9917025 Nurse Practitioner
- o 9917027 Physician Assistant
- 9917029 Licensed Practical Nurse (LPN)
- o 9917031 Registered Nurse

dAgency.12 - Organization Status:

The primary organizational status of the agency. The definition of Volunteer or Non-Volunteer is based on state or local definitions.

o 1016001 Mixed

- 1016003 Non-Volunteer
- o 1016005 Volunteer

*dAgency.13 - Organizational Type:

The organizational structure from which EMS services are delivered (fire, hospital, county, etc).

- o 9912001 Fire Department
- 9912003 Governmental, Non-Fire
- 9912005 Hospital
- o 9912007 Private, Nonhospital
- 9912009 Tribal

dAgency.14 - EMS Agency Organizational Tax Status:

The EMS Agencies business/corporate organizational tax status.

- 1018001 For Profit
- 1018003 Other (e.g., Government)

- o 1018005 Not For Profit
- dAgency.15 Statistical Calendar Year:

The calendar year to which the information pertains for the EMS Agency and the specific EMS Agency Number (dAgency.02).

dAgency.16 - Total Primary Service Area Size:

The total square miles in the agency's service area.

dAgency.17 - Total Service Area Population:

The total population in the agency's service area based if possible on the 2010 census data.

• dAgency.18 - 911 EMS Call Center Volume per Year:

The number of 911 calls received by the call center during the last calendar year.

• dAgency.19 - EMS Dispatch Volume per Year:

The number of EMS dispatches during the last calendar year.

dAgency.20 - EMS Patient Transport Volume per Year:

The number of EMS transports per year based on the last calendar year.

• dAgency.21 - EMS Patient Contact Volume per Year:

The number of EMS patient contacts per year based on last calendar year.

• dAgency.22 - EMS Billable Calls per Year:

The number of EMS patient encounters which are billable based on the last calendar year.

dAgency.23 - EMS Agency Time Zone:

The time zone for the EMS agency.

- o 1027001 All other time zones
- 1027003 GMT-04:00 Atlantic Time
- 1027005 GMT-05:00 Eastern Time
- 1027007 GMT-06:00 Central Time
- o 1027009 GMT-07:00 Mountain Time
- 1027011 GMT-08:00 Pacific Time
- o 1027013 GMT-09:00 Alaska
- 1027015 GMT-10:00 Hawaii
- o 1027017 GMT-11:00 Midway Island, Samoa
- dAgency.24 EMS Agency Daylight Savings Time Use:

Indicate if the EMS agency conforms to Daylight Savings Time.

- o 9923001 No
- o 9923003 Yes
- dAgency.25 National Provider Identifier:

The National Provider Identifier issued by CMS.

• dAgency.26 - Fire Department ID Number:

The state assigned Fire Department ID for EMS Agency(ies) operating within a Fire Department.

dContact Section

dContact.01 - Agency Contact Type:

The contact type within the EMS agency.

1101001 Administrative Assistant

- 1101003 EMS Agency Director/Chief/Lead Administrator/CEO
- 1101005 EMS Assistant Agency Director/Chief/Administrator/CEO
- 1101007 EMS Assistant Medical Director
- o 1101009 EMS IT/Data Specialist
- o 1101011 EMS Medical Director
- 1101013 EMS Quality/Performance Improvement Specialist
- 1101015 EMS Training/Education Specialist
- o 1101017 Other
- dContact.02 Agency Contact Last Name:

The last name of the agency's primary contact.

dContact.03 - Agency Contact First Name:

The first name of the agency's primary contact.

dContact.04 - Agency Contact Middle Name/Initial:

The middle name or initial of the agency's primary contact.

• dContact.05 - Agency Contact Address:

The street address of the agency contact's mailing address.

• dContact.06 - Agency Contact City:

The city of the agency contact's mailing address.

• dContact.07 - Agency Contact State:

The state of the agency contact's mailing address.

dContact.08 - Agency Contact ZIP Code:

The ZIP code of the agency contact's mailing address.

• dContact.09 - Agency Contact Country:

The Country code of the Agency contact's mailing address.

- CA Canada
- MX Mexico
- US United States
- dContact.10 Agency Contact Phone Number:

Agency contact phone number.

• dContact.11 - Agency Contact Email Address:

The primary email address of the Agency contact.

dContact.12 - EMS Agency Contact Web Address:

The primary website address of the agency.

dContact.13 - Agency Medical Director Degree:

The medical school degree type of the EMS Agency Medical Director.

- Emergency Medicine, Internal Medicine).
 - o 1113001 Doctor of Medicine
 - 1113003 Doctor of Osteopathy
- dContact.14 Agency Medical Director Board Certification Type:

Documentation of the type of board certification of the EMS Agency Medical Director.

- 1114001 Allergy and Immunology
- 1114003 Anesthesiology
- 1114005 Colon and Rectal Surgery
- 1114007 Dermatology
- 1114009 Emergency Medicine

- o 1114011 Family Medicine
- o 1114013 Internal Medicine
- 1114015 Neurological Surgery
- 1114017 Neurology
- 1114019 None (Not Board Certified)
- 1114021 Obstetrics and Gynecology
- 1114023 Ophthalmology
- 1114025 Orthopedic Surgery
- 1114027 Otolaryngology
- 1114029 Pediatrics
- 1114031 Physical Medicine and Rehabilitation
- 1114033 Plastic Surgery
- o 1114035 Psychiatry
- 1114037 Surgery
- 1114039 Thoracic Surgery
- 1114041 Urology
- 1114043 Vascular Surgery
- dContact.15 Medical Director Compensation:

Indication of Medical Director Compensation.

