

Hawaii Emergency Medical Services Information System

Data Dictionary

Prepared by:



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Hawaii Emergency Medical Services Information System

Each data element is presented using the following template. The Consensus Panel considered it important to provide sufficient detail about each data element to justify its inclusion in the uniform data set, as well as to assist agencies, which seek to implement a data collection system. When a data element requires specific categories, these are listed in the data item specification ("Data Items"). The Panel recognizes that the lists, which are included in this dictionary are imperfect, but definitions of these lists have been debated for many years without resolution.

Definition of the Priority items:

Mandatory: These are elements that are required on all incidents. Failure to provide the mandatory element will flag the record of the incident to NOT be accepted into the registry. Correction of the deficiency is required to properly submit the incident.

Essential: These are elements that are to be completed on incidents where they pertain as identified in the Business Rules section for the particular element. If they are missing, the record will be accepted by the registry, but will be flagged as non-compliant.

Desirable: These are elements that are strongly requested but may not be possible to collect on all incidents.

#

Name of Data Element:	Name
Priority:	Mandatory or Essential or Desirable
Definition:	Short definition of data element
Code:	A coded description of the data element values or attributes
Field Length:	Length of data element
Field Starting and Ending Position:	Specifics position of data element in ASCII fixed length file
Data Items:	Defined data elements - alternative descriptions of the data element values or attributes.

Content: Detailed discussion of definition and content.

Discussion and Justification: Provide further details and justify the data element.

Business Rules: Provide information on the requirements for and to a data element to enforce data integrity and submission compliance.

Technical Comments: Additional information which may be of use to individuals setting up a data collection system.

Hawaii Emergency Medical Services Information System Element Dictionary

1. Lithocode (ARF Number)

Name of Data Element:	Lithocode (ARF Number)
Priority:	Mandatory
Definition:	Unique number for each incident in a state
Code:	Numeric entry
NHTSA 2:	
Field Length:	8
Field Starting and Ending Position:	1 - 8

Content: Unique 8 digit number generated by WebCUR™ upon submission of the patient care report. This number is equivalent to the Hawaii Ambulance Report Form (ARF) number.

Discussion and Justification: Unique numbers for a patient care record. This number is unique within the state. Provides a specific key to a specific record. This record number will fulfill all the requirements for linkage, which have been described under incident number.

Business Rules: *All records submitted must have a unique lithocode in the series assigned to the software vendor.* Records with duplicate or missing lithocodes will be rejected and marked as non-compliant by the system.

Technical Comments: This is the central and most important number in the prehospital portion of the EMS information system. Every incident must have a Lithocode number even if there is no patient. An incident will have multiple Lithocodes if there are multiple patients or multiple responders to single patients.

2. Patient Care Report Number

Name of Data Element:	Patient Care Report Number
Priority:	Mandatory
Definition:	Unique number for each patient at an incident
Code:	Alpha/numeric entry.
NHTSA 2:	E02_02
Field Length:	7
Field Starting and Ending Position:	

Content: This element consists of the unique 7-position number assigned by a local jurisdiction to each EMS related incident. Zero fill, left justified if number is small (e.g. 0000123).

Discussion and Justification: It should be unique within an agency, and then by combining it with a unique agency number, it will be possible to construct another unique identifying number for the incident.

This number is valuable for linking EMS data files with other files related to the incident, such as emergency department and inpatient hospital files, if those medical files also contain this number. Accurate numbering within all available files may be facilitated by technologies such as bar codes.

Probabilistic linkage methodology is of great value when linking files that do not have numeric fields such as incident number in common. However, linkage is greatly facilitated by the presence of such a number in each of the files to be linked.

Business Rules: *All records submitted must have an agency defined Incident Number for local cross-reference.* Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. Duplicates of this field are ignored.

Technical Comments: In some cases incident number, Lithocode number, or PSAP number may be the same.

3. Affiliate

Name of Data Element:	Affiliate
Priority:	Mandatory
Definition:	Number that identifies the agency responding to an incident.
Code:	Numeric entry.
NHTSA 2:	E02_01
Field Length:	5
Field Starting and Ending Position:	
Data Items: Refer to Appendix A (EMS Agency List) for Agency Number	

Content: This element consists of a State assigned Island number followed by the State assigned agency number.

Discussion and Justification: Identifies specific island and agency on that island. Can be used to construct reports, which are specific to an island or agency.

Business Rules: *All records submitted must have an Affiliate number entered.* The Agency number must be from the approved agency list as published by the Hawaii Department of Health, Division of EMS. Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: This is a combination of the agency's island location and agency number assigned by the Hawaii Department of Health, Division of EMS. The first 2 numbers are the island number as assigned by the Hawaii Department of Health, Division of EMS with a left justified zero to increase the size to 2 (Oahu = 01). The last three digit is the unique agency number for that island (Honolulu City & County = 001).

4. Station

Name of Data Element:	Station
Priority:	Optional
Definition:	The station name representing the geographic location of the vehicle at the time of dispatch
Code:	Alpha/numeric entry.
NHTSA 2:	E02_13, E02_14, E02_15
Field Length:	30
Field Starting and Ending Position:	

Content: This element consists of an optional list of stations or area identifiers assigned by a local jurisdiction.

Discussion and Justification: Important for grouping or comparing data by dispatch location which also allows data to be sorted by geographic response areas in many agencies. Provides information on overall response patterns and times for agency configuration and evaluation.

Business Rules: *All records submitted may have a Station element submitted.*

Technical Comments: This element may remain blank if no stations are entered into the agency's support lists. Please refer to the EMStat™ User manual for adding, editing and deleting Stations in EMStat™.

5. Unit Type

Name of Data Element:	Unit Type
Priority:	Mandatory
Definition:	The highest level of staffing or configuration the unit was at initial time of call
Code:	Alpha entry.
NHTSA 2:	D06_04
Field Length:	
Field Starting and Ending Position:	

Content: The personnel certification/licensure level and equipment configuration of the vehicle at the time the unit responded on the call. This element displays level of service or staffing of the responding unit if needed and allows the user to change if desired.

Discussion and Justification: Allows data to be grouped or compared by Vehicle/Crew Configuration. Allows data to be sorted based on an agency's Vehicle/Crew Configuration

Business Rules: *All records submitted must have a unit type submitted.*

Technical Comments: The unit type may be preset during unit setup. Assists with on the fly screen setup of EMStat™ by displaying appropriate elements and screens based on the unit type. Unit type may be changed from the default setting by the end user at anytime. Please refer to the EMStat™ User manual for adding, editing and deleting unit type.

6. Unit Name / Number

Name of Data Element:	Unit Name / Number
Priority:	Mandatory
Definition:	Unique number for each unit in agency specific fleet.
Code:	Alpha/numeric entry.
NHTSA 2:	E02_03, E02_11, E02_12
Field Length:	2
Field Starting and Ending Position:	

Content: This element consists of the unique 2 -position number assigned by a local jurisdiction to each vehicle/unit in their fleet. Zero fill, left justified if number is small (e.g. 03).

Discussion and Justification: It should be unique within an agency, and then unique within the State by combining it with the unique Affiliate number. Particularly valuable for local reporting, allows the generation of reports for a specific vehicle in a fleet. The unique unit number allows for future software product expansion for vehicle GPS, maintenance and maintenance systems.

Probabilistic linkage methodology is of great value when linking files that do not have numeric fields such as incident number in common. However, linkage is greatly facilitated by the presence of such a number in each of the files to be linked.

Business Rules: All records submitted must have a unit number for local cross-reference. Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: The 2-digit Unit Number, are agency defined to identify individual vehicles in the fleet. The Unit Number should stay permanently assigned to the vehicle until retirement of that vehicle. Please refer to the EMStat™ User manual for adding, editing and deleting unit type.

7. Date Incident Reported

Name of Data Element:	Date Incident Reported
Priority:	Mandatory
Definition:	Date the call is first received by a public safety answering point (PSAP) or other designated entity.
Code:	Date format should be coded as MMDDYYYY.
NHTSA 2:	E05_02
Field Length:	8
Field Starting and Ending Position:	

Content: Format permits sorting across multiple years, and is recommended for data export purposes. Century digits are mandatory.

Discussion and Justification: Used in conjunction with "Time Incident Reported" to assess the duration between onset of a medical emergency and receipt of a request for EMS response, as well as to assess the duration of time required mobilizing the response and providing the patient definitive care. The data element is also used to help EMS planners allocate resources by day of week and season of year.

Business Rules: All records submitted must have a Date Incident Reported entered. Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format MMDDYYYY is recommended as part of FIPS standard. For month and day, use leading zeros if necessary to pad the fields to 2 characters each.

8. Incident / Patient Disposition

Name of Data Element:	Incident / Patient Disposition										
Priority:	Mandatory										
Definition:	End result of EMS response.										
Code:	Numeric entry										
NHTSA 2:	E20_10										
Field Length:	2										
Field Starting and Ending Position:											
<p>Data Items:</p> <table> <tr> <td>Treated, transported by EMS</td> <td>No Patient Identified</td> </tr> <tr> <td>Care transferred</td> <td>Treated and Released</td> </tr> <tr> <td>Cancelled</td> <td>No treatment required</td> </tr> <tr> <td>Patient refused care, AMA</td> <td>Dead at scene</td> </tr> <tr> <td>Treated, transported by private vehicle</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix E</p>		Treated, transported by EMS	No Patient Identified	Care transferred	Treated and Released	Cancelled	No treatment required	Patient refused care, AMA	Dead at scene	Treated, transported by private vehicle	
Treated, transported by EMS	No Patient Identified										
Care transferred	Treated and Released										
Cancelled	No treatment required										
Patient refused care, AMA	Dead at scene										
Treated, transported by private vehicle											

Content: This two (2)-digit data element reflects the final disposition of EMS responses.

Discussion and Justification: Allows reports to be generated according to the final disposition of EMS responses. This will provide information about the reasons for which EMS is notified, correlated with the ultimate incident disposition. For instance, it will be of value to know that in certain regions, EMS is frequently activated to see patients who require no treatment or transport. Reports generated from this data element may be of use in coordinating the dispatch and responder functions as well.

Business Rules: All records submitted must have an Incident/Patient Disposition entered. Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. **Only one (1) Incident/Patient Disposition from the above data item list can be submitted.** This field is important in that it dictates further required fields based on the selections. For example a 'Treated, Transported ...' disposition will require more completed fields submitted than a disposition of 'Cancelled'.

Technical Comments:*Treated and transported by EMS*

This code means that the EMS responder providing the data record treated and transported the patient. Transport may be to any valid destination, as defined for the destination data element. If the EMS responder transports a patient to a rendezvous point with another EMS responder (for instance, a

ground crew rendezvous with a helicopter based agency), this is the correct code for this data element.

Care transferred

This code means that the EMS responder provided treatment at the scene but the patient was transferred into the care of another service. The EMS responder did not provide transport in this instance. For example, if a BLS provider is at a scene and treats a patient, but a separate ALS responder arrives and takes over, the BLS record would indicate this code. If an EMS responder treats a patient who is then transported by a separate police or fire vehicle, this is the correct code for the EMS responder record.

Cancelled

This code means that the EMS response was cancelled enroute or on scene and no patient contact occurred.

Patient refused care, Against Medical Advice (AMA)

Patient was at scene and refused care, whether injured or not. If the EMS responder knows that there is an injury, but the patient refuses care and is transported by friends or acquaintances, this is still the correct code for this data element.

Treated, transported by private vehicle

This code means that the EMS responder provided treatment, but the patient was transported to his or her destination by a private vehicle. This includes instances in which the patient transports himself via private automobile, if the EMS responder understands that the patient is going to seek further medical care, such as at a private doctor's office or the local emergency department.

Treated and released

This code means that the EMS responder provided treatment, and the patient required no further emergency care. This is distinct from the instance in which the patient is known to be in need of further care, but is transported by him self or others to the facility providing further care.

No treatment required

This code means that the EMS responder evaluated the patient, and no treatment was required. If the patient refused evaluation, or if the EMS responder did not evaluate a specific patient, this is not the correct code for this data element.

Dead at scene

This code means that the patient was pronounced dead at the scene, whether or not treatment was undertaken. If a patient is given CPR at the scene and transported to the hospital while undergoing CPR, then this is not the correct code. If a patient is given CPR and is then pronounced dead at the scene, this is the correct code.

No patient identified

This code is used if a unit arrives on scene, but the responder can find no patient or there is no patient contact.

9. Patient's First Name

Name of Data Element:	Patient's First Name
Priority:	Desirable
Definition:	Patient's First Name.
Code:	Alpha/numeric entry
NHTSA 2:	E06_02, E06_03
Field Length:	30
Field Starting and Ending Position:	

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Desirable because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's First Name is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: If middle initial is collected then submit with one space between the first name and initial. Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

10. Patient's Last Name

Name of Data Element:	Patient's Last Name
Priority:	Desirable
Definition:	Patient's Last Name.
Code:	Alpha/numeric entry
NHTSA 2:	E06_01
Field Length:	30
Field Starting and Ending Position:	

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Essential because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's Last Name is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

11. Date of Birth

Name of Data Element:	Date of Birth
Priority:	Essential
Definition:	Patient's date of birth.
Code:	Date format should be coded as MMDDYYYY
NHTSA 2:	E06_16
Field Length:	8
Field Starting and Ending Position:	

Content: Format permits sorting across multiple years, and is recommended for data export purposes. Century digits are mandatory.

Discussion and Justification: Extremely valuable for probabilistic linkage and calculation of accurate age information. Provides much more discriminatory power in probabilistic linkage than the numeric age.

Business Rules: If Patient's DOB is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Format MMDDYYYY is recommended as part of FIPS standard. For month and day, use leading zeros if necessary to pad the fields to 2 characters each. Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

12. Age

Name of Data Element:	Age
Priority:	Essential
Definition:	Patient's age or best approximation
Code:	Alpha/numeric entry.
NHTSA 2:	E06_14, E06_15
Field Length:	4
Field Starting and Ending Position:	
<p>Data Items:</p> <p style="padding-left: 40px;">{3 digits for age in years}</p> <p style="padding-left: 40px;">999 Unknown</p> <p style="padding-left: 40px;">PLUS one of the following identifiers:</p> <p style="padding-left: 80px;">0 = Years</p> <p style="padding-left: 80px;">1 = Months</p> <p style="padding-left: 80px;">2 = Days</p>	

Content: Use leading zeros if necessary to pad the field to 4 positions. For patients over **1** year, specify **Y** (e.g. 6years = 006Y). For patients less than 1 year, specify **M** (e.g. 6 months = 006M). For patients less than 1 month, specify **D** (e.g. 6 days = 006D). For patients less than 1 day (24 hours), specify 001D. When the age is unknown, specify 999U.

Technical Comments: Age information permits linkage to other files and is useful for epidemiologists interested in patterns of emergency medical problem in different age groups.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treated, transported...", "Treated and ...", "Patient refused care..." must have a Patient's Age entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Discussion and Justification: Valuable in the absence of a date of birth. Age information permits linkage to other files, and is useful for epidemiologists interested in patterns of emergency medical problems in different age groups.

13. Gender

Name of Data Element:	Gender
Priority:	Essential
Definition:	Gender of patient.
Code:	Numeric entry.
NHTSA 2:	E06_11
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
01	Male
02	Female

Discussion and Justification: Valuable for linkage to other files, and permits reporting of epidemiological information by gender.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treated, transported... vehicle”, “Treated and ...”, “Patient refused care...” must have a Patient’s Gender entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: EMStat™ users must select the most appropriate gender choice based on the their judgment of the patient’s sex if it is not clearly identifiable. The choice of *Unknown* will be available in NHTSA 2.2 update.

99 *Unknown*

This code should be used only when the sex of the patient cannot be accurately determined after patient contact. If no patient was encountered then the appropriate number of spaces should be submitted.

14. Patient Street Address

Name of Data Element:	Patient Street Address
Priority:	Desirable
Definition:	Patient's street address.
Code:	Alpha/numeric entry
NHTSA 2:	E06_04
Field Length:	50
Field Starting and Ending Position:	

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Essential because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's Street Address is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

15. Patient's City of Residence

Name of Data Element:	Patient's City of Residence
Priority:	Desirable
Definition:	Patient' residence postal city (if applicable)
Code:	Alpha/numeric entry
NHTSA 2:	E06_05
Field Length:	30
Field Starting and Ending Position:	

Content: The appropriate number of spaces is used when there is no patient, such as when the responding team cannot find the patient, or when the responding team is on standby.

Discussion and Justification: Essential because of its value in probabilistic linkage, both as a linking variable as well as a confirmatory variable to determine appropriate linkage. It is recognized that this data element requires careful protection from misuse, but it is more appropriate to regulate appropriate use of this field rather than to prevent its collection.

Business Rules: If Patient's City of Residence is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

16. Patient's State of Residence

Name of Data Element:	Patient's State of Residence
Priority:	Desirable
Definition:	State of patient's residence (if applicable)
Code:	Alphabetical entry
NHTSA 2:	E06_07
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
U.S. Post Office State Abbreviation	

Content: Code as two (2) -character fields using the U.S. Postal Service state abbreviation. Foreign country addresses will need to be entered by using the EMStat™ international address form making this field not necessary to be completed.

Discussion and Justification: Useful for determining the political entity responsible for potential public health interventions, payment for services, etc.

Business Rules: If Patient's State of Residence is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

17. Zip Code of Patient's Residence

Name of Data Element:	Zip Code of Patient's Residence
Priority:	Essential
Definition:	Zip Code of patient's residence
Code:	Numeric entry
NHTSA 2:	E06_08
Field Length:	5
Field Starting and Ending Position:	
Data Items:	
U.S. Postal Service Zip Code listing. 99999 Unknown	

Content: Code as five (5)-digit field using the approved U.S. Postal Service Zip Code listing. Foreign country addresses will need to be entered by using the EMStat™ international address form making this field not necessary to be completed.

Discussion and Justification: Useful for determining the political entity responsible for potential public health interventions, payment for services, etc. From Zip Code, county could be derived in software.

Business Rules: If Patient's Zip Code is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

99999 Unknown

This code should only be used if submitting data elements #29-33 and the patient's zip code is unknown. Do not send this code if no patient encountered or not submitting above listed data elements. In such cases submit the appropriate number of spaces.

18. Social Security Number

Name of Data Element:	Social Security Number
Priority:	Desirable
Definition:	Patient Social Security number
Code:	Numeric entry.
NHTSA 2:	E06_10
Field Length:	9
Field Starting and Ending Position:	262 - 270
Data Items:	
{ 9 digit SSN }	
888888888	Not Applicable
999999999	Unknown

Content: Code as 9-digit field.

Discussion and Justification: Will provide valuable linkage data element. However, this field is very difficult for field responders to obtain.

Business Rules: If Patient's Social Security Number is not reported, this field must be submitted with the appropriate number of spaces.

Technical Comments: May be particularly valuable in jurisdictions where driver licenses or other forms of identification have bar coded Social Security numbers. Submission of this data requires HIPAA compliance awareness on part of the agency and the software.

999999999 *Unknown*

This code should only be used is submitting data elements #29-34 and the patient's social security number is unknown. Do not send this code if no patient encountered or not submitting above listed data elements. In such cases submit the appropriate number of spaces.

19. Race / Ethnicity

Name of Data Element:	Race / Ethnicity														
Priority:	Desirable														
Definition:	Patient's ethnic origin.														
Code:	Numeric entry.														
NHTSA 2:	E06_12, E06_13														
Field Length:	2														
Field Starting and Ending Position:	285 - 286														
<p>Data Items:</p> <table> <tr> <td>Black or African American</td> <td>Korean</td> </tr> <tr> <td>Caucasian</td> <td>American Indian/Alaska Native</td> </tr> <tr> <td>Chinese</td> <td>Other Pacific Islander</td> </tr> <tr> <td>Filipino</td> <td>Other Asian</td> </tr> <tr> <td>Hispanic or Latino</td> <td>Other Race</td> </tr> <tr> <td>Hawaiian</td> <td>Unknown</td> </tr> <tr> <td>Japanese</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix F</p>		Black or African American	Korean	Caucasian	American Indian/Alaska Native	Chinese	Other Pacific Islander	Filipino	Other Asian	Hispanic or Latino	Other Race	Hawaiian	Unknown	Japanese	
Black or African American	Korean														
Caucasian	American Indian/Alaska Native														
Chinese	Other Pacific Islander														
Filipino	Other Asian														
Hispanic or Latino	Other Race														
Hawaiian	Unknown														
Japanese															

Discussion and Justification: Useful for epidemiological studies, and of importance to data systems in order to access certain types of Federal or state funds which are directed to specific ethnic groups.

Business Rules: Only one (1) Race / Ethnicity from the above data item list can be submitted. If the data element is not reported or no patient contact was made then this field must be submitted with the appropriate number of spaces.

Technical Comments:*77 Other*

This code should be used when race can be determined but is not one of the races specified in the list.

99 Unknown

This code should be used when patient's race cannot be accurately determined due to decomposition, burns, etc. It is not to be used if no patient contact was made.

20. Patient's Phone Number

Name of Data Element:	Patient's Phone Number
Priority:	Essential
Definition:	Patient's phone number
Code:	Numeric entry.
NHTSA 2:	E06_17
Field Length:	10
Field Starting and Ending Position:	
{ 10 digit Phone number } 9999999999 if Unknown	

Discussion and Justification: Valuable for billing and quality assurance. Foreign country addresses will need to be entered by using the EMStat™ international address form making this field not necessary to be completed.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treated, transported... vehicle", "Treated and ...", "Patient refused care..." should have a Patient's Phone number entered.*

Technical Comments:

9999999999 *Unknown*

This code should be used only when the phone number of the patient cannot be accurately determined after patient contact.

21. Driver License / Issuing State

Name of Data Element:	Driver License / Issuing State
Priority:	Optional
Definition:	Patient's driver license and issuing state
Code:	Numeric entry.
NHTSA 2:	E06_18, E06_19
Field Length:	2
Field Starting and Ending Position:	

Discussion and Justification: Valuable for linkage to other files, billing and quality assurance.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treated, transported... vehicle", "Treated and ...", "Patient refused care..." may have a Driver License/Issuing State entered. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments:

22. Dispatch Type

Name of Data Element:	Dispatch Type
Priority:	Mandatory
Definition:	Type of service requested.
Code:	Numeric entry
NHTSA 2:	E02_04
Table and Database:	Tripdata - Tripsht.mdb
Field name	DispatchType, DispatchTypeUnique
Field Length:	2
Field Starting and Ending Position:	79 - 80
<p>Data Items:</p> <ul style="list-style-type: none"> 911 Response Intercept/EMS Rendezvous Support Services Scheduled Transfer Unscheduled Transfer <p style="text-align: center;">Refer to Appendix G</p>	

Content: This is the type of service or category of service requested of the EMS agency responding for this specific EMS incident.

Discussion and Justification: Used to categorize the types of service, which are required, and allows planning of EMS resource allocation.

Business Rules: *All records submitted must have a Dispatch Type entered.* Records with missing or an invalid Dispatch Type will be rejected and marked as non-compliant by the system. **Only one (1) Dispatch Type** from the above data item list can be submitted.

Technical Comments: Dispatch type is important for epidemiologists as well as EMS planners deciding where to allocate EMS resources. Provides descriptive data on EMS call volume and service provided.

911 Response

The incident request either originated from a Public Safety Answering Point (PSAP) or a “silent alarm” but would be considered a 911 response (public notifies in station crew of MVA in front of station).

Intercept / EMS Rendezvous

The incident request at time of dispatch was to provide a support service to another agency and if the patient condition warranted to assist in the transport of the patient. This would be utilized for 911 Responses as well as non-911 request for a similar service. Examples of this would be an ALS chase vehicle that is simultaneously dispatched or requested later to meet up either at the scene or enroute with a BLS unit.

Support Services

The incident request is for a non-emergent response or for a response not covered in other descriptions. The origin of the dispatch does not dictate type, so PSAP dispatch for a non-emergent sporting standby would be a Support Services type. Other examples would be for a standby at a sporting event, community service for disabled individuals, and so on.

Scheduled Transfer

The incident request is a scheduled transfer of a patient from one facility to another facility. However, this code is chosen when the transfer is scheduled in advance. Examples include; a planned morning transfer of a patient from one hospital to another or non-ambulatory transport of a patient from home to physician's office.

Unscheduled Transfer

The incident request is an unscheduled transfer of a patient from one facility to another facility unexpectedly or emergently. This code should not be used for planned or listed transfers, which are coded separately. The second unit involved in the transfer of a patient from one EMS responder to another responder during an unscheduled transfer, which is also coded as an Intercept/EMS Rendezvous, should not use this code.

23. Primary Role of Unit

Name of Data Element:	Primary Role of Unit
Priority:	Mandatory
Definition:	Primary role of the vehicle use during the incident.
Code:	Numeric entry
NHTSA 2:	E02_05
Field Length:	2
Field Starting and Ending Position:	17 - 18
<p>Data Items:</p> <p>Transport Non-Transport Supervisor</p> <p style="text-align: center;">Refer to appendix H</p>	

Content: This is a list of the general categories that should match the primary role of this vehicle during this incident.

Discussion and Justification: The primary role of the EMS service, which was requested for this specific EMS incident. Assists in differentiating the roles of several vehicles that respond to the same incident.

Business Rules: *All records submitted must have a Primary Role entered.* Records with missing or an invalid Primary Role will be rejected and marked as non-compliant by the system. **Only one (1) Primary Role** from the above data item list can be submitted.

Technical Comments: Allows EMS data at the national level to be sorted by the Role of the responder. Provides descriptive data on EMS call volume and service provided.

Transport

Refers to direct response to the scene and the role of the unit was for transporting the patient. Does not matter if the incident disposition or outcome did not involve a transport, just that the unit's role was to transport a patient.

Non-Transport

Refers to direct response to the scene or rendezvous where primary care is taken over, but transport is by another EMS entity. Does not matter what the incident disposition or outcome was.

Supervisor/Assist unit

Refers to direct response to the scene by the unit as a supervisor or provide other assistance, but did not assume primary care.

24. Patient's Physician

Name of Data Element:	Patient's Physician
Priority:	Optional
Definition:	Free form to list the patient's primary physician.
Code:	Alpha entry
NHTSA 2:	E12_04 to E12_06
Field Length:	30
Field Starting and Ending Position:	

Content: Select the patients Family Physician from the drop down pick list or type the name directly in the box.

Discussion and Justification: Provides additional information for billing services.

Business Rules: Only available when a Response Outcome involves patient contact.

Technical Comments: Please refer to the [Tools – Common Support List – Patient Physician](#) section of EMStat™ 4 user manual for adding, editing and deleting Patient Physicians in EMStat. Patient Physicians can be added directly into this box, which will save and print, but will not be saved in the common support list.

25. Patient Number

Name of Data Element:	Patient Number
Priority:	Optional
Definition:	Patient's medical record or billing number.
Code:	Numeric entry
NHTSA 2:	E12_02, E12_03
Field Length:	30
Field Starting and Ending Position:	

Content: Allows entry of an alpha/numeric reference number for medical information reference for billing or quality assurance

Discussion and Justification: Enter the *Patient Number* in the text box provided. If the patient does not have a number simply leave blank. This number is usually generated by the Emergency Department or Billing Department.

Business Rules: Only available when a Response Outcome involves patient contact.

Technical Comments:

26. Weight

Name of Data Element:	Weight
Priority:	Optional
Definition:	Patient's approximated weight in kilograms
Code:	Numeric entry
NHTSA 2:	E16_01
Field Length:	3
Field Starting and Ending Position:	

Content: A numeric entry of the patient's approximated weight in kilograms.

Discussion and Justification: This field assists with the calculation of weight appropriate medications and provides additional supporting information for billing purposes.

Business Rules: Only available when a Response Outcome involves patient contact.

Technical Comments: Enter the patients weight in Kilograms in the text box provided. The user can select on the Kilogram Calculator to convert the patients pounds to kilograms. Enter the patient's weight in pounds in the text box provided. Select the Ok button to have the calculator display the weight in *Kilograms* or select the Cancel button to exit this window.

27. Guardian Information

Name of Data Element:	Guardian Information
Priority:	Optional
Definition:	Guardian demographic information
Code:	Alpha/Numeric entry
NHTSA 2:	E07_18 to E07_26
Field Length:	
Field Starting and Ending Position:	
Sub fields First Name Last Name Date of Birth Gender Social Security Number Address, City, State, Postal Code Phone Number	

Content: Collects and displays demographic information for a guardian if required

Discussion and Justification: Guardian information should be collected for medical-legal and billing use on appropriate patients.

Business Rules: Only available when a Response Outcome involves patient contact.

Technical Comments: Select the **Guardian** button to enter the patient's guardian information. Enter the guardians **First Name**, **Last Name**, **Date of Birth**, **Sex**, **Social Security Number**, **Street Address**, **City**, **State**, **Zip Code** and **Phone Number** in the text boxes provided. Select the **Apply** button to save the information. Select the **Remove** button after the information has been saved to delete the information in this box. Select the **Cancel** button to exit this window.

28. Public Safety Answering Point (PSAP) Incident Number (Dispatch Card Number)

Name of Data Element:	Public Safety Answering Point (PSAP) Incident Number (Dispatch Card Number)
Priority:	Essential
Definition:	Unique number for each incident reported to dispatch.
Code:	Alpha/numeric entry.
NHTSA 2:	E22_03 to E22_05
Field Length:	15
Field Starting and Ending Position:	

Content: This element consists of the unique 15-position number assigned by a local jurisdiction Dispatch Center to each EMS related incident. Zero fill, left justified if number is small (e.g. 0000123).

Discussion and Justification: The number should be unique within a Dispatch Center for each incident handled.

This number is valuable for linking EMS data files with other files related to the incident, such as fire, police, emergency department and inpatient hospital files, if those medical files also contain this number. Accurate numbering within all available files may be facilitated by technologies such as bar codes.

Probabilistic linkage methodology is of great value when linking files that do not have numeric fields such as incident number in common. However, linkage is greatly facilitated by the presence of such a number in each of the files to be linked.

Business Rules: *All records submitted should have a Dispatch Center defined PSAP Incident Number for local cross-reference.* Duplicates of this field are ignored.

Technical Comments: This field may be pre-populated with the PSAP incident number from a CAD to EMStat™ interface.

29. Crewmember One Certification Type

Name of Data Element:	Crewmember One Certification Type
Priority:	Mandatory
Definition:	Personnel certification / license level of crew member
Code:	Numeric entry.
NHTSA 2:	E04_03
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
<p style="text-align: center;">EMT Basic MICT Other</p>	

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team and the person responsible for completing the patient care report. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle. Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: *All records submitted must have a Crewmember One Certification Type position entered.* Failure to supply the Crewmember One Certification position will flag the record as non-compliant. **Only the highest held Crewmember Certification Type** from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other', then a Hawaii Department of Health, Division of EMS or other Hawaii State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section).

Technical Comments: This element captures the highest certification of the responder as recognized by the Hawaii Department of Health, Division of EMS and the person responsible for completion of the patient care report. Certifications held but not listed must be marked as 'Other'.

30. Crewmember One Certification Number

Name of Data Element:	Crewmember One Certification Number
Priority:	Essential
Definition:	Personnel certification / license number for first crewmember.
Code:	Alpha/Numeric entry.
NHTSA 2:	E04_01
Field Length:	8
Field Starting and Ending Position:	

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a Hawaii Department of Health, Division of EMS or other Hawaii State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' than no certification number should be supplied. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the Hawaii Department of Health, Division of EMS or Department of Commerce and Consumer Affairs, Board of Medical Examiners.

Example: EMTB1679 or EMTP0801

31. Crewmember Two Certification Type

Name of Data Element:	Crewmember Two Certification Type
Priority:	Essential
Definition:	Personnel certification / license level of crewmember
Code:	Numeric entry.
NHTSA 2:	E04_03
Field Length:	2
Field Starting and Ending Position:	100 - 101
Data Items:	
<p style="text-align: center;">EMT Basic MICT Other</p>	

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle.

Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: Only the highest held Crewmember Certification Type from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other' or 'Specialty Care Provider', then an Hawaii Department of Health, Division of EMS or Department of Commerce and Consumer Affairs, Board of Medical Examiners (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section). If the crewmember position on the incident is not filled then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element captures the highest certification of the responder as recognized by the Hawaii Department of Health, Division of EMS. Certifications held but not listed must be marked as 'Other'.

32. Crewmember Two Certification Number

Name of Data Element:	Crewmember Two Certification Number
Priority:	Essential
Definition:	Personnel certification / license number for second crewmember.
Code:	Alpha/numeric entry.
NHTSA 2:	E04_01
Field Length:	8
Field Starting and Ending Position:	

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a Hawaii Department of Health, Division of EMS or other Hawaii State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' than no certification number should be supplied. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the Hawaii Department of Health, Division of EMS or Department of Commerce and Consumer Affairs, Board of Medical Examiners.

Example: EMTB1679 or EMTP0801

33. Crewmember Three Certification Type

Name of Data Element:	Crewmember Three Certification Type
Priority:	Desirable
Definition:	Personnel certification / license level of crewmember
Code:	Numeric entry
NHTSA 2:	E04_03
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
EMT Basic MICT Other	

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle.

Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: Only the highest held Crewmember Certification Type from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other' or 'Specialty Care Provider', then an Hawaii Department of Health, Division of EMS or Department of Commerce and Consumer Affairs, Board of Medical Examiners (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section). If the crewmember position on the incident is not filled then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element captures the highest certification of the responder as recognized by the Hawaii Department of Health, Division of EMS. Certifications held but not listed must be marked as 'Other'.

34. Crewmember Three Certification Number

Name of Data Element:	Crewmember Three Certification Number
Priority:	Desirable
Definition:	Personnel certification / license number for third crewmember.
Code:	Alpha/numeric entry.
NHTSA 2:	E04_01
Field Length:	8
Field Starting and Ending Position:	

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a Hawaii Department of Health, Division of EMS or other Hawaii State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' than no certification number should be supplied. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the Hawaii Department of Health, Division of EMS or Department of Commerce and Consumer Affairs, Board of Medical Examiners.

Example: EMTB1679 or EMTP0801

35. Crewmember Four Certification Type

Name of Data Element:	Crewmember Four Certification Type
Priority:	Desirable
Definition:	Personnel certification / license level of crewmember
Code:	Numeric entry
NHTSA 2:	E04_03
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
<p style="text-align: center;">EMT Basic MICT Other</p>	

Discussion and Justification: This data element permits assessing the highest level of care, which was available on the EMS responder team. By combining this information with vehicle type, there is maximum flexibility in describing the type of service, which was provided. For instance, any level of crewmember certification may be present with any type of vehicle.

Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

Business Rules: Only the highest held Crewmember Certification Type from the above data item list can be submitted. If the selected Crewmember Certification Type is not listed as 'Other' or 'Specialty Care Provider', then an Hawaii Department of Health, Division of EMS or Department of Commerce and Consumer Affairs, Board of Medical Examiners (RN/Physician) certification number is required for the corresponding Certification Number data element (refer to that data element's business rule section). If the crewmember position on the incident is not filled then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element captures the highest certification of the responder as recognized by the Hawaii Department of Health, Division of EMS. Certifications held but not listed must be marked as 'Other'.

36. Crewmember Four Certification Number

Name of Data Element:	Crewmember Four Certification Number
Priority:	Desirable
Definition:	Personnel certification / license number for fourth crewmember.
Code:	Numeric or alpha/numeric entry.
NHTSA 2:	E04_01
Field Length:	8
Field Starting and Ending Position:	

Discussion and Justification: Necessary to identify specific crewmembers participating in an EMS response. Useful for constructing experience reports, monitoring care rendered by specific providers, planning educational programs.

Business Rules: Submission of a Hawaii Department of Health, Division of EMS or other Hawaii State regulatory agency (RN/Physician) certification number is required for the corresponding Certification Number data element. If the corresponding Crewmember Certification Type is listed as 'Other' than no certification number should be supplied. Failure to supply a certification number when required will flag the record as non-compliant. If the crewmember position and associated crewmember certification type is not entered then the field must be left blank and filled with the appropriate number of spaces.

Technical Comments: This element is the unique certification number associated with the highest certification of the responder as assigned by the Hawaii Department of Health, Division of EMS or Department of Commerce and Consumer Affairs, Board of Medical Examiners.