- 1115001 Compensated
- 1115003 Non-Compensated
- dContact.16 EMS Medical Director Fellowship Trained Status:

Indication if the EMS Medical Director is Fellowship trained.

- o 9923001 No
- o 9923003 Yes

dConfiguration Section

- dConfiguration.01 State Associated with this Configuration:
 - The state associated with this configuration.
- *dConfiguration.06 EMS Certification Levels Permitted to Perform Each Procedure:

EMS certification levels which are permitted to perform the procedure listed in dConfiguration.07.

- 9917001 Advanced Emergency Medical Technician (AEMT)
- o 9917002 Emergency Medical Technician Intermediate
- o 9917003 Emergency Medical Responder (EMR)
- 9917005 Emergency Medical Technician (EMT)
- 9917007 Paramedic
- o 9917019 Physician
- 9917021 Critical Care Paramedic
- 9917023 Community Paramedicine
- o 9917025 Nurse Practitioner
- 9917027 Physician Assistant
- o 9917029 Licensed Practical Nurse (LPN)
- 9917031 Registered Nurse

• *dConfiguration.07 - EMS Agency Procedures:

A list of all procedures the agency has implemented and available for use by any/all EMS certification levels.

*dConfiguration.08 - EMS Certification Levels Permitted to Administer Each Medication:

All EMS certification levels which are permitted to administer the medications listed in dConfiguration.09 (EMS Agency Medications).

- 9917001 Advanced Emergency Medical Technician (AEMT)
- o 9917002 Emergency Medical Technician Intermediate
- 9917003 Emergency Medical Responder (EMR)
- 9917005 Emergency Medical Technician (EMT)
- 9917007 Paramedic
- 9917019 Physician
- 9917021 Critical Care Paramedic
- 9917023 Community Paramedicine
- 9917025 Nurse Practitioner
- o 9917027 Physician Assistant
- 9917029 Licensed Practical Nurse (LPN)
- 9917031 Registered Nurse

*dConfiguration.09 - EMS Agency Medications:

A list of all medications the agency has implemented and have available for use.

- 116762002 Administration of blood product
- 116795008 Transfusion of cryoprecipitate
- 116861002 Transfusion of fresh frozen plasma
- 116865006 Administration of albumin
- 180208003 Intravenous blood transfusion of platelets
- 33389009 Transfusion of whole blood
- 71493000 Transfusion of packed red blood cells

*dConfiguration.10 - EMS Agency Protocols:

A list of all of the EMS field protocols that the agency has in place and available for use.

Note: Agencies may alter the specific data selection to match State of Michigan protocols or local MCA protocols. In parentheses, matching State of Michigan protocol.

- 9914001 Airway (Airway Management Protocol)
- 9914003 Airway-Failed (Airway Management Protocol)
- 9914005 Airway-Obstruction/Foreign Body (Airway Management Protocol)
- o 9914007 Airway-Rapid Sequence Induction (RSI-Paralytic)
- o 9914009 Airway-Sedation Assisted (Non-Paralytic)
- 9914011 Cardiac Arrest-Asystole (Cardiac Arrest General)
- o 9914013 Cardiac Arrest-Hypothermia-Therapeutic
- 9914015 Cardiac Arrest-Pulseless Electrical Activity (Cardiac Arrest General)
- 9914017 Cardiac Arrest-Ventricular Fibrillation/ Pulseless Ventricular Tachycardia (Cardiac Arrest General)

- 9914019 Cardiac Arrest-Post Resuscitation Care (Return of Spontaneous Circulation)
- 9914021 Environmental-Altitude Sickness (Poisoning/Overdose/Environmental Exposure)
- 9914023 Environmental-Cold Exposure (Hypothermia/Frostbite)
- 9914025 Environmental-Frostbite/Cold Injury (Hypothermia/Frostbite)
- o 9914027 Environmental-Heat Exposure/Exhaustion (Heat Emergencies)
- o 9914029 Environmental-Heat Stroke/Hyperthermia (Heat Emergencies)
- 9914031 Environmental-Hypothermia (Hypothermia/Frostbite)
- 9914033 Exposure-Airway/Inhalation Irritants (Poisoning/Overdose/Environmental Exposure)
- 9914035 Exposure-Biological/Infectious (General CBRNE Identification of Agents)
- 9914037 Exposure-Blistering Agents (General CBRNE Identification of Agents)
- 9914041 Exposure-Chemicals to Eye (Poisoning/Overdose/Environmental Exposure)
- 9914043 Exposure-Cyanide (Cyanide Exposure)
- 9914045 Exposure-Explosive/ Blast Injury (General CBRNE Identification of Agents)
- 9914047 Exposure-Nerve Agents (General CBRNE Identification of Agents)
- 9914049 Exposure-Radiologic Agents (General CBRNE Identification of Agents)
- 9914051 General-Back Pain (Pain Management)
- o 9914053 General-Behavioral/Patient Restraint (Behavioral Emergencies)
- 9914055 General-Cardiac Arrest (Cardiac Arrest General)
- 9914057 General-Dental Problems
- 9914059 General-Epistaxis
- 9914061 General-Fever (Pediatric Fever)
- 9914063 General-Individualized Patient Protocol (General Pre-Hospital Care)
- 9914065 General-Indwelling Medical Devices/Equipment
- 9914067 General-IV Access (Vascular Access & IV Fluid Therapy)
- 9914069 General-Medical Device Malfunction
- o 9914071 General-Pain Control (Pain Management)
- 9914073 General-Spinal Immobilization/Clearance (Spinal Injury Assessment)
- 9914075 General-Universal Patient Care/ Initial Patient Contact (General Pre-Hospital Care)
- 9914077 Injury-Amputation (Soft Tissue and Orthopedic Injuries)
- 9914079 Injury-Bites and Envenomations-Land (Poisoning/Overdose/Environmental Exposure)
- 9914081 Injury-Bites and Envenomations-Marine (Poisoning/Overdose/Environmental Exposure)
- 9914083 Injury-Bleeding/ Hemorrhage Control (Bleeding Control (BCON))

- 9914085 Injury-Burns-Thermal (Burns)
- 9914087 Injury-Cardiac Arrest (Traumatic Arrest)
- 9914089 Injury-Crush Syndrome (General Crush Injury)
- 9914091 Injury-Diving Emergencies (Drowning/Submersion)
- 9914093 Injury-Drowning/Near Drowning (Drowning/Submersion)
- 9914095 Injury-Electrical Injuries (Burns)
- 9914097 Injury-Extremity (General Trauma)
- 9914099 Injury-Eye
- 9914101 Injury-Head (Head Injury (TBI))
- 9914103 Injury-Impaled Object (Soft Tissue & Orthopedic Injuries)
- 9914105 Injury-Multisystem (General Trauma)
- 9914107 Injury-Spinal Cord (Spinal Injury Assessment)
- 9914109 Medical-Abdominal Pain (Abdominal Pain)
- 9914111 Medical-Allergic Reaction/Anaphylaxis (Anaphylaxis/Allergic Reaction)
- 9914113 Medical-Altered Mental Status (Altered Mental Status/Pediatric Altered Mental Status)
- 9914115 Medical-Bradycardia (Bradycardia/Pediatric Bradycardia)
- 9914117 Medical-Cardiac Chest Pain (Chest Pain/Acute Coronary Syndrome)
- 9914119 Medical-Diarrhea (General Pre-hospital Care)
- o 9914121 Medical-Hyperglycemia
- 9914123 Medical-Hypertension
- 9914125 Medical-Hypoglycemia/Diabetic Emergency (Altered Mental Status/Pediatric Altered Mental Status)
- 9914127 Medical-Hypotension/Shock (Non-Trauma) (Shock)
- 9914129 Medical-Influenza-Like Illness/ Upper Respiratory Infection (Respiratory Distress/Pediatric Respiratory Distress, Failure or Arrest)
- 9914131 Medical-Nausea/Vomiting (Nausea & Vomiting)
- 9914133 Medical-Newborn/ Neonatal Resuscitation (Newborn/Neonatal Assessment and Resuscitation)
- 9914135 General-Overdose/Poisoning/Toxic Ingestion (Poisoning/Overdose/Environmental Exposure)
- 9914137 Medical-Pulmonary Edema/CHF (Pulmonary Edema/Cardiogenic Shock)
- 9914139 Medical-Respiratory Distress/Asthma/COPD/Reactive Airway (Respiratory Distress/Pediatric Respiratory Distress, Failure or Arrest)
- 9914141 Medical-Seizure (Seizures/Pediatric Seizures)
- 9914143 Medical-ST-Elevation Myocardial Infarction (STEMI) (Chest Pain/Acute Coronary Syndrome)
- 9914145 Medical-Stroke/TIA (Stroke or Suspected Stroke)
- 9914147 Medical-Supraventricular Tachycardia (Including Atrial Fibrillation) (Tachycardia/Pediatric Tachycardia)
- 9914149 Medical-Syncope (Syncope)
- 9914151 Medical-Ventricular Tachycardia (With Pulse) (Tachycardia/Pediatric Tachycardia)

- 9914153 Not Done
- 9914155 OB/GYN-Childbirth/Labor/Delivery (Childbirth and OB Emergencies)
- 9914157 OB/GYN-Eclampsia (Childbirth and OB Emergencies)
- 9914159 OB/GYN-Gynecologic Emergencies (Childbirth and OB Emergencies)
- 9914161 OB/GYN-Pregnancy Related Emergencies (Childbirth and OB Emergencies)
- 9914163 OB/GYN-Post-partum Hemorrhage (Childbirth and OB Emergencies)
- 9914165 Other
- 9914167 Exposure-Carbon Monoxide (Poisoning/Overdose/Environmental Exposure)
- 9914169 Cardiac Arrest-Do Not Resuscitate (Do Not Resuscitate/MI-POST)
- 9914171 Cardiac Arrest-Special Resuscitation Orders (Cardiac Arrest General)
- 9914173 Exposure-Smoke Inhalation (Poisoning/Overdose/Environmental Exposure)
- 9914175 General-Community Paramedicine / Mobile Integrated Healthcare (Community Paramedicine)
- o 9914177 General-Exception Protocol (Protocol Deviation)
- 9914179 General-Extended Care Guidelines
- o 9914181 General-Interfacility Transfers (Interfacility Transports)
- 9914183 General-Law Enforcement Blood for Legal Purposes (Evidentiary Blood Draw)
- 9914185 General-Law Enforcement Assist with Law Enforcement Activity
- 9914187 General-Neglect or Abuse Suspected (Child Abuse and Neglect/Vulnerable Adult Abuse, Neglect or Exploitation)
- o 9914189 General-Refusal of Care (Refusal of Care; Adult and Minor)
- 9914191 Injury-Mass/Multiple Casualties (Mass Casualty Injuries)
- 9914193 Injury-Thoracic (General Trauma)
- 9914195 Medical-Adrenal Insufficiency (Adrenal Crisis)
- 9914197 Medical-Apparent Life Threatening Event (ALTE) (Crashing Adult/Impending Arrest/Pediatric Crashing Patient/Impending Arrest)
- 9914199 Medical-Tachycardia (Tachycardia/Pediatric Tachycardia)
- 9914201 Cardiac Arrest-Determination of Death / Withholding Resuscitative Efforts (Dead on Scene/Termination of Resuscitation)
- 9914203 Injury-Conducted Electrical Weapon (e.g., Taser) (Soft Tissue & Orthopedic Injuries)
- 9914205 Injury-Facial Trauma (General Trauma)
- 9914207 Injury-General Trauma Management (General Trauma)
- 9914209 Injury-Lightning/Lightning Strike (Poisoning/Overdose/Environmental Exposure)
- 9914211 Injury- SCUBA Injury/Accidents (Poisoning/Overdose/Environmental Exposure)