Example: EMTB1679 or EMTP0801

37. Crew Chief – PCR writer

Name of Data Element:	Crew Chief – PCR writer
Priority:	Mandatory
Definition:	Crewmember position of the PCR writer.
Code:	Numeric entry.
NHTSA 2:	E04_02, E23_10
Field Length:	2
Field Starting and Ending Position:	

Discussion and Justification: Identifies the primary care provider and owner of the PCR in the WebCUR™ system.

Business Rules: *All records submitted must have a Crew Chief position entered.* Failure to supply the Crew Chief position will flag the record as incomplete

Technical Comments: The WebCUR™ and EMStat™ systems use this element to define security and ownership of the PCR entered. The person responsible for completion of the patient care report is the person who should be marked as the Crew Chief.

38. Driver

Name of Data Element:	Driver
Priority:	Mandatory
Definition:	Crewmember position of the driver
Code:	Numeric entry.
NHTSA 2:	E04_02
Field Length:	2
Field Starting and Ending Position:	

Discussion and Justification: Select the Crewmember from the drop down pick list that was the Driver on the incident. Attendant 2 will default to this box if a second attendant is entered on the PCR. If the provider is both the Crew Chief and Driver, select Attendant 1 as Driver.

Business Rules: *All records submitted must have a Driver crewmember position entered.* Failure to supply the Driver position will flag the record as incomplete

Technical Comments: This element captures crewmember information who was the driver of the unit for the majority of the incident or when the patient was being transported.

39. PSAP Time of Call (Time Incident Reported)

Name of Data Element:	PSAP Time of Call (Time Incident Reported)
Priority:	Essential
Definition:	Time call is first received by Public Safety Answering Point (PSAP) or other designated entity.
Code:	Time format should be coded as HHMM
NHTSA 2:	E05_02
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59. When available, the time should be the connect time to the PSAP.

Discussion and Justification: Provides the start point of the EMS response, and allows managers to assess the adequacy of EMS response, identify delays, and plan resources in a manner to provide expeditious EMS response.

Business Rules: If PSAP contact time is not reported, this field must be submitted or be filled with the same time as Dispatched.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

40. Dispatched (Time Unit Notified)

Name of Data Element:	Dispatched (Time Unit Notified)
Priority:	Mandatory
Definition:	Time response unit is notified by EMS dispatch
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_03
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits measurement of the actual responder response or delays. Assists planning of communication resources for individual responders, and allows identification of system delays following the dispatch component of the EMS system.

Business Rules: *All records submitted must have a Dispatched time entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

41. Enroute/Responding (Time Unit Responding)

Name of Data Element:	Enroute/Responding (Time Unit Responding)
Priority:	Essential
Definition:	Time that the response unit begins physical motion.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_05
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits measurement of delay between notification of EMS responder and the actual mobilization of the response unit. This data element refers to physical motion of the responding EMS vehicle, and does not refer to individual EMTs who may respond directly to the scene when notified by individual radio or telephone. For example, if an EMS incident is reported, one EMT may be at home or at work and be responsible to go to the station, which holds the ambulance. Another EMT may be notified and may drive in a private vehicle directly to the scene. The data element entered should be the time that the ambulance actually leaves the station, not the time at which the other EMT drives to the scene in the private vehicle.

Business Rules: *Records submitted with any Incident Disposition code except 'Cancelled' **must** have a Responding time entered.* Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

42. Arrive Scene (Time arrival at scene)

Name of Data Element:	Arrive Scene (Time arrival at scene)
Priority:	Essential
Definition:	Time EMS unit stops physical motion at scene (last place that the unit or vehicle stops prior to assessing the patient).
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_06
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits measurement of the time required for the response vehicle to go from the station to the scene. This data element refers to the physical motion of the responding EMS vehicle. If an individual EMT arrives at the scene by private vehicle that is NOT the value to be entered in this field. Otherwise, system delays in having an equipped vehicle at the scene will fail to be identified.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...', 'Care Transferred', 'Patient Refused', 'Treated, transported...vehicle', 'Treated and...', 'DOA', ' must have an Arrive Scene time entered. Required records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

43. Arrive Patient (Time of arrival at patient)

Name of Data Element:	Arrive Patient (Time of arrival at patient)
Priority:	Desirable
Definition:	Time response personnel establish direct contact with patient.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_07
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Desirable in certain situations in which there may be a significant delay between the time at which a response unit arrives at the scene and the time at which the personnel can access the patient. For example, if the EMTs are prevented because of fire or adverse conditions from approaching the patient, this time will be useful. Search and rescue operations will also note delays between arrival at the overall scene and the actual patient contact.

Business Rules: If Patient Contact time is not reported, this field must be submitted with the appropriate number of spaces or be filled with the same time as Arrive Scene (data element #24).

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

44. Depart Scene (Time Unit Left Scene)

Name of Data Element:	Depart Scene (Time Unit Left Scene)
Priority:	Essential
Definition:	Time when the response unit begins physical motion from scene.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_09
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits calculation of scene time by subtracting the time of arrival at scene from the time unit left scene.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...' must have a Depart Scene time entered.* Required records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

45. Arrive Destination (Time Arrival at Facility/Destination)

Name of Data Element:	Arrive Destination (Time Arrival at Facility/Destination)
Priority:	Essential
Definition:	Time when patient arrives at destination or transfer point.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_10
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits calculation of the time required to go from the scene to the destination of the response unit. If the patient is transferred from one EMS responder vehicle to another, then the time of arrival at destination for the first responder is the time of arrival or patient contact (or both) for the second agency.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...' must have an Arrive Destination time entered.* Required records with a missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

46. Available (Time back in service)

Name of Data Element:	Available (Time back in service)
Priority:	Mandatory
Definition:	Time response unit back in service and available for response.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_11
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Allows planning of EMS resources. Permits assessment of the delay between arrival at destination and availability of the response unit.

Business Rules: *All records submitted must have an Available time entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

47. In Quarters

Name of Data Element:	In Quarters
Priority:	Optional
Definition:	The date/time the responding unit was back in their service area.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_13
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Allows planning of EMS resources. The date/time the responding unit was back in their service area. In agencies who utilized Agency Status Management, home location means the service area as assigned through the agency status management protocol.

Business Rules: *All records submitted must have an Available time entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

48. Estimated Date of Injury or Onset of Symptoms

Name of Data Element:	Estimated Date of Injury or Onset of Symptoms
Priority:	Desired
Definition:	Estimated date of injury or onset of medical symptoms either by EMS personnel or reported to EMS personnel by patient or bystander.
Code:	Day format should be coded as MMDDYYYY.
NHTSA 2:	E05_01
Field Length:	8
Field Starting and Ending Position:	

Content: MM ranges from 01 to 12; DD ranges from 01 to 31; YYYY ranges from 1932 - present.

Discussion and Justification: Necessary to measure impact of injury time on treatment provided by EMS staff as well as receiving trauma care facility.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...', 'Care Transferred', 'Patient Refused', 'Treated, transported... vehicle', 'Treated and...', 'DOA', 'may have an Estimated Date of Injury or Onset of Symptoms entered. Required records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Format MMDDYYYY is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for MM and DD.

49. Estimated Time of Injury or Onset of Symptoms

Name of Data Element:	Estimated Time of Injury or Onset of Symptoms
Priority:	Desired
Definition:	Estimated time of injury or onset of medical symptoms either by EMS personnel or reported to EMS personnel by patient or bystander.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E05_01
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Necessary to measure impact of injury time on treatment provided by EMS staff as well as receiving trauma care facility.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...', 'Care Transferred', 'Patient Refused', 'Treated, transported... vehicle', 'Treated and...', 'DOA', 'may have an Estimated Time of Injury or Onset of Symptoms entered. Required records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

50. Mileage

Name of Data Element:	Mileage
Priority:	Desirable
Definition:	Odometer readings from response vehicle
Code:	Numeric entry.
NHTSA 2:	E02_16, E02_17, E02_18, E02_19
Field Length:	8
Field Starting and Ending Position:	
Data Entry:	
<p style="text-align: center;">Out Scene Dest In</p>	

Content: Contains the numeric reading up of the vehicle odometer for the four specific points of the incident. Out represents at time of dispatch, Scene represents upon arrival on scene, Dest represents arrival at destination or receiving facility, In represents ending of this incident..

Discussion and Justification: Provides vehicle odometer readings for vehicle maintenance tracking and billing purposes

Business Rules: Numeric entry

Technical Comments: Odometer readings can track up to hundred thousand and tenths of mileage.

51. Response Mode (Lights or Sirens to Scene)

Name of Data Element:	Response Mode (Lights or Sirens to Scene)
Priority:	Essential
Definition:	The use of lights or sirens enroute to scene.
Code:	Numeric entry.
NHTSA 2:	E02_20
Field Length:	2
Field Starting and Ending Position	289 - 290
<p>Data Items:</p> <p>No lights or sirens Used lights or sirens</p> <p style="text-align: center;">Refer to Appendix I</p>	

Discussion and Justification: To allow system administrators to know the frequency with which responder vehicles are using lights and sirens. Such usage carries explicit risks and EMS managers are responsible to assure that lights and sirens are used appropriately.

Business Rules: *Records submitted or requiring a Responding Time **must** have a Lights and Sirens to Scene code entered.* Required records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

52. Transport Mode (Lights or sirens used from scene)

Name of Data Element:	Transport Mode (Lights or sirens used from scene)
Priority:	Essential
Definition:	Use of lights and/or sirens from the scene.
Code:	Numeric entry.
NHTSA 2:	E20_14
Field Length:	2
Field Starting and Ending Position:	291 - 292
<p>Data Items:</p> <p>No lights or sirens Used lights or sirens</p> <p style="text-align: center;">Refer to Appendix I</p>	

Discussion and Justification: Allows system administrators to know the frequency with which responder vehicles are using lights and sirens. Such usage carries explicit risks and EMS managers are responsible to assure that lights and sirens are used appropriately.

Business Rules: *Records submitted or requiring an Arrive Destination (data element #27) **must** have a Lights and Sirens from the Scene code entered.* Required records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

53. Incident City/County FIPS

Name of Data Element:	Incident City/County FIPS
Priority:	Mandatory
Definition:	City or township (if applicable) where patient was found or to which unit responded (or best approximation)
Code:	Numeric entry.
NHTSA 2:	E08_13
Field Length:	5
Field Starting and Ending Position:	74 - 78
<p>Data Items:</p> <p style="text-align: center;">Refer to Appendix C (Hawaii City/County FIPS List)</p> <p style="text-align: center;">99999 – Not Listed</p>	

Content: This five (5)-digit field is coded using the FIPS system, wherein each city is encoded as a five (5)-digit number (i.e. Bismarck '07200'.) City FIPS codes are only unique within a state.

Business Rules: *All records submitted must have an Incident FIPS entered.* The FIPS entered must be from the approved FIPS list found in Appendix C. Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system.

Discussion and Justification: Provides city location of incident, which can be used to determine the appropriate level of EMS resources for specific areas. In addition, this field may facilitate probabilistic linkage to crash reports from the same city, or to hospitals within the same city. Field may be used for local city reports, permitting local understanding of the impact of EMS.

54. Incident Location / Zip code

Name of Data Element:	Incident Location / Zip code
Priority:	Desirable
Definition:	Free form entry of incident address or location. Zip code of incident.
Code:	Alphanumeric entry
NHTSA 2:	E08_11, E08_12, E08_14, E08_15
Field Length:	85
Field Starting and Ending Position:	

Content: This is an eighty-five (85) alphanumeric character free form field containing the specific address of the incident.

Discussion and Justification: The street address (or best approximation) where the patient was found, or, if no patient, the address to which the unit responded. Important for grouping or comparing data by Scene location which also allows data to be sorted by geographic response areas in many agencies. Provides information on overall response patterns and times for agency configuration and evaluation. The zip code is required for billing purposes.

Business Rules: *All records submitted should have an Incident Location entered.* If the incident is appropriate to not report this data element, then this field may be left blank.

Technical Comments: Use appropriate direction and street abbreviations to fit in the length requirement.

55. Incident GPS Location

Name of Data Element:	Incident GPS Location
Priority:	Desirable
Definition:	The Incident's GPS coordinates where the patient was found, or, if no patient, address to which unit responded.
Code:	Alpha/numeric entry
NHTSA 2:	E08_10
Field Length:	20
Field Starting and Ending Position:	

Content: Contains the GPS coordinates, Latitude and Longitude, of the incident where the patient was found or location unit responded to.

Discussion and Justification: Provides exact location of incident, which can be used to determine the appropriate level of EMS resources for specific areas.

Business Rules: If the data is not submitted then the field must be left blank and filled with the appropriate spaces.

Technical Comments: The format should be Latitude followed by Longitude. Use only the N (North) and W (West) identifiers with numbers in order of degree, minutes and decimal. Do not submit decimal or minute marks (N512345W0772345).

56. Patient Condition at Scene

Name of Data Element:	Patient Condition at Scene
Priority:	Essential
Definition:	Describes the apparent condition of the patient upon arrival at the scene.
Code:	Numeric entry
NHTSA 2:	E20_15
Field Length:	2
Field Starting and Ending Position:	
<p>Data Item:</p> <p>Minor Serious Critical Extremely Critical Apparent DOA</p> <p style="text-align: center;">Refer to Appendix J</p>	

Content: This data element is coded as a two (2)-position field that provides important information about the patient's condition at the scene.

Discussion and Justification: Describes the apparent condition of the patient upon initial assessment at the scene. Used for quality management to categorize the patient for evaluation of care, agency performance and outcome.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...', 'Care Transferred', 'Patient Refused', 'Treated, transported... vehicle', 'Treated and...', 'DOA', ' must have a Patient Condition at Scene entered. Required records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be left blank.*

Technical Comments: Definitions as in the State of Hawaii, Department of Health, Emergency Medical Services Branch, Instruction Manual for Completion of Ambulance Report Form, ©1993.

Minor

No alteration of level of consciousness. All vital parameters stable. No impending deterioration.

Serious

May or may not have altered level of consciousness. All vital parameters stable. Primary (and/or secondary) problem demands initiation of definitive pre-hospital treatment and transport. Pre-hospital treatment will stabilize patient's condition.

Critical

Unstable level of consciousness. Unstable primary (and/or secondary) problem requiring definitive pre-hospital treatment and transport. Pre-hospital treatment will not stabilize patient's condition.

Extremely Critical

Deteriorating level of consciousness and/or vital signs (two or more parameters). Deteriorating primary problem with secondary complications. Survival questionable.

Apparent D.O.A.

A patient, who is without any vital signs of life, is traumatized beyond any means of survival or with marked/pronounced lividity.

57. Patient Condition at Facility

Name of Data Element:	Patient Condition at Facility
Priority:	Essential
Definition:	Describes the apparent condition of the patient upon arrival at the receiving facility.
NHTSA 2:	E20_15
Code:	Alpha/numeric entry
Field Length:	20
Field Starting and Ending Position:	
<p>Data Item:</p> <p>Improved Stable Unstable Worse</p> <p style="text-align: center;">Refer to Appendix K</p>	

Content: This data element is coded as a two (2)-position field that provides important information about the patient's condition at the receiving facility.

Discussion and Justification: Describes the apparent condition of the patient upon final assessment at the receiving facility. Used for quality management to categorize the patient for evaluation of care, agency performance and outcome.

Business Rules: *Records submitted with an Incident Disposition code of 'Treated, Transported...' must have a Patient Condition at Facility entered.* Required records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be left blank.

Technical Comments: Reevaluate the patient as defined in Patient Condition at Scene and mark the patient's change from the initial evaluation of condition at scene.

58. Receiving Agency

Name of Data Element:	Receiving Agency
Priority:	Essential
Definition:	Specific Health Care Facility or Prehospital Agency that received patient from EMS provider providing this record.
Code:	Numeric entry.
NHTSA 2:	E20_01 to E20_07
Field Length:	5
Field Starting and Ending Position:	568 - 571
Data Items	
<p>{ 5 digit Health Facility Number } Refer to Appendix B { 5digit EMS Agency Number } Refer to Appendix A</p> <p>99999 Unknown</p>	

Content: This element consists of the unique five (5)-digit number as assigned by the Hawaii Department of Health, Division of EMS for approved health care facilities and EMS agencies.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’ must have a Receiving Agency entered.* Records with a missing or invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: This data element is used in conjunction with data elements “Destination/Transferred To” to indicate the specific receiving facility.

99999 Unknown

This code should be used when the specific facility number or EMS agency number is not known.

59. Destination Type

Name of Data Element:	Destination Type										
Priority:	Essential										
Definition:	Health Care Facility or Prehospital Unit/Home that received patient from EMS responder providing this record.										
Code:	Numeric entry.										
NHTSA 2:	E20_17										
Field Length:	2										
Field Starting and Ending Position:	558 - 559										
<p>Data Items:</p> <table> <tr> <td>Home</td> <td>Morgue</td> </tr> <tr> <td>Medical Office/clinic</td> <td>Extended Care</td> </tr> <tr> <td>Other EMS responder (ground)</td> <td>Other</td> </tr> <tr> <td>Other EMS responder (air)</td> <td>Not applicable</td> </tr> <tr> <td>Hospital</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix L</p>		Home	Morgue	Medical Office/clinic	Extended Care	Other EMS responder (ground)	Other	Other EMS responder (air)	Not applicable	Hospital	
Home	Morgue										
Medical Office/clinic	Extended Care										
Other EMS responder (ground)	Other										
Other EMS responder (air)	Not applicable										
Hospital											

Discussion and Justification: Allows reporting by destination facilities, and allows linking when a patient is transferred between EMS responder agencies. Not applicable would be selected when there is no patient.

It is anticipated that each region or state will codify its list of hospitals in an internally consistent manner, permitting reports by facility. For purposes of the uniform data set, the first 8 categories have been defined above. For purposes of export to a larger data set, such as a national data set, all hospital destinations would be collapsed down into a single code for Hospital.

This data element is very valuable for probabilistic linkage. For instance, when an EMS responder indicates a specific hospital identifier, this can greatly facilitate linkage to outpatient and inpatient facility records.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” or ‘Care Transferred’ must have a Destination Type entered.* Records with a missing or an invalid Destination Type will be marked as non-compliant by the system. Only one (1) item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be

submitted with the appropriate number of spaces.

60. Transport Assist Unit / Time

Name of Data Element:	Transport Assist Unit / Time
Priority:	Essential
Definition:	Identifies an additional unit that may have been directly involved in the transport of the patient.
Code:	Numeric entry.
NHTSA 2:	E08_01, E08_03
Field Length:	5
Field Starting and Ending Position:	
Data Items:	
{5digit EMS Agency Number} Refer to Appendix A	

Content: This element consists of the unique five (5)-digit number as assigned by the Hawaii Department of Health, Division of EMS for approved EMS agencies.

Discussion and Justification: Allows tracking of additional units used to transport or were on the transport of the patient from the incident to the receiving facility. If the report writer is an ALS provider who was on board another transporting unit (BLS ambulance) then the report writer would complete the PCR listing the transporting unit as the Transport Assist Unit. If the report writer is the BLS provider on the transporting unit with another unit's ALS provider then the report writer would list the ALS unit as the Transport Assist Unit.

Business Rules: Only one (1) item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field may be left blank.

61. Destination Determination

Name of Data Element:	Destination Determination										
Priority:	Essential										
Definition:	Reason a transport destination was selected.										
Code:	Numeric entry.										
NHTSA 2:	E20_16										
Field Length:	2										
Field Starting and Ending Position:											
<p>Data Items:</p> <table> <tr> <td>Closest Facility</td> <td>Protocol</td> </tr> <tr> <td>Patient/Family Choice</td> <td>Trauma Center</td> </tr> <tr> <td>Patient Physician Choice</td> <td>On-line Medical Direction</td> </tr> <tr> <td>Managed Care</td> <td>Reroute</td> </tr> <tr> <td>EMS Provider Choice</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix M</p>		Closest Facility	Protocol	Patient/Family Choice	Trauma Center	Patient Physician Choice	On-line Medical Direction	Managed Care	Reroute	EMS Provider Choice	
Closest Facility	Protocol										
Patient/Family Choice	Trauma Center										
Patient Physician Choice	On-line Medical Direction										
Managed Care	Reroute										
EMS Provider Choice											

Content: This data element is coded as a two (2)-position field that provides information about the determination of the receiving facility.

Discussion and Justification: Helps EMS managers to determine whether the choice of destination is appropriate. Items, which are defined as patient, physician, or family choice, are of interest to determine whether a trauma or referral system is functioning well, or is frequently overridden by non-medical issues.

Business Rules: Records submitted with an Incident Disposition of ‘Treated, transported...’ or ‘Care Transferred’ **must** have a Destination Determination entered. Records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

62. Level of Care Provided (Nature of Incident)

Name of Data Element:	Level of Care Provided (Nature of Incident)
Priority:	Mandatory
Definition:	Type of care available/rendered by personnel regardless of level
Code:	Numeric entry.
NHTSA 2:	E07_34
Field Length:	2
Field Starting and Ending Position:	
Data Items BLS ALS Paratransit Refer to Appendix N	

Content: This data element is coded as a two (2)-position field that provides important information about level of care rendered.

Discussion and Justifications: The CMS service level for this EMS encounter. Allows data to be quantified and described based on the CMS Service Level. Allows data to be sorted based on the CMS Service Level. Important for EMS billing

Business Rules: *All records submitted must have a Level of Care Provided entered.* Records with a missing or an invalid entry will be rejected and marked as non-compliant by the system.

Technical Comments:*BLS*

Is a level of care that provides treatment and transport requiring only minimal intervention. It includes the administration of oxygen and patient assisted medications as noted in the Department of Transportation Basic Curriculum.

ALS

Is a level of care that is able to provide advanced monitoring of patient (ECG, 12 Lead, etc.), invasive procedures that include IV therapy, IO therapy, advanced airway management, ACLS, and pharmacology intervention.

63. Medical Direction

Name of Data Element:	Medical Direction										
Priority:	Essential										
Definition:	Method medical direction was received.										
Code:	Numeric entry.										
NHTSA 2:	E18_10, E19_10										
Field Length:	2										
Field Starting and Ending Position:											
<p>Data Items:</p> <table> <tr> <td>Telephone</td> <td>Written Orders</td> </tr> <tr> <td>Cellular</td> <td>DNR</td> </tr> <tr> <td>Radio</td> <td>None</td> </tr> <tr> <td>Standing Orders</td> <td>Not Applicable</td> </tr> <tr> <td>On-Scene</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix O</p>		Telephone	Written Orders	Cellular	DNR	Radio	None	Standing Orders	Not Applicable	On-Scene	
Telephone	Written Orders										
Cellular	DNR										
Radio	None										
Standing Orders	Not Applicable										
On-Scene											

Content: This data element is coded as a two (2)-position field that provides important information about the form of medical direction received for this incident.

Discussion and Justification: Provides a quality assurance reporting on medical direction method for treatment, medications and care provided for the incident. Assists with the tracking of standing order usage.

Business Rules: *Records where it is appropriate for Medical Direction* **should** have the field completed. If the incident was not appropriate to report medical direction then the user should mark the field as Not Applicable. Only one (1) item from the above data item list may be selected.

64. Medical Direction Hospital

Name of Data Element:	Medical Direction Facility
Priority:	Essential
Definition:	The facility where medical direction was received from
Code:	Numeric entry.
NHTSA 2:	E18_11, E19_11
Field Length:	5
Field Starting and Ending Position:	
Data Items:	
{ 5 digit Health Facility Number } Refer to Appendix B	

Content: This data element is coded as a five (5)-position field that provides the facility identifier that medical direction was received from for this incident.

Discussion and Justification: Provides a quality assurance reporting on the location that medical direction was received from for the incident.

Business Rules: *Records submitted with a Medical Direction of 'Telephone' or 'Cellular' or 'Radio' should have a Medical Direction Facility entered.* Only one (1) facility from the above data item list may be selected.

65. Medical Direction Physician / Time

Name of Data Element:	Medical Direction Provider / Time
Priority:	Essential
Definition:	The name of the provider that gave medical direction and the initial contact time.
Code:	Numeric entry.
NHTSA 2:	E18_11, E19_12
Field Length:	30
Field Starting and Ending Position:	

Content: This data element is coded as a thirty (30)-position field that provides the identifier of the person from whom medical direction was received from for this incident.

Discussion and Justification: Provides a quality assurance reporting on the individual that medical direction was received from for the incident.

Business Rules: *Records submitted with a Medical Direction of 'Telephone' or 'Cellular' or 'Radio', or 'On-Scene' should have a Medical Direction Provider and Time entered. Only one (1) provider and the first time of contact may be entered.*

66. Mutual Aid Units

Name of Data Element:	Mutual Aid Units
Priority:	Essential
Definition:	Tracks units that assisted in this incident or units that were provided assistance.
Code:	Alpha/Numeric entry.
NHTSA 2:	E08_01, E08_02
Field Length:	Varied
Field Starting and Ending Position:	
<p>Data Items:</p> <p>Unit Name Time of Unit On Scene Comments Mutual Aid Unit's Incident Number</p>	

Content: This data element is coded as varied length fields that provide information on Mutual Aid Units.

Discussion and Justification: Provides reporting and lookup feature on additional units at the incident. This can track units that are assisting with the incident or units that are being assisted.

Business Rules: *Records where it is appropriate for Mutual Aid Units should* have the field completed. If the incident was not appropriate to report mutual aid units then the user should leave the field empty. Complete all known and appropriate items from the above data item list.

67. Prior Aid

Name of Data Element:	Prior Aid
Priority:	Essential
Definition:	The type of individual who performed any care prior to the arrival of this unit.
Code:	Numeric entry
NHTSA 2:	E09_01, E09_02
Field Length:	6
Field Starting and Ending Position:	
Data Items:	
None	Doctor's Office/Clinic
Bystander	Hospital
Family	Nursing Home
Patient	Other Medical Facility
Other EMS	Law Enforcement Responder
Rapid Response Unit	Lifeguard Responder
Fixed Wing Service	Security Responder
Helicopter Service	Other
Fire Dept.	Not Applicable
Fire Responder	Unknown
Refer to Appendix P	

Discussion and Justification: Beneficial to planners and researchers in evaluating the skills and abilities of those first to arrive on the scene or witness emerging situations where medical or injuries are paramount.

Business Rules: *All Records submitted may have a Prior Aid entry.* **Up to three (3)** items from the above data item list can be submitted. Records with an invalid entry will be marked as non-compliant by the system.

Technical Comments:

Other

This is to be coded when an individual not listed in the data item list provided the prior aid.

Not Applicable

This is to be coded if the incident would not receive any prior assistance or aid, such as a standby.

Unknown

This is to be coded if prior aid was rendered but the report writer is unsure what affiliation the aid came from.

68. Initial Vital Signs Time

Name of Data Element:	Initial Vital Signs Time
Priority:	Essential
Definition:	Time that initial vital signs were obtained
Code:	Time format should be coded as HHMM.
NHTSA 2:	E14_01
Field Length:	4
Field Starting and Ending Position:	

Content: HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Desirable in certain situations in which there may be a significant delay between the time at which a response unit arrives at the scene and the time at which the personnel can access the patient. For example, if the EMTs are prevented because of fire or adverse conditions from approaching the patient, this time will be useful. Search and rescue operations will also note delays between arrival at the overall scene and the actual patient contact.

Business Rules: If *Records submitted with an Incident Disposition of "Treated, transported..."*, *'Care Transferred'*, *'Treat, transported...'*, *'Treated and ...'*, *'Patient refused...'* **must have an *Initial Vital Signs Time***. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

69. Initial Pulse Rate

Name of Data Element:	Initial Pulse Rate
Priority:	Essential
Definition:	Patient's palpated or auscultated pulse rate expressed in number per minute.
Code:	Numeric entry
NHTSA 2:	E14_07
Field Length:	3
Field Starting and Ending Position:	
Data Items:	{Pulse rate} – Max entry 300 888 Not Obtained

Content: Code as three (3) -digit field.

Discussion and Justification: The pulse rate is a component of various triage-scoring systems, and permits a rough assessment of the severity of illness of the patient. This data element is based on the physical examination of the patient, and the pulse must be palpated or auscultated. An electrical rhythm is not sufficient, as the patient could have pulse less electrical activity (PEA). In this instance, the correct value of this data element is '000'.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treat, transported...", "Treated and ...", "Patient refused..." must have an Initial Pulse entered.* An entered pulse rate should not be entered greater than 300. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Pulse rates should be left justified filled with zeros (i.e. 60 = 060). It is recognized that patient's encountered may have an initial pulse rate greater than 300, however, planning and epidemiological studies do not need to differentiate individual numbers greater than the maximum setting. This should limit the submission of, as well as flag erroneous data.

888 Not Obtained

This is to be coded if a patient was encountered and no pulse was assessed. It is not to be used if no patient was encountered or the incident does not require a pulse rate

70. Initial Respiratory Rate

Name of Data Element:	Initial Respiratory Rate
Priority:	Essential
Definition:	Unassisted patient respiratory rate expressed as number per minute.
Code:	Numeric entry
NHTSA 2:	E14_11
Field Length:	3
Field Starting and Ending Position:	
Data Items:	
{Respiratory rate} - Limit 100	
888 Not Obtained	

Content: Coded as three (3)-digit field.

Discussion and Justification: Component of several triage scoring systems and provides some assessment of severity of illness or injury. If a patient is not breathing and requires artificial ventilation, this data element should be coded as '000'.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , "Care Transferred", "Treat, transported... vehicle", "Treated and ...", "Patient refused..." must have an Initial Respiratory Rate entered.* An entered respiratory rate should not be entered greater than 100. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Respiratory rates should be left justified filled with zeros (i.e. 20 = 020). It is recognized that patient's encountered may have an initial respiratory rate greater than 100, however, planning and epidemiological studies do not need to differentiate individual numbers greater than the maximum setting. This should limit the submission of, as well as flag erroneous data.

888 Not Obtained

This is to be coded if a patient was encountered and no respiratory rate was assessed. It is not to be used if no patient was encountered or the incident does not require a respiratory rate.

71. Initial Systolic Blood Pressure

Name of Data Element:	Initial Systolic Blood Pressure
Priority:	Essential
Definition:	Patient's systolic blood pressure
Code:	Numeric entry
NHTSA 2:	E14_04
Field Length:	3
Field Starting and Ending Position:	
Data Items:	
{Systolic blood pressure} – Limit 400	
888 Not Obtained	

Content: Coded as three (3)-digit field.

Discussion and Justification: Important component of several scoring systems for triage, and permits some assessment of acuity of patient.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have an Initial Systolic Blood Pressure entered. An entered systolic blood pressure should not be greater than 400. Records with missing or invalid systolic blood pressure entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Systolic blood pressures should be left justified filled with zeros (i.e. 60 = 060). The coding of ‘000’ should only be used if a blood pressure is attempted but not able to be determined due to poor perfusion. It is recognized that patient’s encountered may have an initial systolic blood pressures greater than 400, however, planning and epidemiological studies do not need to differentiate individual number greater than the maximum setting. This should limit the submission of, as well as flag erroneous data.

888 Not Obtained

This is to be coded if a patient was encountered and no systolic blood pressure was assessed. It is not to be used if no patient was encountered or the incident does not require a systolic blood pressure.

72. Initial Diastolic Blood Pressure

Name of Data Element:	Initial Diastolic Blood Pressure
Priority:	Essential
Definition:	Patient's diastolic blood pressure
Code:	Numeric entry
NHTSA 2:	E14_05
Field Length:	3
Field Starting and Ending Position:	
<p>Data Items:</p> <p>{Diastolic blood pressure} – Limit 400</p> <p>888 Not Obtained</p>	

Content: Coded as three (3)-digit field.

Discussion and Justification: Important component of several scoring systems for triage, and permits some assessment of acuity of patient.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have an Initial Diastolic Blood Pressure entered. An entered diastolic blood pressure should not be entered greater than 400. Records with missing or invalid diastolic blood pressure entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: Diastolic blood pressures should be left justified filled with zeros (i.e. 60 = 060). The coding of ‘000’ should only be used if a blood pressure is attempted but not able to be determined due to poor perfusion. It is recognized that patient’s encountered may have an initial diastolic blood pressures greater than 400, however, planning and epidemiological studies do not need to differentiate individual number greater than the maximum setting. This should limit submission of, as well as flag erroneous data.

888 Not Obtained

This is to be coded if a patient was encountered and no diastolic blood pressure was assessed. It is not to be used if no patient was encountered or the incident does not require a diastolic blood pressure.

73. Initial Blood Pressure Method

Name of Data Element:	Initial Blood Pressure Method
Priority:	Essential
Definition:	Patient's palpated diastolic blood pressure
Code:	Numeric entry
NHTSA 2:	E14_06
Field Length:	1
Field Starting and Ending Position:	
Data Items:	
	0 Auscultated
	1 Palpated
	2 NIBP Machine

Content: Coded as a one (1)-digit field.

Discussion and Justification: Important component of several scoring systems for triage, and permits some assessment of acuity of patient.

Business Rules: *Records submitted that require a Diastolic Blood Pressure and have a value other than '888' must have an Initial Blood Pressure Method entered.* Records with missing or invalid blood pressure method entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Auscultated

This is coded when a diastolic blood pressure field is completed and the value was obtained via auscultation means.

Palpate

This is coded when a systolic blood pressure field was obtained via palpation, thus preventing the interpretation of a diastolic blood pressure.

Non-Invasive Blood Pressure Machine (NIBP)

This is coded when a diastolic blood pressure field is completed and the value was obtained via an external electronic device (Dynamap, Propaq, etc.)

74. Initial Skin Perfusion

Name of Data Element:	Initial Skin Perfusion						
Priority:	Essential						
Definition:	Patient skin perfusion expressed as normal or decreased.						
Code:	Numeric entry						
NHTSA 2:	E14_						
Field Length:	2						
Field Starting and Ending Position:							
Data Items:	<table> <tr> <td>01</td> <td>Normal</td> </tr> <tr> <td>02</td> <td>Decreased</td> </tr> <tr> <td>88</td> <td>Not Obtained</td> </tr> </table>	01	Normal	02	Decreased	88	Not Obtained
01	Normal						
02	Decreased						
88	Not Obtained						

Content: This data element is coded as a two (2)-position field. Normal is defined as warm, pink and with capillary refill time of two (2) or less seconds. Decreased is defined as cool, pale, mottled, dusky and with capillary refill time of greater than two (2) seconds.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treat, transported... vehicle", "Treated and ...", "Patient refused..." must have an Initial Skin Perfusion entered. Only one (1) item from the above data item list can be submitted. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments:

88 Not Obtained

This is to be coded if a patient was encountered and no skin perfusion was assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

75. Initial Glasgow Eye Opening Component

Name of Data Element:	Initial Glasgow Eye Opening Component
Priority:	Essential
Definition:	Patient's eye opening component of the Glasgow coma scale.
Code:	Numeric entry
NHTSA 2:	E14_15
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
01	None
02	Opens eyes in response to painful stimulation
03	Opens eyes in response to verbal stimulation
04	Opens eyes spontaneously
88	Not obtained

Discussion and Justification: One of three components of the Glasgow Coma Scale (GCS), which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems. The component by itself does not offer a true assessment of neurological status; therefore a complete GCS examination assessing all three components must be submitted for neurological evaluation purposes.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , "Care Transferred", "Treat, transported... vehicle", "Treated and ...", "Patient refused..." must have a complete GCS examination entered. Only one (1) item from the above data item list can be submitted.* Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: A judgment that the data element is not applicable should not be made at the responder level. Instead, this can be made by generating data reports for specific conditions in which the data element is considered relevant, and examining the field for valid values.

88 Not Obtained

This is to be coded if a patient was encountered and GCS was not assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

76. Initial Glasgow Verbal Component

Name of Data Element:	Initial Glasgow Verbal Component
Priority:	Essential
Definition:	Patient's verbal component of the Glasgow coma scale
Code:	Numeric entry
NHTSA 2:	E14_16
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
<p>For patients >5years:</p> <p>01 None</p> <p>02 Non-specific sounds</p> <p>03 Inappropriate words</p> <p>04 Confused conversation or speech</p> <p>05 Oriented and appropriate speech</p> <p>For patients 2-5 years:</p> <p>01 None</p> <p>02 Grunts</p> <p>03 Cries and/or screams</p> <p>04 Inappropriate words</p> <p>05 Appropriate words</p> <p>For patients 0-23 months:</p> <p>01 None</p> <p>02 Persistent cry, grunting</p> <p>03 Inappropriate cry</p> <p>04 Cries, inconsolable</p> <p>05 Smiles, coos, cries appropriately</p> <p>88 Not Obtained</p>	

Discussion and Justification: One of three components of the Glasgow Coma Scale, which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems. The component by itself does not offer a true assessment of neurological status; therefore a complete GCS examination assessing all three components must be submitted for neurological evaluation purposes.

7Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treat, transported... vehicle’, ‘Treated and ...’, ‘Patient refused...’ must have a complete GCS examination entered. Only one (1) item from the above data item list can be submitted. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: If the patient is intubated and deeply comatose, then this data element is coded as 1 for none, since there was no verbal response at the time of Intubation. However, if the patient is intubated but not deeply comatose, and there is a possibility of verbal response, it is difficult to apply the Glasgow coma scale. The EMS responder can ask questions and if the patient can nod his head or blink eyes, etc. appropriately, then this element is coded as 5. A judgment that the data element is not applicable should not be made at the responder level. Instead, this can be made by generating data reports for specific conditions in which the data element is considered relevant, and examining the field for valid values.

88 Not Obtained

This is to be coded if a patient was encountered and GCS was not assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

77. Initial Glasgow Motor Component

Name of Data Element:	Initial Glasgow Motor Component
Priority:	Essential
Definition:	Patient's motor component of the Glasgow coma scale.
Code:	Numeric entry
NHTSA 2:	E14_18
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
<p>For patients >5 years:</p> <ul style="list-style-type: none"> 01 None 02 Extensor posturing in response to painful stimulation 03 Flexor posturing in response to painful stimulation 04 General withdrawal in response to painful stimulation 05 Localization of painful stimulation 06 Obeys commands with appropriate motor response <p>For patients up to 5 years:</p> <ul style="list-style-type: none"> 01 None 02 Extensor posturing in response to painful stimulation 03 Flexor posturing in response to painful stimulation 04 General withdrawal in response to painful stimulation 05 Localization of painful stimulation 06 Spontaneous 88 Not Obtained 	

Discussion and Justification: One of three components of the Glasgow Coma Scale, which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems. The component by itself does not offer a true assessment of neurological status; therefore a complete GCS examination assessing all three components must be submitted for neurological evaluation purposes.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , 'Care Transferred', 'Treat, transported... vehicle', 'Treated and ...', 'Patient refused...' must have a complete GCS examination entered. Only one (1) item from the above data item list can be submitted. Records with a missing or an invalid entry will be marked as non-compliant by the system. If the*

incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: This component cannot be assessed if the patient has received a muscle relaxant. However, information on patient's response prior to the muscle relaxant may be reported for this initial assessment. A judgment that the data element is not applicable should not be made at the responder level. Instead, this can be made by generating data reports for specific conditions in which the data element is considered relevant, and examining the field for valid values.

88 Not Obtained

This is to be coded if a patient was encountered and GCS was not assessed. It is not to be used if no patient was encountered or the incident does not require a skin perfusion assessment.

78. Initial Revised Trauma Score

Name of Data Element:	Initial Revised Trauma Score
Priority:	Desirable
Definition:	Patient's revised trauma score.
Code:	Numeric entry
NHTSA 2:	E14_27
Field Length:	2
Field Starting and Ending Position:	

Content: Coded as two (2)-digit field.

Discussion and Justification: One example of a triage scoring system, which may be used to categorize injured patients in an EMS system. This data element is considered desirable, but the intention is that local agencies use scoring systems, which are applicable to their own purposes. Most of these scoring systems should be calculable from other data elements, which are included as core elements of the uniform data set.

Other scoring systems that are used in EMS information systems include the CRAMS, the Trauma Index, the Trauma Score (Champion), the Glasgow Coma Scale, APACHE, PRISM, Hanover Intensive Score (HIS), AIS and ISS. It is recommended that experience be gained with these scoring systems, emphasizing scoring systems, which can be automatically calculated from components, which are designated as core data elements.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , 'Care Transferred' AND have an Incident Type marked as 'Trauma' must have an Initial Revised Trauma Score entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: The revised trauma score may be calculated from other data elements. It is the sum of a respiratory rate component, systolic blood pressure component, and a neurologic component.

Respiratory Rate Component

4	10 - 29 per minute
3	>29 per minute
2	6 - 9 per minute
1	1 - 5 per minute
0	None spontaneous

Systolic Blood Pressure Component

4	>89 mm Hg
3	76 - 89 mm Hg
2	50 - 75 mm Hg
1	1 - 49 mm Hg
0	No pulse

Neurologic Component

4	Glasgow coma score 13 - 15
3	Glasgow coma score 9 - 12
2	Glasgow coma score 6 - 8
1	Glasgow coma score 4 - 5
0	Glasgow coma score 3

Calculate the total score by adding the 3 fields together. If the score cannot be calculated because of an absent component data or is unknown, then the score should be coded as '88'.

88 Not Obtained

This is to be coded if a patient was encountered and not all components were presented to properly formulate a score. It is not to be used if no patient was encountered or the incident does not require revised trauma score.

79. Initial Cardiac Rhythm

Name of Data Element:	Initial Cardiac Rhythm
Priority:	Essential
Definition:	Initial monitored cardiac rhythm as interpreted by EMS personnel.
Code:	Numeric entry
NHTSA 2:	E14_03
Field Length:	2
Field Starting and Ending Position:	432 - 433
Data Items:	
Normal Sinus	Paced
Sinus Tach.	PVC's
Sinus Brady	SV. Tach.
Asystole	Vent. Tach
AV Block	Vent. Fib.
Atrial Fib.	AED Shockable
Atrial Flutter	AED Non-Shockable
PEA / EMD	Other
Junctional	Not Applicable
Refer to Appendix Q	

Discussion and Justification: Provides the initial monitored rhythm, permitting reports generated according to initial rhythm. Such reports would be of use in assessing the survival rate after certain rhythms.

It is understood that some agencies collect data about cardiac rhythms with more detail than this list. For instance, many agencies expect EMS personnel to distinguish first, second, and third degree heart block. There is no intention to restrict the manner in which any agencies decide to code cardiac rhythms, but there is a necessity to be able to collapse those rhythms to a common definition, which can then be combined. For the examples of heart block mentioned, those would all collapse into AV Block.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , 'Care Transferred', 'Treat, transported... vehicle', 'Treated and ...', 'Patient refused...' and has a Nature of Incident marked as 'ALS' or 'Critical Care' must have an Initial Cardiac Rhythm. Only one (1) item*

from the above data item list can be submitted. Records with an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: This field should be coded with the appropriate number of spaces when the EMS responder is not an appropriate level provider to assess electrical rhythm, or if electrical monitoring is unavailable to the provider.

80. Final Cardiac Rhythm (at Destination)

Name of Data Element:	Final Cardiac Rhythm (at Destination)
Priority:	Desirable
Definition:	Monitored cardiac rhythm upon arrival at destination.
Code:	Numeric entry
NHTSA 2:	E11_11
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
Normal Sinus	Paced
Sinus Tach.	PVC's
Sinus Brady	SV. Tach.
Asystole	Vent. Tach
AV Block	Vent. Fib.
Atrial Fib.	AED Shockable
Atrial Flutter	AED Non-Shockable
PEA / EMD	Other
Junctional	Not Applicable
Refer to Appendix Q	

Discussion and Justification: Captures the electrical rhythm at the time of arrival at a destination, as previously defined. Reports could examine whether this rhythm differs from the initial rhythm of the patient when encountered in the field, whether there was improvement or deterioration, etc. If an EMS responder is not equipped with electrical monitoring capability or is not of an appropriate level to assess rhythm, this field should be coded as not applicable.

Business Rules: Records submitted with an Incident Disposition of "Treated, transported..." **and** has a Nature of Incident marked as 'ALS' or 'Critical Care' **must** have a Final Cardiac Rhythm. **Only one (1)** item from the above data item list can be submitted. Records with an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

81. Witnessed Cardiac Arrest

Name of Data Element:	Witnessed Cardiac Arrest
Priority:	Essential
Definition:	If the cardiac arrest was witnessed by anyone.
Code:	Numeric entry.
NHTSA 2:	E11_04
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
01 Yes	
02 No	
03 Unknown	
88 Not Applicable	

Content: This data element is coded as a 2-position field that provides information concerning the incidence of witnessed cardiac arrests.

Business Rules: *Records submitted that require and have a Time of Cardiac Arrest marked and a Procedure OR Treatment of 'CPR' OR Time of First CPR marked **must** have Witnessed Cardiac Arrest entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system.

Only one (1) item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the Non applicable code.

Technical Comments:*Unknown*

Unknown should only be used if the incident involved a cardiac arrest and the provider is unaware of the correct answer.

Not Applicable

This is to be used if the field is not appropriate for the incident.

82. Time of Cardiac Arrest

Name of Data Element:	Time of Cardiac Arrest
Priority:	Desirable
Definition:	Time of estimated cardiac arrest.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E11_08
Field Length:	4
Field Starting and Ending Position:	

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Allows assessment of actual total arrest time in patients with cardiac arrest. This information is valuable for researchers and educators concerned with CPR training.

Business Rules: *Records submitted with an Incident Disposition of ‘Treated, transported...’, ‘Care Transferred’, ‘Treated and ...’, AND have a Procedure or Treatment of CPR or a Sign and Symptoms Present marked of ‘Cardioresp. Arrest’ OR a Provider Impression marked as ‘Cardiac Arrest’ must have a Time of Cardiac Arrest entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

This data element is undefined if CPR was never administered. Thus, in writing computerized reports, a program should first examine the "Provider of First CPR" field, or a treatment field, to determine that CPR occurred on the run. If CPR was never rendered, the software should never examine this field.

83. Provider of First CPR

Name of Data Element:	Provider of First CPR
Priority:	Desirable
Definition:	Person who performed first CPR on patient.
Code:	Numeric entry
NHTSA 2:	E11_04
Field Length:	2
Field Starting and Ending Position:	
<p>Data Items:</p> <ul style="list-style-type: none"> Bystander EMS responder Family Fire responder Law Enforcement responder Security Responder Lifeguard Responder None <p style="text-align: center;">Refer to Appendix R</p>	

Discussion and Justification: Useful for assessing the quality of CPR rendered by initial responders to a cardio respiratory arrest, for planning public educational efforts, etc.

Business Rules: *Records submitted that require and have a Time of Cardiac Arrest marked and a Procedure OR Treatment of 'CPR' OR Time of First CPR marked **must** have a Provider of First CPR entered.* Records with missing or an invalid entry will be marked as non-compliant by the system.

Only one (1) item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Not applicable should be used when there is no need for CPR given the condition of the patient. Unknown should only be used when data is being entered long after the actual incident and the information cannot be correctly reconstructed from the hardcopy record. For instance, unknown should never be the code if there was no CPR rendered; this should be coded as not applicable.

84. Time of First CPR

Name of Data Element:	Time of First CPR
Priority:	Desirable
Definition:	Best <u>estimate</u> of time of first CPR.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E11_
Field Length:	4
Field Starting and Ending Position:	

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Permits assessment of the duration of cardiopulmonary resuscitation prior to arrival of EMS responder. Useful for research purposes and for planning public education concerning CPR.

Business Rules: *Records submitted that require and have a Time of Cardiac Arrest marked AND a Procedure OR Treatment of 'CPR' OR Provider of First CPR marked **must** have a Time of First CPR entered.* Records with missing or invalid Time of First CPR entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two (2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

This data element is undefined if CPR was never administered. Thus, in writing computerized reports, a program should first examine the "Provider of First CPR" field, or a treatment field, to determine that CPR occurred on the run. If CPR was never rendered, the software should never examine this field.

85. Provider of First Defibrillation

Name of Data Element:	Provider of First Defibrillation
Priority:	Desirable
Definition:	Person who performed first defibrillation on patient.
Code:	Numeric entry
NHTSA 2:	E11_
Field Length:	2
Field Starting and Ending Position:	375 - 376
<p>Data Items:</p> <p>Public Access Defibrillator Ambulance AED Ambulance Manual Fire AED Security AED Lifeguard AED Not Applicable</p> <p style="text-align: center;">Refer to Appendix S</p>	

Discussion and Justification: Provides information concerning the incidence of defibrillation of cardiac arrest patient. (For planning public and EMS Training efforts.)

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treated and ...’, AND a Sign and Symptoms Present marked of ‘Cardioresp. Arrest’ OR a Provider Impression marked as ‘Cardiac Arrest’ OR a Time of First Defibrillatory Shock marked **must** have a Provider of First Defibrillatory Shock entered.* Records with missing or invalid Provider of First Defibrillatory Shock entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Not applicable should be used when there was no cardiac arrest or witness of a cardiac arrest. Unknown should only be used when data is being entered long after the actual incident and the information cannot be correctly reconstructed from the hardcopy record. For instance, unknown should never be the code if there was no cardiac arrest or witness; this should be coded as not applicable.

88 *Not Applicable*

This is to be coded if the incident met the requirements for a defibrillatory shock, but none were administered. This is not to be used when there was no cardiac arrest or no patient contact.

86. Time of First Defibrillatory Shock

Name of Data Element:	Time of First Defibrillatory Shock
Priority:	Desirable
Definition:	<u>Estimated</u> time of first Defibrillatory shock.
Code:	Numeric entry
NHTSA 2:	E11_
Field Length:	4
Field Starting and Ending Position:	

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Allows assessment of the time required between onset of cardiac arrest and provision of defibrillation in instances of ventricular fibrillation. Provides information about the rapidity with which the EMS responder correctly diagnoses the rhythm and takes action.

Business Rules: *Records submitted that meet the requirement for defibrillation and have a Provider of First Defibrillatory Shock marked other than 'Not Applicable' must have a Time of First Defibrillatory Shock entered.* Records with missing or invalid Time of First Defibrillatory Shock entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two (2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

87. Number of Defibrillatory Shock(s)

Name of Data Element:	Number of Defibrillatory Shock(s)
Priority:	Desirable
Definition:	Numeric entry of the number of defibrillatory shocks given to the patient.
Code:	Numeric entry
NHTSA 2:	E11_
Field Length:	2
Field Starting and Ending Position:	
Data Items:	
00 – 11	Exact numeric entry of number of shocks
12	If shocks > 11+

Content: Numeric entry of numbers between 0-11 and 12 (represents any number greater than 11).

Discussion and Justification: Allows assessment of the number of defibrillation shocks delivered to a patient. Provides information about the number of defibrillatory shocks and the field outcome of a patient.

Business Rules: *Records submitted that meet the requirement for defibrillation and have a Provider of First Defibrillatory Shock marked other than 'Not Applicable' **must** have a Number of Defibrillatory Shock(s) entered.* Records with missing or invalid Number of Defibrillatory Shock(s) entry will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

88. Time CPR Discontinued

Name of Data Element:	Time CPR Discontinued
Priority:	Desirable
Definition:	Time at which medical control or responding EMS unit terminated resuscitation efforts (chest compressions and CPR) in the field.
Code:	Time format should be coded as HHMM.
NHTSA 2:	E11_09
Field Length:	4
Field Starting and Ending Position:	

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: Provides information concerning the duration of CPR in the field in cases in which the patient was pronounced dead in the field.

Business Rules: *Records submitted that require and have a Time of First CPR marked and a Procedure OR Treatment of 'CPR' OR Provider of First CPR marked **must** have a Time CPR Discontinued entered.* Records with missing or invalid entries will be marked as non-compliant by the system. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two (2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

This data element is undefined if CPR was never administered. (see Technical Comments for "Time of First CPR")

If CPR continued into hospital than this time should match the arrival time at facility.

89. Time Spontaneous Circulation Returned

Name of Data Element:	Time Spontaneous Circulation Returned
Priority:	Desirable
Definition:	Estimated time of restored palpable pulse following resuscitation in the field.
Code:	Numeric entry
NHTSA 2:	E11_06
Field Length:	4
Field Starting and Ending Position:	

Content: Time format should be coded as HHMM. HH ranges from 00 to 23; MM ranges from 00 to 59.

Discussion and Justification: If there was a return of spontaneous circulation while in the care of the providers then the providers should enter an appropriate time in this field.

Business Rules: A time should only be entered if return of circulation occurs and Time of Cardiac Arrest is marked. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Format HHMM is recommended as part of FIPS standard. There should be no colon in the field when used for export purposes. Use leading zeros to assure two-(2) character field width for HH and MM. Midnight is coded as 0000, and begins the new day.

90. Research Fields

Name of Data Element:	Research Fields
Priority:	Desirable
Definition:	This is an additional field that is not defined by the State and allows local or regional authorities to collect random data not defined in this data set.
Code:	Alpha/numeric entry.
NHTSA 2:	E23_09
Field Length:	4
Field Starting and Ending Position:	

Content: This element consists of a four (4)-character field to allow collection of short-term data points at a local or regional level. The centralization of data leads to the chance of duplication of coding for different data items. Therefore the Hawaii Department of Health, Division of EMS must assign the data item codes in an effort to prevent duplication. Agencies wishing to utilize this field must contact the EMS office to only receive the code numbers for their items they wish to track.

Business Rules: *Codes submitted in this field that were not assigned by the Hawaii Department of Health, Division of EMS will not be entered into the central database and marked as non-compliant by the system. This field will not effect the overall submission of a record. If the incident is appropriate to not report this data element or this field is not used by the agency, then this field must be submitted with the appropriate number of spaces.*

Technical Comments: It is recommend that this field be left justified with entries.

91. Incident Type (Service Type)

Name of Data Element:	Incident Type (Service Type)
Priority:	Mandatory
Definition:	Type of service requested.
Code:	Numeric entry
NHTSA 2:	E02_04 expanded
Field Length:	2
Field Starting and Ending Position:	81 - 82
<p>Data Items:</p> <p>Medical Trauma Hazmat Public Service Standby Medical Monitoring Patient Transfer</p> <p style="text-align: center;">Refer to Appendix T</p>	

Content: This is a list of the general categories that should match the type of the incident.

Discussion and Justification: Used to categorize the types of service, which are required, and allows planning of EMS resource allocation.