- 9914213 Injury-Topical Chemical Burn (Poisoning/Overdose/Environmental Exposure)
- 9914215 Medical-Beta Blocker Poisoning/Overdose (Poisoning/Overdose/Environmental Exposure)
- 9914217 Medical-Calcium Channel Blocker Poisoning/Overdose (Poisoning/Overdose/Environmental Exposure)
- 9914219 Medical-Opioid Poisoning/Overdose (Opioid Overdose Treatment and Prevention)
- 9914221 Medical-Respiratory Distress-Bronchiolitis (Pediatric Respiratory Distress, Failure or Arrest)
- 9914223 Medical-Respiratory Distress-Croup (Pediatric Respiratory Distress, Failure or Arrest)
- 9914225 Medical-Stimulant Poisoning/Overdose (Poisoning/Overdose/Environmental Exposure)

dConfiguration.11 - EMS Agency Specialty Service Capability:

Special training or services provided by the EMS Agency and available to the EMS service area/community.

- o 1211001 Air Rescue
- 1211003 CBRNE
- o 1211005 Community Health Medicine
- 1211007 Disaster Medical Assistance Team (DMAT)
- 1211009 Disaster Mortuary (DMORT)
- 1211011 Dive Rescue
- 1211013 Farm Rescue
- o 1211015 High Angle Rescue
- 1211017 Machinery Disentanglement
- o 1211019 None
- 1211021 Ski / Snow Rescue
- 1211023 Tactical EMS
- 1211025 Trench / Confined Space Rescue
- 1211027 Urban Search and Rescue (USAR)
- 1211029 Vehicle Extrication
- 1211031 Veterinary Medical Assistance Team (VMAT)
- o 1211033 Water or Ice Related Rescue (Incl Swift Water)
- 1211035 Wilderness Search and Rescue

dConfiguration.12 - Billing Status:

Indication of whether the EMS agency routinely bills for any segment of the patient population.

- o 9923001 No
- o 9923003 Yes

*dConfiguration.13 - Emergency Medical Dispatch (EMD) Provided to EMS Agency Service Area:

Indication as to whether Emergency Medical Dispatch is provided to the EMS Agency's service area.

- o 1213001 No
- 1213003 Yes, 100% of the EMS Agency's Service Area

o 1213005 Yes, Less than 100% of the EMS Agency's Service Area

• dConfiguration.14 - EMD Vendor:

The vendor or company associated with the EMD Card set and algorithms.

dConfiguration.15 - Patient Monitoring Capability(ies):

The EMS Agency's patient monitoring capability which can be provided to any/all patients presenting to EMS.

- o 1215001 Capnography-Numeric
- 1215003 Capnography-Waveform
- 1215005 ECG-12 Lead or Greater
- 1215007 ECG-Less than 12 Lead (Cardiac Monitor)
- 1215009 Oximetry-Carbon Monoxide
- 1215011 Oximetry-Oxygen
- o 1215013 Pressure Measurement-Invasive (Arterial, CVP, Swan, etc.)
- o 1215015 Pressure Measurement-Non-Invasive (Blood Pressure, etc.)
- 1215017 Ventilator-Transport
- 1215019 Vital Sign Monitoring

*dConfiguration.16 - Crew Call Sign:

The EMS crew call sign used to dispatch and communicate with the unit. This may be the same as the EMS Unit/Vehicle Number in many agencies.

dConfiguration.17 - Dispatch Center (CAD) Name or ID:

The name or ID of the dispatch center (Primary or Secondary Service Answering Point - PSAP) that dispatches the EMS agency.

dLocation section

dLocation.01 - EMS Location Type:

The type of EMS location which could be a fixed station or a pre-determined staging area.

- 1301001 EMS Agency Headquarters
- 1301003 EMS Staging Area
- 1301005 EMS Station
- o 1301007 Other

dLocation.02 - EMS Location Name:

The name of the EMS Location.

dLocation.03 - EMS Location Number:

The ID number of the EMS location.

dLocation.04 - EMS Location GPS:

The GPS coordinate of the EMS location.

dLocation.05 - EMS Location US National Grid Coordinates:

The US National Grid (USNG) coordinates for the EMS location.