Business Rules: *All records submitted must have an Incident Type entered.* Records with missing or an invalid Incident Type will be rejected and marked as non-compliant by the system. **Only one (1) Incident Type** from the above data item list can be submitted. If responders do not arrive on scene they are to approximate the incident type based on dispatch information.

Technical Comments: Incident type is important for epidemiologists as well as EMS planners deciding where to allocate EMS resources.

Fire

Refers to direct response to the scene of a Fire Incident.

Medical

Refers to direct response to the scene of a Medical Incident. This location should be the location

indicated in data element 9 in this document.

Trauma

Refers to direct response to the scene of a Trauma Incident.

Hazmat

Refers to direct response to the scene of a Hazmat Incident.

Public Service

Refers to a situation in which EMS response unit is performing a public service.

Standby

Refers to situation in which EMS response unit is requested to arrive at a scene and be available, such as at a football stadium or fire incident. If an incident occurs during the *standby*, the service requested becomes *scene*.

Medical Monitoring

Need definition from Chief Dukes

Patient Transfer

Refers to the non-emergent transport of a patient from any location to any other location (i.e. home to dialysis center or hospital to home or hospital to rehabilitation center). The origin or destination may be an acute care facility

92. Injury Present

Name of Data Element:	Injury Present
Priority:	Essential
Definition:	Indicates whether or not there was an injury
Code:	Numeric entry
Field Length:	2
NHTSA 2:	E09_04
Field Starting and Ending Position:	83 - 84
Data Items:	
00	No
01	Yes
88	Not Applicable

Content: Coded as a two (2)-digit field.

Discussion and Justification: Indicates whether or not the patient sustained injury in association with the incident type. The use of this data element will allow injuries to be tracked for non-traumatic incident categories (syncopal episode with injuries from the fall) as well as traditional traumatic incidents (Motor vehicle accident, shootings, etc.). Allows EMS data at the national level to be sorted based on traumatic vs. non-traumatic despite the incident type or primary impression.

Business Rules: *All records submitted must have an Injury Present entered.* Records with missing or an invalid Injury Present will be rejected and marked as non-compliant by the system. **Only one (1) Injury Present** from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the Not Applicable code.

Technical Comments: This element in association with the Incident Type data element will assist epidemiologists as well as EMS planners in better sorting data based on trauma vs. non-traumatic events.

88 Not Applicable

This is coded when an incident's disposition did not involve a patient contact.

93. Cause of Injury / Mechanism of Injury

Name of Data Element:	Cause of Injury / Mechanism of Injury																																										
Priority:	Essential																																										
Definition:	External cause of injury.																																										
Code:	Numeric entry.																																										
NHTSA 2:	E10_01, E10_10																																										
Field Length:	10																																										
Field Starting and Ending Position:	293 - 302																																										
<p>Data Items:</p> <table> <tr> <td>Aircraft related accident</td> <td>MVC – Motor Vehicle Collision</td> </tr> <tr> <td>All Terrain Vehicle (ATV)</td> <td>Off Road Vehicle Collision</td> </tr> <tr> <td>Animal Involvement</td> <td>Pedestrian Traffic Accident</td> </tr> <tr> <td>Bicycle accident</td> <td>Poisoning – Alcohol</td> </tr> <tr> <td>Bite</td> <td>Poisoning – Chemical</td> </tr> <tr> <td>Blast / Explosion</td> <td>Poisoning - Drug</td> </tr> <tr> <td>Burns/thermal/chemical</td> <td>Radiation exposure</td> </tr> <tr> <td>Choking</td> <td>Rollerblade</td> </tr> <tr> <td>Drowning</td> <td>Skateboard</td> </tr> <tr> <td>Electrocution</td> <td>Smoke inhalation</td> </tr> <tr> <td>Excessive cold</td> <td>Stabbing / Cutting</td> </tr> <tr> <td>Excessive heat</td> <td>Struck by Person</td> </tr> <tr> <td>Falls</td> <td>Struck by Object</td> </tr> <tr> <td>Falls > 20 Feet</td> <td>Natural Environmental Factor</td> </tr> <tr> <td>Firearm injury</td> <td>Venomous stings (plants, animals)</td> </tr> <tr> <td>Hanging</td> <td>Water transport accidents</td> </tr> <tr> <td>Lightning</td> <td>Water Sports</td> </tr> <tr> <td>Machinery accident</td> <td>Unknown</td> </tr> <tr> <td>Mechanical suffocation</td> <td>Not applicable</td> </tr> <tr> <td>MCC – Motorcycle Collision</td> <td></td> </tr> <tr> <td>MPC – Moped Collision</td> <td></td> </tr> </table> <p style="text-align: center;"><u>Refer to Appendix U</u></p>		Aircraft related accident	MVC – Motor Vehicle Collision	All Terrain Vehicle (ATV)	Off Road Vehicle Collision	Animal Involvement	Pedestrian Traffic Accident	Bicycle accident	Poisoning – Alcohol	Bite	Poisoning – Chemical	Blast / Explosion	Poisoning - Drug	Burns/thermal/chemical	Radiation exposure	Choking	Rollerblade	Drowning	Skateboard	Electrocution	Smoke inhalation	Excessive cold	Stabbing / Cutting	Excessive heat	Struck by Person	Falls	Struck by Object	Falls > 20 Feet	Natural Environmental Factor	Firearm injury	Venomous stings (plants, animals)	Hanging	Water transport accidents	Lightning	Water Sports	Machinery accident	Unknown	Mechanical suffocation	Not applicable	MCC – Motorcycle Collision		MPC – Moped Collision	
Aircraft related accident	MVC – Motor Vehicle Collision																																										
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Lightning	Water Sports																																										
Machinery accident	Unknown																																										
Mechanical suffocation	Not applicable																																										
MCC – Motorcycle Collision																																											
MPC – Moped Collision																																											

Discussion and Justification: It is necessary to have a broad taxonomy for defining the external causes of injury, and this data element is coded according to the E codes in ICD-9. However, it is recognized that the entire E code list is too cumbersome for field use, and the element may be collapsed into the categories, which have been listed above.

When possible, the E code should be defined in as much detail as is present in the E code definitions. Such codes will always be collapsible to the categories defined here, but the added detail will provide additional value to injury prevention researchers. It has been traditional to attempt to assign a single E code to individual incidents. Multiple entries, however, aids in gathering better detail about injuries, and to eliminate confusion when the EMS provider must choose between two reasonable E codes.

Business Rules: *Records submitted with an Incident Disposition of ‘Treated, transported...’ or ‘Care Transferred’ AND have an Incident Type marked as ‘Trauma’ must have a Mechanism of Injury entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. Other Incident Dispositions that involve patient contact may also submit this data element. Multiple items from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field may be left blank.

Technical Comments: This data element is based on E codes, but the coding structure is intended to be more flexible. Additional categories for not applicable and unknown have been added, so that this data element can always be filled in on the database.

Not Applicable

This code should be used where an external injury code does not apply, such as when a patient suffers from chest pain or fever. In nearly all instances where an injury has occurred, this data element should be filled in with a valid code, other than the Not Applicable designation.

Unknown

Includes any incident where the cause of injury or mechanism is unknown to the reporter.

94. Intent of Injury

Name of Data Element:	Intent of Injury
Priority:	Essential
Definition:	The intent of the individual inflicting the injury
Code:	Numeric entry.
NHTSA 2:	E10_02
Field Length:	
Field Starting and Ending Position:	
<p>Data Items:</p> <ul style="list-style-type: none"> Unintentional (Accidental) Intentional, Other (Assault) Intentional, Self Unknown Not Applicable <p style="text-align: center;">Refer to Appendix V</p>	

Content: The intent of the individual inflicting the injury.

Discussion and Justification: Identifies the intent of the injury to better determine the cause of the injury.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...” or ‘Care Transferred’ AND have an Injury Present marked as “Yes” **must** have an Intent of Injury entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. If the incident is appropriate to not report this data element, then the choice of Not Applicable must be submitted.

Technical Comments: One choice only may be selected. Only available for incidents where Injury Present is selected. Incidents with no injury should not be entered for medical illness.

95. Complaint Reported by Dispatch

Name of Data Element:	Complaint Reported by Dispatch																																						
Priority:	Essential																																						
Definition:	The primary complaint reported to or received at dispatch																																						
Code:	Numeric entry.																																						
NHTSA 2:	E03_01																																						
Field Length:																																							
Field Starting and Ending Position:	313 - 314																																						
<p>Data Items:</p> <table> <tr> <td>Abdominal pain</td> <td>Heat/Cold exposure</td> </tr> <tr> <td>Allergies</td> <td>Hemorrhage/Laceration</td> </tr> <tr> <td>Animal Bite</td> <td>Industrial accident</td> </tr> <tr> <td>Assault</td> <td>Ingestion/Poisoning</td> </tr> <tr> <td>Back pain</td> <td>Noxious Odor</td> </tr> <tr> <td>Breathing Problems</td> <td>Pregnancy/Childbirth/GYN</td> </tr> <tr> <td>Burns</td> <td>Psychiatric problems</td> </tr> <tr> <td>CO Poisoning</td> <td>Seizures/Convulsions</td> </tr> <tr> <td>Cardiac Arrest</td> <td>Sick person</td> </tr> <tr> <td>Chest Pains</td> <td>Skin rash / Blister</td> </tr> <tr> <td>Choking</td> <td>Stab/Gunshot wound</td> </tr> <tr> <td>Diabetic problem</td> <td>Stroke/CVA</td> </tr> <tr> <td>Drowning</td> <td>Traffic Accident</td> </tr> <tr> <td>Electrocution</td> <td>Traumatic injury</td> </tr> <tr> <td>Eye problem</td> <td>Unconscious/Fainting</td> </tr> <tr> <td>Fall victim</td> <td>Interfacility/Transfer</td> </tr> <tr> <td>Fever</td> <td>Other</td> </tr> <tr> <td>Headache</td> <td>Unknown Problem</td> </tr> <tr> <td>Heart Problems</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix W</p>		Abdominal pain	Heat/Cold exposure	Allergies	Hemorrhage/Laceration	Animal Bite	Industrial accident	Assault	Ingestion/Poisoning	Back pain	Noxious Odor	Breathing Problems	Pregnancy/Childbirth/GYN	Burns	Psychiatric problems	CO Poisoning	Seizures/Convulsions	Cardiac Arrest	Sick person	Chest Pains	Skin rash / Blister	Choking	Stab/Gunshot wound	Diabetic problem	Stroke/CVA	Drowning	Traffic Accident	Electrocution	Traumatic injury	Eye problem	Unconscious/Fainting	Fall victim	Interfacility/Transfer	Fever	Other	Headache	Unknown Problem	Heart Problems	
Abdominal pain	Heat/Cold exposure																																						
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Fall victim	Interfacility/Transfer																																						
Fever	Other																																						
Headache	Unknown Problem																																						
Heart Problems																																							

Discussion and Justification: This data element is intended to capture the information provided to or obtained by the PSAP or dispatch center and transmitted to the EMS responder.

Business Rules: *All records submitted must have a Complaint Reported by Dispatch entered.* Records with missing or an invalid Complaint Reported by Dispatch will be rejected and marked as non-compliant by the system. **Only one (1) Complaint Reported by Dispatch** from the above data item list can be submitted.

Technical Comments: It is intended that the dispatch complaint be correlated with the clinical impression of the responder. This would help EMS planners with assessing dispatch triage and protocols in use.

Other

This is to be coded in situations where the complaint reported at dispatch does not meet the list provided.

Unknown

This is to be coded if no complaint was reported at dispatch or if the complaint was for an unknown problem. This is not to be used if self dispatched or alerted by other means and the reporter is aware of the type of problem they are responding to.

96. Pertinent Pre-Existing Conditions

Name of Data Element:	Pertinent Pre-Existing Conditions																						
Priority:	Essential																						
Definition:	Pre-existing medical conditions known to the provider.																						
Code:	Numeric entry																						
NHTSA 2:	E12_10																						
Field Length:	10																						
Field Starting and Ending Position:	303 - 312																						
<p>Data Items:</p> <table> <tr> <td>Asthma</td> <td>Seizure disorder</td> </tr> <tr> <td>Cancer</td> <td>Chronic respiratory failure</td> </tr> <tr> <td>Diabetes</td> <td>Transient Cerebral Ischemia</td> </tr> <tr> <td>Dementia</td> <td>Heart Disease</td> </tr> <tr> <td>Hypertension</td> <td>Chronic renal failure</td> </tr> <tr> <td>CVA/Stroke</td> <td>Pacemaker/AICD</td> </tr> <tr> <td>Psychiatric problems</td> <td>Pregnancy</td> </tr> <tr> <td>COPD</td> <td>Traumatic Brain Injury</td> </tr> <tr> <td>Immunosuppressed</td> <td>Other</td> </tr> <tr> <td>Spinal Cord Injury</td> <td>None stated</td> </tr> <tr> <td>Special Needs</td> <td>Not Obtainable</td> </tr> </table> <p style="text-align: center;">Refer to Appendix X</p>		Asthma	Seizure disorder	Cancer	Chronic respiratory failure	Diabetes	Transient Cerebral Ischemia	Dementia	Heart Disease	Hypertension	Chronic renal failure	CVA/Stroke	Pacemaker/AICD	Psychiatric problems	Pregnancy	COPD	Traumatic Brain Injury	Immunosuppressed	Other	Spinal Cord Injury	None stated	Special Needs	Not Obtainable
Asthma	Seizure disorder																						
Cancer	Chronic respiratory failure																						
Diabetes	Transient Cerebral Ischemia																						
Dementia	Heart Disease																						
Hypertension	Chronic renal failure																						
CVA/Stroke	Pacemaker/AICD																						
Psychiatric problems	Pregnancy																						
COPD	Traumatic Brain Injury																						
Immunosuppressed	Other																						
Spinal Cord Injury	None stated																						
Special Needs	Not Obtainable																						

Discussion and Justification: Pertinent pre-existing conditions may affect the protocols followed by EMS responders. The data element is intended to capture information as understood by EMS providers at the scene, not as defined later in the medical record of the hospital. Thus, if the EMS responder finds out that a patient has several pre-existing conditions after he or she arrives at the hospital, those conditions should not be coded in this data element. It is clear that the list provided here may not include other important conditions. Other conditions should be added as desired, but it is hoped that the above conditions will be included in all data sets. Up to 5 Pre-existing Conditions can be selected.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported..." , 'Care Transferred', 'Treat, transported...vehicle', 'Treated and ...', 'Patient refused...' must have a Pre-*

Existing Condition entered. Records with a missing or an invalid entry will be marked as non-compliant by the system. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

None stated

This is to be coded if a conscious patient or family member when asked responded in a manner interpreted to mean that the patient had no pre-existing conditions. This is not to be coded if no patient contact was made.

Not Obtainable

This is to be coded if the patient was not asked or the patient was unable to respond to the question. This is not to be coded if no patient contact was made.

97. Signs and Symptoms Present

Name of Data Element:	Signs and Symptoms Present																																				
Priority:	Essential																																				
Definition:	Signs and symptoms reported to or observed by provider.																																				
Code:	Numeric entry.																																				
NHTSA 2:	E09_13, E09_14																																				
Field Length:	10																																				
Field Starting and Ending Position:																																					
<p>Data Items:</p> <table> <tr> <td>Abdominal pain</td> <td>Headache</td> </tr> <tr> <td>Back pain</td> <td>Hypertension</td> </tr> <tr> <td>Bleeding</td> <td>Hypothermia</td> </tr> <tr> <td>Bloody stools</td> <td>Nausea / Vomiting</td> </tr> <tr> <td>Breathing difficulty</td> <td>Neck pain</td> </tr> <tr> <td>Cardiopulmonary Arrest</td> <td>Pain – Non specific</td> </tr> <tr> <td>Chest pain / Discomfort</td> <td>Paralysis</td> </tr> <tr> <td>Choking</td> <td>Palpitations</td> </tr> <tr> <td>Cold Exposure Symptoms</td> <td>Petechiae, non-traumatic ecchymosis</td> </tr> <tr> <td>Coma</td> <td>Pregnancy/childbirth/miscarriage</td> </tr> <tr> <td>Cough, pneumonia, URI</td> <td>Seizures/convulsions</td> </tr> <tr> <td>Deformity</td> <td>Skin rash / Blister with unknown origin</td> </tr> <tr> <td>Diarrhea</td> <td>Syncope</td> </tr> <tr> <td>Dizziness</td> <td>Unresponsive/unconscious</td> </tr> <tr> <td>Dysuria</td> <td>Vaginal bleeding</td> </tr> <tr> <td>Ear pain</td> <td>Weakness (malaise)</td> </tr> <tr> <td>Eye pain</td> <td>Psychiatric</td> </tr> <tr> <td>Fever/Hyperthermia</td> <td>Other</td> </tr> </table> <p style="text-align: center;">Refer to Appendix Y</p>		Abdominal pain	Headache	Back pain	Hypertension	Bleeding	Hypothermia	Bloody stools	Nausea / Vomiting	Breathing difficulty	Neck pain	Cardiopulmonary Arrest	Pain – Non specific	Chest pain / Discomfort	Paralysis	Choking	Palpitations	Cold Exposure Symptoms	Petechiae, non-traumatic ecchymosis	Coma	Pregnancy/childbirth/miscarriage	Cough, pneumonia, URI	Seizures/convulsions	Deformity	Skin rash / Blister with unknown origin	Diarrhea	Syncope	Dizziness	Unresponsive/unconscious	Dysuria	Vaginal bleeding	Ear pain	Weakness (malaise)	Eye pain	Psychiatric	Fever/Hyperthermia	Other
Abdominal pain	Headache																																				
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Dizziness	Unresponsive/unconscious																																				
Dysuria	Vaginal bleeding																																				
Ear pain	Weakness (malaise)																																				
Eye pain	Psychiatric																																				
Fever/Hyperthermia	Other																																				

Discussion and Justification: This data element is intended to capture the information provided to or obtained by the EMS responder in order to assess the patient.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treat, transported...vehicle’, ‘Treated and ...’, ‘Patient refused...’ must have a Sign and Symptom Present entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: It is intended that these signs and symptoms be correlated with the clinical impression of the responder. This would help EMS managers plan educational programs for the responders.

Other

This is to be coded in situations where there are signs and symptoms but they are not on the list.

98. Provider Impression

Name of Data Element:	Provider Impression																																																		
Priority:	Essential																																																		
Definition:	Provider's clinical impression, which led to the management given to the patient (treatments, medications, procedures).																																																		
Code:	Numeric entry.																																																		
NHTSA 2:	E09_15, E09_16																																																		
Field Length:	2																																																		
Field Starting and Ending Position:																																																			
<p>Data Items:</p> <table> <tr> <td>Abdominal pain w/ other symptoms</td> <td>Heat exposure - life threatening</td> </tr> <tr> <td>Abnormal Cardiac Rhythm</td> <td>Hemorrhage - Severe</td> </tr> <tr> <td>Abnormal skin signs</td> <td>Hyperthermia / Fever</td> </tr> <tr> <td>Alcohol intoxication, drug overdose</td> <td>Hypothermia</td> </tr> <tr> <td>Allergic Reaction - Life Threatening</td> <td>Infectious diseases - isolation proc.</td> </tr> <tr> <td>ALS Medical Condition</td> <td>Lightning</td> </tr> <tr> <td>Altered level of consciousness</td> <td>Major Trauma</td> </tr> <tr> <td>Animal bites/sting/envenomation - other</td> <td>Medical conditions - contraindicates</td> </tr> <tr> <td>Back Pain</td> <td>Medical/legal</td> </tr> <tr> <td>Back pain - non-traumatic, neurological</td> <td>Near Drowning</td> </tr> <tr> <td>Bed Confined</td> <td>Near syncope, weakness or dizziness</td> </tr> <tr> <td>Blood Glucose - abnormal</td> <td>Other Trauma - Major Bleeding</td> </tr> <tr> <td>BLS Medical Condition</td> <td>Other Trauma – Mont/Maintain Airway</td> </tr> <tr> <td>Burns</td> <td>Pain, acute and severe</td> </tr> <tr> <td>Cardiac Arrest</td> <td>Poisons ingested, injected</td> </tr> <tr> <td>Cardiac Symptoms other than chest pain</td> <td>Post Op procedure complications</td> </tr> <tr> <td>Chest pain (non-traumatic)</td> <td>Pregnancy/Childbirth</td> </tr> <tr> <td>Choking episode</td> <td>Psychiatric Disorder</td> </tr> <tr> <td>Cold exposure - w/ symptoms</td> <td>Respiratory Arrest</td> </tr> <tr> <td>Convulsions/seizures</td> <td>Service not avail at originating facility</td> </tr> <tr> <td>Difficulty breathing</td> <td>Sexual assault w/ injuries</td> </tr> <tr> <td>Dysuria</td> <td>Specialty care monitoring</td> </tr> <tr> <td>Electrocution</td> <td>Unconscious, fainting, syncope</td> </tr> <tr> <td>Eye injuries</td> <td>Other</td> </tr> <tr> <td>Eye symptoms (non-traumatic)</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix Y</p>		Abdominal pain w/ other symptoms	Heat exposure - life threatening	Abnormal Cardiac Rhythm	Hemorrhage - Severe	Abnormal skin signs	Hyperthermia / Fever	Alcohol intoxication, drug overdose	Hypothermia	Allergic Reaction - Life Threatening	Infectious diseases - isolation proc.	ALS Medical Condition	Lightning	Altered level of consciousness	Major Trauma	Animal bites/sting/envenomation - other	Medical conditions - contraindicates	Back Pain	Medical/legal	Back pain - non-traumatic, neurological	Near Drowning	Bed Confined	Near syncope, weakness or dizziness	Blood Glucose - abnormal	Other Trauma - Major Bleeding	BLS Medical Condition	Other Trauma – Mont/Maintain Airway	Burns	Pain, acute and severe	Cardiac Arrest	Poisons ingested, injected	Cardiac Symptoms other than chest pain	Post Op procedure complications	Chest pain (non-traumatic)	Pregnancy/Childbirth	Choking episode	Psychiatric Disorder	Cold exposure - w/ symptoms	Respiratory Arrest	Convulsions/seizures	Service not avail at originating facility	Difficulty breathing	Sexual assault w/ injuries	Dysuria	Specialty care monitoring	Electrocution	Unconscious, fainting, syncope	Eye injuries	Other	Eye symptoms (non-traumatic)	
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Eye injuries	Other																																																		
Eye symptoms (non-traumatic)																																																			

Discussion and Justification: This data element contains the single clinical assessment, which primarily drove the actions of the EMS responder. It should be possible to determine whether the treatments or medications provided match protocols, which relate to the clinical impression. When more than one choice is applicable to a patient, the responder should indicate the single most important clinical assessment that drove most of the plan of therapy and management.

It should be noted that this coding system differs from current systems. For instance, many EMS data sets include the entity, Animal Bite. In the uniform data set, such an entry should be coded in this field as a Traumatic Injury. The site of injury should be indicated in the injury field described later in this dictionary, showing the type (laceration or puncture) and site of the bite itself. In addition, the Cause of Injury should be coded as E906.x as discussed under the data element, Cause of Injury. For another example, Sexual Assault is coded in this data element in the same manner as a Traumatic Injury, but the Cause of Injury would be coded as E960.1, and Injury Intent would be coded as intentional. The reason for using this approach is to avoid overlapping, duplicative codes, which are not attached to a general taxonomy such as ICD9. Such codes would become agency specific and would not be flexible enough to permit combining data from different agencies. This list is comprised of the Federal Register Condition Codes.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have a Provider Impression entered.* Records with a missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: The field width should always be 2 digits in length. Therefore, data items should be zero padded on the left to assure interpretability. The list provided here is not all-inclusive and is based on the CMS condition codes.

Other

This code should be used when none of the codes listed can be applied; however, there is enough information for a clinical impression to be made by the EMS provider

99. Scene Factors Affecting EMS Delivery of Care

Name of Data Element:	Scene Factors Affecting EMS Delivery of Care														
Priority:	Mandatory														
Definition:	Special circumstances affecting the EMS response or delivery of care.														
Code:	Numeric entry.														
NHTSA 2:	E12_01														
Field Length:															
Field Starting and Ending Position:															
<p>Data Items:</p> <table> <tr> <td>Adverse weather</td> <td>Hazardous material</td> </tr> <tr> <td>Adverse road conditions</td> <td>Crowd Control</td> </tr> <tr> <td>Vehicle problems</td> <td>Delay in EMS access</td> </tr> <tr> <td>Unsafe scene</td> <td>Mass Casualty Incident</td> </tr> <tr> <td>Uncooperative patient</td> <td>Specialized Rescue</td> </tr> <tr> <td>Language barrier</td> <td>Extrication > 20 Minutes</td> </tr> <tr> <td></td> <td>Not Applicable</td> </tr> </table> <p style="text-align: center;">Refer to Appendix Z</p>		Adverse weather	Hazardous material	Adverse road conditions	Crowd Control	Vehicle problems	Delay in EMS access	Unsafe scene	Mass Casualty Incident	Uncooperative patient	Specialized Rescue	Language barrier	Extrication > 20 Minutes		Not Applicable
Adverse weather	Hazardous material														
Adverse road conditions	Crowd Control														
Vehicle problems	Delay in EMS access														
Unsafe scene	Mass Casualty Incident														
Uncooperative patient	Specialized Rescue														
Language barrier	Extrication > 20 Minutes														
	Not Applicable														

Discussion and Justification: For systems planners who are evaluating response times, this data element provides explanations for delays encountered in the system. For instance, the time to scene would be expected to be prolonged if there was a blizzard, or if gunfire prevented EMS responders from patient access. If there were no problem with EMS delivery, this data element would be coded as not applicable.

Business Rules: All *Records* submitted **must** have a *Scene Factor Affecting EMS Delivery of Care* entered. Records with missing or an invalid entry will be marked as non-compliant by the system. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length.

Technical Comments: Unsafe scene includes presence of gunfire, instances in which police prevented access because of safety concerns, etc. A vehicle problem includes problems with the EMS responder vehicle itself, not with other vehicles that might have obstructed traffic. Extrication has been moved into this data element because extrication is not a patient treatment and relates less to the medical care

of the patient than to the environment in which EMS responders must work.

Not Applicable

This is to be coded when there were no factors affecting the delivery of EMS for the incident. This may also be used if no patient contact was made.

100. Location Type

Name of Data Element:	Location Type
Priority:	Mandatory
Definition:	Type of location of incident
Code:	Numeric entry
NHTSA 2:	E08_07
Field Length:	2
Field Starting and Ending Position:	
Data Items	
Residence	Industrial
Traffic way 55+mph	Mine/Quarry/Tunnel
Other Traffic way	Office/Business
Public Place	Hospital/Acute Care Facility
Recreation area	Clinic /Dr. Office
Waterway	Extended Care Facility
Wilderness	Off Road
Hotel / Motel	Correctional Facility
School / College	Mental Health Facility
Bar / Restaurant	Specialty Care Facility
Farm / Ranch	Unspecified location
Ocean	Not Applicable
Refer to Appendix AA	

Content: Location type data items are coded in terms of the (ICD-9) E849 place of occurrence codes. This location refers to the location where the injury occurred, not necessarily the origin of the transport.

Discussion and Justification: Location type of the incident is important for epidemiologists as well as EMS planners deciding where to allocate EMS resources. The categories in this dictionary are from ICD-9 and are E849 place of occurrence codes, with exceptions. These exceptions allow for more defined coding of established E849 codes or for unique locations inherent to Hawaii that are not addressed in E849 but important for state planning.

Business Rules: *All records submitted must have an Incident Location Type entered.* Records with missing or an invalid entry will be rejected and marked as non-compliant by the system. **Only one (1) Incident Location Type** from the above data item list can be submitted. If responders do not arrive on scene they are to approximate the incident location based on dispatch information.

Technical Comments: It is expected that these codes will need to be modified when ICD-10 becomes widely used. Definitions below are from ICD-9, which is currently utilized.

Unspecified location (E Code 849.9)

Includes any location not included in the above classification.

Not Applicable

To be used when there is no patient.

Unknown (E Code 849.U)

To be used when the location of incident is not known.

101. Alcohol / Drug Use

Name of Data Element:	Alcohol / Drug Use
Priority:	Essential
Definition:	Suspected alcohol or drug use by patient.
Code:	Numeric entry.
NHTSA 2:	E12_19
Field Length:	2
Field Starting and Ending Position:	399 - 400
Data Items:	
01	Alcohol
02	Drugs
03	Alcohol/Drugs
04	No

Discussion and Justification: Important data element for injury research, permitting reports of value to public health researchers and policy makers.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, “Care Transferred”, “Treat, transported... vehicle”, “Treated and ...”, “Patient refused...” must have an Alcohol / Drug use entered.* Records with missing or invalid Alcohol / Drug Use entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: Should be coded as yes whenever the EMS responder suspect’s alcohol or drug use by the patient may have contributed to the incident. The uses of drugs or alcohol in isolation have been coded individually for epidemiological purposes and specific use should be coded appropriately when possible. Not applicable should be used when there is no patient, such as in a standby response. If alcohol or drugs are totally unrelated to the incident, this field should be coded as no.

102. Injury Description

Name of Data Element:	Injury Description
Priority:	Essential
Definition:	Clinical description of injury type and body site.
Code:	Alphabetic and numeric entry.
NHTSA 2:	E15_01 to E15_11
Field Length:	10
Field Starting and Ending Position:	337 - 346
Data Items:	
<u>Body Sites</u>	<u>Injury Types</u>
A Head only (<i>excluding neck, cervical spine and ear</i>)	1. Soft Tissue - Closed
B Face (<i>including ear</i>)	2 Blunt injury
C Neck	3 Soft Tissue - Open
D Thorax (<i>excluding thoracic spine</i>)	4 Dislocation/deformity
E Abdomen (<i>excluding lumbar spine</i>)	5 Puncture/stab
F Spine	6 Gunshot
G Upper extremities	7 Amputation
H Lower extremities	8 Crush
I Body region unspecified	9 Burn
J Pelvic	
88 None Reported	

Content: Intended to permit the detailed listing of all injuries sustained by a patient, coded according to injury type and body site of the injury. Multiple entries will be possible. Each injury should be designated by body site and injury type. The most severe 3 injuries should be recorded.

The body sites included, as Data Items are consistent with body areas used to calculate the Injury Severity Score (ISS). This list is slightly expanded from the usual ISS, but is easily collapsed if necessary.

Business Rules: Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' or 'Fire' **must** have an Injury Description entered. Records with missing or an invalid entry will be marked as non-compliant by the system. Other Incident Dispositions that involve patient contact may also submit this data element. **Up**

to ten (10) items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Discussion and Justification: This is a crucial data element, which will enable EMS planners to know what types of injuries are incurred by patients using the EMS system. The data element will also be of value in assessing the correspondence between injury assessment in the field and actual injuries as evaluated in medical facilities. A major reason for using ISS related body sites is the ability to compare the hospital inpatient ISS areas with those indicated by the prehospital provider.

It is understood that various levels of providers will be permitted to make injury assessments at different levels of sophistication. For example, the diagnosis of fracture is considered out of scope for many prehospital responders. In this case, a term might be added for swelling, or some other marker by which an EMS responder is supposed to suspect a fracture or dislocation. It is stressed that this data element is supposed to reflect the clinical impression of injury by the EMS responder, not necessarily the final, correct medical diagnosis.

Technical Comments:

88 *None Reported*

This is to be coded if there are no injuries noted or reported by the patient.

103. Safety Devices

Name of Data Element:	Safety Devices																
Priority:	Essential																
Definition:	Safety equipment in use by patient at time of injury.																
Code:	Numeric entry.																
NHTSA 2:	E10_08, E10_09																
Field Length:																	
Field Starting and Ending Position:																	
<p>Data Items:</p> <table> <tr> <td>None used</td> <td>Helmet</td> </tr> <tr> <td>Lap belt only</td> <td>Eye protection</td> </tr> <tr> <td>Shoulder belt only</td> <td>Protective clothing/pads</td> </tr> <tr> <td>Shoulder and lap belt</td> <td>Respiratory protection</td> </tr> <tr> <td>Child safety seat</td> <td>Personal flotation device</td> </tr> <tr> <td>Airbag deployed</td> <td>Smoke / Co Detector</td> </tr> <tr> <td>Airbag – Not deployed</td> <td>Not applicable</td> </tr> <tr> <td>Harness</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix BB</p>		None used	Helmet	Lap belt only	Eye protection	Shoulder belt only	Protective clothing/pads	Shoulder and lap belt	Respiratory protection	Child safety seat	Personal flotation device	Airbag deployed	Smoke / Co Detector	Airbag – Not deployed	Not applicable	Harness	
None used	Helmet																
Lap belt only	Eye protection																
Shoulder belt only	Protective clothing/pads																
Shoulder and lap belt	Respiratory protection																
Child safety seat	Personal flotation device																
Airbag deployed	Smoke / Co Detector																
Airbag – Not deployed	Not applicable																
Harness																	

Discussion and Justification: Provides important information about safety device use in motor vehicle accidents, boating accidents, and industrial accidents with eye injuries. Data will be of use for corroboration of police reports concerning crashes.

Business Rules: *Records submitted with an Incident Disposition of ‘Treated, transported...’ or ‘Care Transferred’ AND ONLY have an Incident Type marked as ‘Trauma’ or ‘Fire’ must have a Safety Device entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. Other Incident Dispositions that involve patient contact may also submit this data element as appropriate. **Up to five (5)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments: If the EMS responder knows that no safety device was employed, then the data element should be coded as none. If none of the indicated devices was used, the element should also be coded as none.

Not Applicable

This is to be coded when no safety devices were indicated based on the nature of the call. This is not to be used if no patient contact was made.

104. Motor Vehicle Impact

Name of Data Element:	Motor Vehicle Impact										
Priority:	Essential										
Definition:	Motor Vehicle Impact site during collision.										
Code:	Numeric entry.										
NHTSA 2:	E10_05										
Field Length:	6										
Field Starting and Ending Position:											
<p>Data Items:</p> <table> <tr> <td>Head-on</td> <td>Rollover</td> </tr> <tr> <td>Lateral</td> <td>Rotation</td> </tr> <tr> <td>Ejection</td> <td>Not listed</td> </tr> <tr> <td>Rear</td> <td>Not applicable</td> </tr> <tr> <td>Intrusion</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix CC</p>		Head-on	Rollover	Lateral	Rotation	Ejection	Not listed	Rear	Not applicable	Intrusion	
Head-on	Rollover										
Lateral	Rotation										
Ejection	Not listed										
Rear	Not applicable										
Intrusion											

Content: This data element is coded as a two (2)-position field that provides information about the site of collision during a Motor Vehicle Impact, which can be used to predict injury patterns. Data will be used for corroboration of police reports concerning crashes. Up to three (3) Motor Vehicle Impact sites can be selected.

Business Rules: *Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' and a 'Mechanism of Injury' involving a motor vehicle **must** have a Motor Vehicle Impact entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. Other appropriate incidents that involve patient contact may also submit this data element as appropriate. **Up to three (3)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:*Not Listed*

This code should be used when the data element "Mechanism of Injury" is related to a Motor Vehicle but the Motor Vehicle Impact site not listed.

Not Applicable

This code should be used when the data element “Mechanism of Injury” is related to a Motor Vehicle but no impact was found. This is not to be used if the field is not appropriate for the incident.

105. Injury Indicators

Name of Data Element:	Injury Indicators												
Priority:	Essential												
Definition:	Provides indication of injuries from a collision.												
Code:	Numeric entry.												
NHTSA 2:	E10_04												
Field Length:	6												
Field Starting and Ending Position:													
<p>Data Items:</p> <table> <tr> <td>Speed 40+ MPH</td> <td>Death Same MV</td> </tr> <tr> <td>Extrication > 15 Minutes</td> <td>Motorcycle 20+MPH</td> </tr> <tr> <td>Deformity 20+ inches</td> <td>Pedestrian vs. MV > 5 MPH</td> </tr> <tr> <td>Intrusion 12+ inches</td> <td>Falls > 20 feet</td> </tr> <tr> <td>Rollover</td> <td>Not Applicable</td> </tr> <tr> <td>Ejection</td> <td></td> </tr> </table> <p style="text-align: center;">Refer to Appendix DD</p>		Speed 40+ MPH	Death Same MV	Extrication > 15 Minutes	Motorcycle 20+MPH	Deformity 20+ inches	Pedestrian vs. MV > 5 MPH	Intrusion 12+ inches	Falls > 20 feet	Rollover	Not Applicable	Ejection	
Speed 40+ MPH	Death Same MV												
Extrication > 15 Minutes	Motorcycle 20+MPH												
Deformity 20+ inches	Pedestrian vs. MV > 5 MPH												
Intrusion 12+ inches	Falls > 20 feet												
Rollover	Not Applicable												
Ejection													

Content: This data element is coded as a 2-position field that provides risk factor predictors present at the incident. Up to 3 Injury Indicators can be selected.