• dLocation.06 - EMS Location Address:

The address of the EMS location.

dLocation.07 - EMS Location City:

The city of the EMS location type (e.g., Fixed station, sub-station, staging area, etc.).

dLocation.08 - EMS Location State:

The state of the EMS location.

dLocation.09 - EMS Station or Location ZIP Code:

The ZIP code of the EMS location.

dLocation.10 - EMS Location County:

The county of the EMS location.

dLocation.11 - EMS Location Country:

The country of the EMS location.

- CA Canada
- MX Mexico
- US United States

dLocation.12 - EMS Location Phone Number:

The phone number for the EMS location.

dVehicle section

dVehicle.01 - Unit/Vehicle Number:

The unique ID number for the unit which is specific for each vehicle. This ID number may be the state's vehicle's permit number.

• dVehicle.02 - Vehicle Identification Number (VIN):

The manufacturer's VIN associated with the vehicle.

dVehicle.03 - EMS Unit Call Sign:

The EMS unit number used to dispatch and communicate with the unit. This may be the same as the EMS Unit/Vehicle Number in many agencies.

• dVehicle.04 - Vehicle Type:

The vehicle type of the unit.

- o 1404001 Ambulance
- o 1404003 ATV
- o 1404005 Bicycle
- 1404007 Fire Apparatus
- 1404009 Fixed Wing
- o 1404011 Motorcycle
- o 1404013 Other
- 1404015 Personal Vehicle
- 1404017 Quick Response Vehicle (Non-Transport Vehicle other than Fire Apparatus)
- o 1404019 Rescue
- 1404021 Rotor Craft
- o 1404023 Snow Vehicle
- o 1404025 Watercraft

• dVehicle.05 - Crew State Certification/Licensure Levels:

The certification/licensure level of the ambulance by the state or the certification/licensure level at which the vehicle is most commonly staffed.

- 9917001 Advanced Emergency Medical Technician (AEMT)
- o 9917002 Emergency Medical Technician Intermediate
- 9917003 Emergency Medical Responder (EMR)
- 9917005 Emergency Medical Technician (EMT)
- o 9917007 Paramedic
- o 9917019 Physician

- o 9917021 Critical Care Paramedic
- o 9917023 Community Paramedicine
- o 9917025 Nurse Practitioner
- o 9917027 Physician Assistant
- 9917029 Licensed Practical Nurse (LPN)
- o 9917031 Registered Nurse
- dVehicle.06 Number of Each EMS Personnel Level on Normal 911
 Ambulance Response:

The number of each personnel level associated with the vehicle crew.

 dVehicle.07 - Number of Each EMS Personnel Level on Normal 911 Response (Non-Transport) Vehicle:

The number of each personnel for your EMS Agency's Medical (Non-911) Non-Transport Ambulance.

 dVehicle.08 - Number of Each EMS Personnel Level on Normal Medical (Non-911) Transport Ambulance:

The number of each personnel level for your EMS Agency's Medical (Non-911) Transport Ambulance.

dVehicle.09 - Vehicle Initial Cost:

Initial costs of vehicles held by agency excluding all medical and other equipment not associated with the vehicle. This cost should be inclusive of all sources of funding including grants, donations, and any other capital.

• dVehicle.10 - Vehicle Model Year:

The year the vehicle was manufactured.

• dVehicle.11 - Year Miles/Kilometers Hours Accrued:

The year the hours and miles/kilometers were accumulated.

• dVehicle.12 - Annual Vehicle Hours:

The number of hours the vehicle was in service for the agency for the defined year.

dVehicle.13 - Annual Vehicle Miles/Kilometers:

The number of miles/kilometers the vehicle accumulated in service for the agency for the defined year. (Odometer Reading).

dPersonnel Section

• dPersonnel.01 - EMS Personnel's Last Name:

The last name of the personnel.

• dPersonnel.02 - EMS Personnel's First Name:

The first name of the personnel.

• dPersonnel.03 - EMS Personnel's Middle Name/Initial:

The middle name or initial of the personnel.

dPersonnel.04 - EMS Personnel's Mailing Address:

The street or PO box of the personnel's mailing address.

• dPersonnel.05 - EMS Personnel's City of Residence:

The city of the personnel's mailing address.

dPersonnel.06 - EMS Personnel's State:

The state of the personnel's mailing address.

dPersonnel.07 - EMS Personnel's ZIP Code:

The ZIP code of the personnel's mailing address.

• dPersonnel.08 - EMS Personnel's Country:

The country of the personnel's mailing address.

- o CA Canada
- MX Mexico
- US United States

dPersonnel.09 - EMS Personnel's Phone Number:

The phone number for the personnel.

• dPersonnel.10 - EMS Personnel's Email Address:

The primary email address of the personnel.

dPersonnel.11 - EMS Personnel's Date of Birth:

The personnel's date of birth.

• dPersonnel.12 - EMS Personnel's Gender:

The personnel's gender.

- o 9906001 Female
- o 9906003 Male
- o 9906007 Female-to-Male, Transgender Male
- o 9906009 Male-to-Female, Transgender Female
- o 9906011 Other, neither exclusively male or female
- 9906005 Unknown (Unable to Determine)

dPersonnel.13 - EMS Personnel's Race:

The personnel's race as defined by the OMB (US Office of Management and Budget).

- 1513001 American Indian or Alaska Native
- o 1513003 Asian
- 1513005 Black or African American
- o 1513007 Hispanic or Latino
- 1513009 Native Hawaiian or Other Pacific Islander
- o 1513011 White

dPersonnel.14 - EMS Personnel's Citizenship:

The documentation of the personnel's citizenship.

• dPersonnel.15 - EMS Personnel's Highest Educational Degree:

The highest educational degree completed by the personnel.

- o 1515001 No Schooling Completed
- 1515003 Nursery School to 4th Grade
- 1515005 5th Grade or 6th Grade
- 1515007 7th Grade or 8th Grade
- o 1515009 9th Grade
- o 1515011 10th Grade
- o 1515013 11th Grade
- o 1515015 12th Grade, No Diploma
- 1515017 High School Graduate-Diploma or the Equivalent (GED)
- o 1515019 Some College Credit, but Less than 1 Year
- o 1515021 1 or More Years of College, No Degree
- 1515023 Associate Degree

- o 1515025 Bachelor's Degree
- o 1515027 Master's Degree
- 1515029 Professional Degree (i.e. MD, DDS, DVM, LLB, JD)
- 1515031 Doctorate Degree (i.e. PhD, EdD)

• dPersonnel.16 - EMS Personnel's Degree Subject/Field of Study:

The area of the personnel's post high-school (post-secondary) degree.

- 1516001 Agriculture and Natural Resources
- 1516003 Architecture and Related Services
- 1516005 Area, Ethnic, Cultural, and Gender Studies
- 1516007 Biological and Biomedical Sciences
- o 1516009 Business
- o 1516011 Communication, Journalism, and Related Programs
- 1516013 Communications Technologies
- o 1516015 Computer and Information Sciences
- 1516017 Education
- 1516019 Emergency Medical Services
- 1516021 Engineering
- 1516023 Engineering Technologies
- 1516025 English Language and Literature/Letters
- 1516027 Family and Consumer Sciences/Human Sciences
- o 1516029 Fire Science
- o 1516031 Foreign Languages, Literatures, and Linguistics
- 1516033 Health Professions and Related Clinical Sciences, Not Including Emergency Medical Services
- 1516035 Legal Professions and Studies
- 1516037 Liberal Arts and Sciences, General Studies, and Humanities
- 1516039 Library Science
- 1516041 Mathematics and Statistics
- 1516043 Military Technologies
- 1516045 Multi/Interdisciplinary Studies
- 1516047 Not Classified by Field of Study
- o 1516049 None
- 1516051 Parks, Recreation, Leisure and Fitness Studies
- 1516053 Philosophy and Religious Studies
- 1516055 Physical Sciences and Science Technologies
- 1516057 Precision Production
- 1516059 Psychology
- 1516061 Public Administration and Social Services
- 1516063 Security and Protective Services, Not Including Fire Science
- 1516065 Social Sciences and History
- 1516067 Theology and Religious Vocations
- 1516069 Transportation and Materials Moving
- 1516071 Visual and Performing Arts

• dPersonnel.17 - EMS Personnel's Motor Vehicle License Type:

The type of motor vehicle license (i.e. Class A, B, Pilot, etc.) of the EMS personnel.

- 1517001 All-Terrain Vehicle (ATV)
- 1517003 Commercial Class A
- 1517005 Commercial Class B
- 1517007 Commercial Class C
- 1517009 Motorcycle-Class M
- o 1517011 None
- 1517013 Operator Class D (Normal)
- o 1517015 Other
- o 1517017 Pilot-Rotor Wing Air
- 1517019 Pilot-Fixed Wing Air
- o 1517021 Snowmobile
- o 1517023 Taxi and Livery Class E

• dPersonnel.18 - EMS Personnel's Immunization Status:

The type of immunization status.

- o 9910001 Anthrax
- o 9910003 Cholera
- o 9910005 DPT / TDaP (Diphtheria, Pertussis, Tetanus)
- 9910007 Hemophilus Influenza B
- 9910009 Hepatitis A
- o 9910011 Hepatitis B
- 9910013 Human Papilloma Virus (HPV)
- 9910015 Influenza-H1N1
- o 9910017 Influenza-Other
- 9910019 Influenza-Seasonal (In past 12 months)
- o 9910021 Lyme Disease
- o 9910023 Meningococcus
- o 9910025 MMR (Measles, Mumps, Rubella)
- o 9910027 Other-Not Listed
- o 9910029 Plaque
- 9910031 Pneumococcal (Pneumonia)
- o 9910033 Polio
- o 9910035 Rabies
- 9910037 Rotavirus
- 9910039 Shingles
- 9910041 Small Pox
- o 9910043 Tetanus
- o 9910045 Tuberculosis
- 9910047 Typhoid
- o 9910049 Varicella (Chickenpox)
- o 9910051 Yellow Fever
- o 9910053 None

dPersonnel.19 - EMS Personnel's Immunization Year:

The year associated with each immunization type.

• dPersonnel.20 - EMS Personnel's Foreign Language Ability:

The languages spoken (other than English) by the personnel with at least an elementary level of proficiency.

- o amh Amharic
- o ara Arabic
- o arm Armenian
- o ben Bengali
- o crp Cajun (Creole and Pidgins)
- o chi Chinese
- o hrv Croatian
- cze Czech
- dan Danish
- dut Dutch
- fin Finnish
- tai Formosan
- o fre French
- o cpf French Creole
- o ger German
- o gre Greek
- o guj Gujarati
- o heb Hebrew
- o hin Hindi (Urdu)
- o hun Hungarian
- o ilo llocano
- itl Italian
- o jpn Japanese
- kor Korean
- o kro Kru
- lit Lithuanian
- o mal Malayalam
- hmn Miao (Hmong)
- o mkh Mon-Khmer (Cambodian)
- o nav Navaho
- o nno Norwegian
- o pan Panjabi
- o gem Pennsylvania Dutch (Germanic Other)
- o per Persian
- o pol Polish
- por Portuguese
- o rum Romanian
- o rus Russian
- o smo Samoan
- o srp Serbo-Croatian
- o slo Slovak
- o spa Spanish
- o swe Swedish

- o syr Syriac
- tgl Tagalog
- tha Thai (Laotian)
- tur Turkish
- o ukr Ukrainian
- o vie Vietnamese
- yid Yiddish
- dPersonnel.21 EMS Personnel's Agency ID Number:

The local agency ID number for the personnel.

• dPersonnel.22 - EMS Personnel's State of Licensure:

The state of the certification/licensure ID number assigned to the personnel member.

• dPersonnel.23 - EMS Personnel's State's Licensure ID Number:

The state's licensure/certification ID number for the personnel.

• dPersonnel.24 - EMS Personnel's State EMS Certification Licensure Level:

The personnel's state EMS certification level.

- o 9925001 Advanced Emergency Medical Technician (AEMT)
- o 9925002 Emergency Medical Technician Intermediate
- 9925003 Emergency Medical Responder (EMR)
- 9925005 Emergency Medical Technician (EMT)
- o 9925007 Paramedic
- 9925023 Other Healthcare Professional
- 9925025 Other Non-Healthcare Professional
- o 9925027 Physician
- o 9925029 Respiratory Therapist
- o 9925031 Student
- o 9925033 Critical Care Paramedic
- 9925035 Community Paramedicine
- 9925037 Nurse Practitioner
- o 9925039 Physician Assistant
- 9925041 Licensed Practical Nurse (LPN)
- o 9925043 Registered Nurse
- dPersonnel.25 EMS Personnel's State EMS Current Certification Date:

The date of the personnel's current EMS certification/licensure.

• dPersonnel.26 - EMS Personnel's Initial State's Licensure Issue Date:

The date on which the EMS personnel's state's EMS certification/licensure was originally issued. This is the date of the first certification/licensure for the EMS level.

 dPersonnel.27 - EMS Personnel's Current State's Licensure Expiration Date:

The date on which the EMS personnel's (highest) state EMS certification/licensure expires.

• dPersonnel.28 - EMS Personnel's National Registry Number:

The National Registry number associated with the level of certification/licensure obtained through NREMT.

• dPersonnel.29 - EMS Personnel's National Registry Certification Level:

The level of the current National Registry of Emergency Medical Technicians (NREMT) certification.

- 1529001 Advanced Emergency Medical Technician (AEMT)
- o 1529002 Emergency Medical Technician Intermediate
- 1529003 Emergency Medical Responder (EMR)
- o 1529005 Emergency Medical Technician (EMT)
- o 1529007 Paramedic

dPersonnel.30 - EMS Personnel's Current National Registry Expiration Date:

The date on which the EMS Personnel's National Registry of EMTs certification/licensure expires.

• dPersonnel.31 - EMS Personnel's Employment Status:

The personnel's primary employment status for this agency.

- o 1531001 Full Time Paid Employee
- o 1531003 Part Time Paid Employee
- 1531005 Volunteer
- 1531007 Neither an Employee Nor a Volunteer

• dPersonnel.32 - EMS Personnel's Employment Status Date:

The personnel's employment status date.

• dPersonnel.33 - EMS Personnel's Hire Date:

The date the employee was hired by the EMS agency for this current job.

• dPersonnel.34 - EMS Personnel's Primary EMS Job Role:

The individuals primary/main EMS role at the EMS agency. This is the function which is performed the majority of the time for the EMS personnel.

- o 1534001 Administrator/Manager
- o 1534003 Driver/Pilot
- 1534005 Educator/Preceptor
- o 1534007 Fire Suppression
- o 1534009 First-Line Supervisor
- o 1534011 Law Enforcement
- o 1534013 Other
- 1534015 Patient Care Provider
- o 1534017 Rescue

dPersonnel.35 - EMS Personnel's Other Job Responsibilities:

The EMS personnel's other job responsibilities at the agency beyond their primary role documented in dPersonnel.34 (EMS Personnel's Primary EMS Job Role).

- 1534001 Administrator/Manager
- o 1534003 Driver/Pilot
- 1534005 Educator/Preceptor
- o 1534007 Fire Suppression
- 1534009 First-Line Supervisor
- o 1534011 Law Enforcement
- o 1534013 Other
- 1534015 Patient Care Provider

- o 1534017 Rescue
- dPersonnel.36 EMS Personnel's Total Length of Service in Years:

The personnel's total length of EMS service at any level (years).

- dPersonnel.37 EMS Personnel's Date Length of Service Documented: The date which the length of EMS service was documented.
- dPersonnel.38 EMS Personnel's Practice Level:

The EMS certification level at which the individual is providing patient care services for the EMS agency.

- 9925001 Advanced Emergency Medical Technician (AEMT)
- o 9925002 Emergency Medical Technician Intermediate
- 9925003 Emergency Medical Responder (EMR)
- 9925005 Emergency Medical Technician (EMT)
- o 9925007 Paramedic
- o 9925023 Other Healthcare Professional
- 9925025 Other Non-Healthcare Professional
- o 9925027 Physician
- o 9925029 Respiratory Therapist
- o 9925031 Student
- 9925033 Critical Care Paramedic
- 9925035 Community Paramedicine
- o 9925037 Nurse Practitioner
- o 9925039 Physician Assistant
- 9925041 Licensed Practical Nurse (LPN)
- 9925043 Registered Nurse
- dPersonnel.39 Date of Personnel's Certification or Licensure for Agency: The date that the Certification/Licensure was achieved for the local EMS agency.

dDevice Section

dDevice.01 - Medical Device Serial Number:

The unique manufacturer's serial number associated with a medical device.

dDevice.02 - Medical Device Name or ID:

The local number or configurable Name/ID of the medical device.

• dDevice.03 - Medical Device Type:

The type of medical device.

- o 1603001 Capnography-Numeric
- 1603003 Capnography-Waveform
- 1603005 Chemistry Measurement-Blood or Serum
- o 1603007 Chemistry Measurement-Glucometer
- 1603009 Chemistry Measurement-Urine
- 1603011 CPR-External Device
- 1603013 Defibrillator-Automated
- 1603015 Defibrillator-Manual
- 1603017 ECG-12 Lead or Greater
- o 1603019 ECG-Less than 12 Lead (Cardiac Monitor)
- 1603021 Medication Infusion Pump
- o 1603023 Other

- 1603025 Oximetry-Carbon Monoxide
- 1603027 Oximetry-Oxygen
- 1603029 Pressure Monitors-Invasive
- o 1603031 Pressure Monitors-Non-Invasive
- o 1603033 Respirator (BLS)
- 1603035 Ventilator (ALS)
- 1603037 Ventilator Assistance-BiPAP

dDevice.04 - Medical Device Manufacturer:

The manufacturer of the medical device.

• dDevice.05 - Medical Device Model Number:

The specific manufacturer's model number associated with medical device.

dDevice.06 - Medical Device Purchase Date:

The date the device was purchased or placed in service by the EMS agency.

dFacility Section

*dFacility.01 - Type of Facility:

The type of facility (healthcare or other) that the EMS agency transports patients to or from.

- 1701001 Assisted Living Facility
- o 1701003 Clinic
- 1701005 Hospital
- o 1701007 Nursing Home
- o 1701009 Other
- o 1701011 Urgent Care
- 1701013 Physical Rehabilitation Facility
- 1701015 Mental Health Facility
- o 1701017 Dialysis Center
- 1701019 Diagnostic Services
- o 1701021 Freestanding Emergency Department
- 1701023 Morgue/Mortuary
- 1701025 Police/Jail
- o 1701027 Other EMS Responder (air)
- 1701029 Other EMS Responder (ground)
- 1701031 Other Recurring Care Center
- o 1701033 Drug and/or Alcohol Rehabilitation Facility
- 1701035 Skilled Nursing Facility

• dFacility.02 - Facility Name:

The name of the facility.

• dFacility.03 - Facility Location Code:

The code of the facility as assigned by the state or the EMS agency.

*dFacility.04 - Hospital Designations:

The designation(s) associated with the hospital (e.g., Trauma, STEMI, Peds, etc.)

- o 9908001 Behavioral Health
- o 9908003 Burn Center
- 9908005 Critical Access Hospital

- 9908007 Hospital (General)
- o 9908009 Neonatal Center
- o 9908011 Pediatric Center
- o 9908019 Rehab Center
- 9908021 Trauma Center Level 1
- o 9908023 Trauma Center Level 2
- 9908025 Trauma Center Level 3
- o 9908027 Trauma Center Level 4
- 9908029 Trauma Center Level 5
- 9908031 Cardiac-STEMI/PCI Capable
- 9908033 Cardiac-STEMI/PCI Capable (24/7)
- o 9908035 Cardiac-STEMI/Non-PCI Capable
- o 9908037 Stroke-Acute Stroke Ready Hospital (ASRH)
- 9908039 Stroke-Primary Stroke Center (PSC)
- 9908041 Stroke-Thrombectomy-Capable Stroke Center (TSC)
- o 9908043 Stroke-Comprehensive Stroke Center (CSC)
- o 9908045 Cancer Center
- 9908047 Labor and Delivery
- dFacility.05 Facility National Provider Identifier (NPI):

The facility National Provider Identifier associated with National Provider System (NPS).

dFacility.06 - Facility Room, Suite, or Apartment:

The number of the specific room, suite, or apartment of the facility.

• dFacility.07 - Facility Street Address:

The address where the facility is located.

dFacility.08 - Facility City:

The city where the facility is located (physical address).

dFacility.09 - Facility State:

The state where the facility is located.

dFacility.10 - Facility ZIP Code:

The ZIP code where the facility is located.

• dFacility.11 - Facility County:

The county where the facility is located.

• dFacility.12 - Facility Country:

The country where the facility is located.

- o CA Canada
- MX Mexico
- US United States
- dFacility.13 Facility GPS Location:

The facility GPS Coordinates.

• dFacility.14 - Facility US National Grid Coordinates:

The facility's US National Grid coordinates.

dFacility.15 - Facility Phone Number:

The facility's phone number.