Business Rules: Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' and a 'Mechanism of Injury' involving a motor vehicle **must** have an Injury Indicator entered. Records with missing or an invalid entry will be marked as non-compliant by the system. Other appropriate incidents that involve patient contact may also submit this data element as appropriate. **Up to three (3)** items from the above data item list can be submitted. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

Not Applicable

This code should be used when the data element 'Mechanism of Injury' is related to a Motor Vehicle but no Injury Indicators applied. This is not to be used if the field is not appropriate for the incident.

106. Position in Vehicle

Name of Data Element:	Position in Vehicle
Priority:	Essential
Definition:	Position in vehicle during collision.
Code:	Numeric entry.
NHTSA 2:	E10_06, E10_07
Field Length:	2
Field Starting and Ending Position:	
<p>Data Items:</p> <ul style="list-style-type: none"> Driver Front Seat Passenger Second Row Passenger Third Row Passenger Other Row Passenger Truck Bed Cargo Not Applicable <p style="text-align: center;">Refer to Appendix EE</p>	

Content: This data element is coded as a 2-position field that provides information about the position of the patient during a Motor Vehicle Impact. It can be used to predict injury patterns in association with other data elements.

Business Rules: *Records submitted with an Incident Disposition of 'Treated, transported...' or 'Care Transferred' AND ONLY have an Incident Type marked as 'Trauma' and a 'Mechanism of Injury' involving a motor vehicle **must** have a Position in Vehicle entered.* Records with missing or an invalid entry will be marked as non-compliant by the system. **Only one (1)** item from the above data item list can be submitted. Other appropriate incidents that involve patient contact may also submit this data element as appropriate. Left justify with submission(s) and back fill with appropriate spaces to meet field length. If the incident is appropriate to not report this data element, then this field must be submitted with the appropriate number of spaces.

Technical Comments:

Not Applicable

This code should be used when the data element 'Mechanism of Injury' is related to a Motor Vehicle

but no Position in Vehicle applies. This is not to be used if the field is not appropriate for the incident.

107. Procedure or Treatment Name

Name of Data Element:	Procedure or Treatment Name
Priority:	Essential
Definition:	Identification of crewmember position and the procedure they attempted or performed on patient.
Code:	Numeric entry
NHTSA 2:	E19_01, E19_03 to E19_06, E19_09, E19_12
Field Length:	
Field Starting and Ending Position:	
Data Items:	
Abdominal Thrusts	Intubation - multi-lumen airway
Auto Defib./AED	Intubation - Nasotracheal
Back Blows	Intubation - Orotracheal
Bag Valve Mask	Irrigation
Bandage	IV External Jugular
Bleeding Controlled	IV Intraosseous
Blood Draw	IV Peripheral
Blood Glucose Level Check	IV Saline Lock
Blood product administration	Nasopharyngeal airway
Burn Care	NG Tube
Cardiovert	Oropharyngeal airway
Capnography	Oxygen Administered
Chest Decompression	Pacing
Cold Pack	PATI Protocol
CPR	Pulse Oximetry
Cricothyrotomy	Splint - Extremity
Defib - manual	Splint - Traction
Delivery (OB)	Suctioning
Demand Valve	Tourniquet
EKG	Ventilator
EKG - 12 Lead	Other

Extrication	Not Applicable
Full Spinal Immobilization	
<u>Refer to Appendix FF</u>	

Discussion and Justification: Intended to provide planners and educators with information about which procedures are conducted in the field, by whom, and for what indications. Procedures are defined here as anything done by way of assessment or treatment of the patient. Thus, application of a cervical collar is a treatment, use of a cardiac monitor is a tool of assessment, and drawing blood tubes is neither a specific treatment nor a means of field assessment. All of these would be considered procedures for purposes of this data element.

The Hawaii State Office of EMS derived this list to track recognized procedures and treatments occurring in the field. Agencies should identify other procedures not listed as 'Other'.

Business Rules: *Records submitted with an Incident Disposition of "Treated, transported...", "Care Transferred", "Treat, transported... vehicle", "Treated and ..." may have a Procedure or Treatment Name entered.* If the incident is appropriate to not report this data element, then this field may be submitted left blank.

Technical Comments: This field is coded with the position of the crewmember, as identified in data elements 29-36, performing the procedure followed by the above data item code. Additional items are collected if appropriate for the skill. These additional items are time, IV size, IV rate, IV fluid, IV location, intubation tube size, final airway, success and attempts.

Other

This is to be coded when a crewmember does a procedure not listed in the data item list.

Not Applicable

This is to be coded if a patient was encountered and did not receive any procedures or treatment. This is not to be used if no patient was encountered or the incident does not require entry of a procedure or treatment. When used this should be the only code submitted in the field.

108. Medication Name

Name of Data Element:	Medication Name
Priority:	Desirable
Definition:	Medication name.
Code:	Numeric entry.
NHTSA 2:	E18_01, E18_03 to E18_06, E18_09
Field Length:	Varied
Field Starting and Ending Position:	
Data Items:	
Refer to Appendix D	

Discussion and Justification: Intended to provide planners and educators with information about which drugs are administered in the field, by whom, and for what indications. It is likely that each responder agency will have its own list of drugs, which are carried by the response vehicles, and this list should be used for the data collection efforts of that agency. The Hawaii Department of Health, Division of EMS derived this list to track recognized the current state approved list of medications being used in the field. It is not expected that every agency will permit its providers to use or carry all these drugs. Agencies that administer medications not listed should mark those as ‘Other’.

Business Rules: *Records submitted with an Incident Disposition of “Treated, transported...”, ‘Care Transferred’, ‘Treat, transported... vehicle’, ‘Treated and ...’ may have a Medication Name entered.* If the incident is appropriate to not report this data element, then this field may be submitted left blank.

Technical Comments: This field is coded with the position of the crewmember, as identified in data elements 29-36, performing the procedure followed by the above data item code. Additional items are collected if appropriate for the medication. These additional items are time, quantity, dose, and route.

Other

This is to be coded for the medication when a crewmember administers a medication not listed in the data item list. Follow the same format listed above.

Not Applicable

This is to be coded if a patient was encountered and received no medications. This is not to be used if no patient was encountered or the incident does not require entry of a procedure or treatment. When used this should be the only code submitted in the field.

109. Vehicle Type

Name of Data Element:	Vehicle Type
Priority:	Mandatory
Definition:	Type of vehicle, which responded to incident.
Code:	Numeric entry.
NHTSA 2:	D06_03
Field Length:	2
Field Starting and Ending Position:	
<p>Data Items:</p> <p>01 Ground 02 Rotor craft 03 Fixed Wing 04 Marine</p>	

Discussion and Justification: Allows EMS managers and planners to break out EMS responses by the major categories of responding vehicles. While there are clearly numerous other possible vehicles, such as watercraft, skis, sleds, etc., the categories provided here are the major vehicle types, which will be of interest at regional and state levels.

For individual data systems in which there is more specific interest in other vehicles, additional categories may certainly be added. For purposes of exporting data to the HAWAII STATE ONLINE AMBULANCE REPORTING dataset, these additional categories should be collapsed into the category *Other*.

Business Rules: *All records submitted must have a Vehicle Type entered.* Records with missing or an invalid Vehicle Type will be rejected and marked as non-compliant by the system.

Appendixes

Appendix A EMS Agency List

Agency No	Agency Name	Agency No	Agency Name
	Oahu	02202	American Medical Response
01001	City and County of Honolulu		
01201	American Medical Response		Maui
01301	Pearl Harbor	04203	American Medical Response
01302	Hickam Fire		Air Services
	Kuai	01400	Hawaii Air
03204	American Medical Response	99001	M.A.S.T
	Hawaii		
02002	Hawaii County Fire		

Appendix B Health Facility List

ID	Name	ID	Name
	Oahu	93001	Wilcox Memorial Hospital
91001	Castle Memorial Hospital	93002	Kauai Veterans Memorial
91002	Kahuku Community Hospital		Maui
91003	Kaiser Foundation Hospital	94001	Maui Memorial Hospital
91004	Kapiolani-Children's Medical Center	94002	Hana Clinic
91005	Kuakini Medical Center		Molokai
91006	Queen's Medical Center	95001	Molokai General Hospital
91007	St. Francis Hospital		Lani
91008	Straub Clinic and Hospital	96001	Lanai Community Hospital
91009	Tripler Army Medical Center		Other Destinations
91010	Wahiawa General Hospital	99001	M.A.S.T Evacuation
91011	Waianae Comprehensive Health Center	99003	Air ambulance
91012	St. Francis West	99500	Law Enforcement/Police
91014	Pali Momi	99501	Long Term Care Facility
	Hawaii	99502	Residence
92001	Hilo Hospital	99503	Other Acute Care Medical Facility
92002	Honokaa Hospital	99504	Morgue/Funeral Home/Coroner
92003	Kau Hospital	99505	Clinic/Doctor's Office
92004	Kohala Hospital	99506	Other EMS Entity
92005	Kona Hospital	99999	Unspecified
	Kuai		

Appendix C

Hawaii City/County FIPS

FIPS ID	Name	FIPS ID	Name
	Adams County	02980	Argonne (Township of)
		05700	Beisigl (Township of)
	Out of State		
99080	Canada		
99027	Minnesota		
99030	Montana		
99046	South Dakota		
99999	Not listed		

Appendix D

Medication List

Index	Description
950	10% D5W
951	25% D5W
8030	2-PAM Chloride Auto Injector
4000	Acetaminophin
4002	Acetaminophin Elixar
4001	Acetaminophin Supp
6020	Activated Charcoal
100	Adenosine
4020	Afrin
200	Albuterol
201	Albuterol Inhaler metered
202	Albuterol Sulfate 2.5mg/3cc
300	Aminophylline
2010	Amiodarone (Cordarone)
7001	Amyl Nitrate
4010	ASA
400	Atropine
600	Bretylium
700	Calcium
4030	Cardizem
4040	Cordarone
4050	Cyanide Antidote
900	D50
901	D5W IV Solution
800	Dexameth
7004	Dexamethasone (Decadron)
1000	Diazepam (Valium)
7002	Digoxin (Lanoxin)
7003	Diltiazem (Cardizem)
1100	Diphenhydramine (Benadryl)
1200	Dobutamine
1300	Dopamine

Index	Description
1400	Epinephrine
1401	Epinephrine 1:10,000
1402	Epinephrine 1:1000
4060	Etomidate
4070	Fentanyl
2301	Fentanyl (Sublimaze)
4080	Flumazaniol
1500	Furosemide (Lasix)
1600	Glucagon
7005	Haloperidol (Haldol)
1700	Heparin
7006	Hydralazine (Apresoline)
1800	Hydrocortisone
4090	Inapsine (Droperidol)
6050	Insulin (Humulin, Novolin)
6010	Ipecac
5000	Ipratropium (Atrovent)
1900	Isoproterenol
7018	Labetalol
2000	Lidocaine
2005	Lidocaine Lubricant
2003	Lidocaine pre-mix bag
1051	Lorazepam (Ativan)
5010	Magnesium Sulfate
7008	Mannitol (Osmitol)
2100	Meperidine
2200	Metoprolenol (Alupent)
7007	Metoprolol (Lopressor)
1050	Midazolam (Versed)
2300	Morphine Sulfate
5020	Nalbuphine (Nubain)
2400	Naloxone (Narcan)

Index	Description
7009	Nifedipine (Procardia)
2502	Nitroglycerin Infusion
2600	Nitroglycerin Paste
2501	Nitroglycerin Spray
2500	Nitroglycerine Tabs
7050	Nitroprusside (Nipride)
2700	Nitrous Oxide
7010	Nitrous Oxide (Nitronox)
7011	Norepinephrine (Levophed)
6001	Normal Saline IV Solution
910	Oral Glucose
8000	Oxygen
2800	Oxytocin
7013	Pancuronium (Pavulon)
5030	Phenylphrine (Neo-Synephrine)
7017	Phenytoin (Dilantin)
2900	Procainamide
5040	Prochlorperazine (Compazine)
5050	Promethazine HCL (Phenergran)
5060	Proparacaine (Alcaine)
3101	Propranolol (Inderal)
5070	Racemic Epinephrine
7015	Rapacuronium (Rapion)
7060	Retavase

Index	Description
7016	Rocuronium (Zemuron)
6000	Saline
500	Sodium Bicarbonate
6002	Sodium Chloride Flush
7064	Sodium Pentothol
8020	Sodium Thiosulfate
5080	Solu-Medro (Methylprednisone Succinate)
6030	Sterile Water
7062	Streptokinase (Streptase)
7014	Succinylcholine (Anectine)
7063	Tenecteplase (TNKase)
3000	Terbutaline
5090	Thiamine
7061	Tissue Plasminogen Activator
7090	Total Parenteral Nutrition (TPN)
7012	Vecuronium (Norcuron)
3100	Verapamil
77	Other

Note: This list is currently listed and numbered alphabetically. This order may change with the addition or deletion of medications. Numbers will stay assigned as listed with new numbers issued for future additions.

Appendix E

Response Outcome

Index	Description
1	Transported
2	Care Transferred
3	Cancelled
4	Refused
6	No Patient Found
7	P.O.V.
8	Treatment/Not Transported
10	Dead at Scene/D.O.A.
11	No Treatment Required

Appendix F

Ethnicity

Index	Description
1	Caucasian
2	Black/African American
3	Hispanic or Latino
4	American Indian/Alaska Native
50	Other Asian
51	Other Pacific Islander
52	Chinese
53	Filipino
54	Japanese
55	Korean
7	Hawaiian
77	Other Race
99	Unknown

Appendix G

Dispatch Type

Index	Description
1	911 Response
2	Intercept/EMS Rendezvous
3	Support Services
4	Scheduled Transfer
5	Unscheduled Transfer

Appendix H

Primary Vehicle Role

Index	Description
1	Transport
2	Non-Transport
3	Rescue
4	Supervisor

Appendix I

Response and Transport Modes

Index	Description
1	Used Lights or Sirens
2	No Lights or Sirens
3	Upgrade
4	Downgrade

Appendix J

Patient Condition on Scene

Index	Description
3	Minor
7	Serious
8	Critical
9	Extremely Critical
10	Apparent DOA

Appendix K

Patient Condition at Facility

Index	Description
1	Improved
2	Stable
3	Unstable
4	Worse

Appendix L Destination Type

Index	Description
1	Home
2	Police/Jail
3	Medical Office/Clinic
4	Other EMS Agency (ground)
5	Other EMS Responder (air)
6	Hospital
7	Morgue
8	Extended Care
77	Other
88	Not Applicable

Appendix M

Destination Determination

Index	Description
1	Closest Facility
2	Patient's/Family Choice
3	Patient's Physician Choice
4	Managed Care
5	Law Enforcement Choice
6	Protocol
7	Specialty Resource Center
8	On-Line Medical Direction
9	Reroute
10	EMS Provider Choice
11	Trauma
77	Other
88	Not Applicable

Appendix N

Level of Care Provided

Index	Description
1	BLS
2	ALS
4	Paratransit
88	Non-Applicable

Appendix O

Medical Direction

Index	Description
1	Telephone
2	Cellular
3	Radio
4	Standing Orders
6	On-Scene
7	Written Orders
8	DNR
88	Not Applicable
98	None

Appendix P

Prior Aid

Index	Description
01	None
02	Bystander
03	Family
04	Other Citizen
05	Patient
06	Other EMS
07	Rapid Response Unit
08	Fixed Wing Service
09	Helicopter Service
10	Fire Dept.
11	Rescue Service
12	EMT
13	Fire Responder
14	Other Medical Professional
15	Physician
16	RN/LPN
17	Doctor's Office/Clinic
18	Hospital
19	Nursing Home
20	Other Medical Facility
21	Law Enforcement Responder
22	Security Responder
23	Lifeguard Responder
77	Other
88	Not Applicable
98	Unknown

Appendix Q

EKG

Index	Description
1	Normal Sinus
2	S-Tachy
3	S-Brady
4	Asystole
5	AV-Block
6	Afib
7	Aflutter
8	PEA
9	Junctional
10	Paced
11	PVC's
12	SVT
13	V-Tach
14	V-Fib
16	AED Shockable
17	AED Non-Shockable
77	Other
88	N/A

Appendix R

Provider of CPR

Index	Description
1	Bystander
2	EMS Responder
3	Family
4	Fire Responder
5	Law Enforcement Responder
6	Security Responder
7	Lifeguard Responder
88	Non-Applicable
99	None

Appendix S

Provider of First Defibrillation

Index	Description
1	Public Access Defibrillator
2	Ambulance AED
3	Ambulance Manual
4	Fire AED
5	Law Enforcement Responder
6	Security AED
7	Lifeguard AED
88	Non-Applicable
99	None

Appendix T Incident Type

Index	Description
7	Medical
2	Trauma
40	Hazmat
9	Public Service
13	Standby
18	Medical Monitoring
6	Patient Transfer
4	Fire

Appendix U

Cause of Injury

Index	Description
1	Aircraft Accident
33	All Terrain Vehicle (ATV)
34	Animal Involvement
2	Assault
3	Bicycle Accident
4	Bites
35	Blast / Explosion
5	Burns/Thermal/Chemical
41	Choking
7	Drowning
8	Drug Poisoning
9	Electrocution (Non-Lightning)
10	Excessive cold
11	Excessive Heat
12	Falls
26	Falls > 20 Feet
13	Firearm Injury
27	Hanging
14	Lightning
15	Machinery Accidents
28	MCC - Motorcycle Collision
16	Mechanical Suffocation
42	MPC – Moped Collision
17	MVC - Off Road
18	MVC - Public Road
40	Natural Environmental Factor

Index	Description
19	Pedestrian Traffic Accident
32	Poisoning - Alcohol
6	Poisoning - Chemical
8	Poisoning - Drug
20	Radiation Exposure
29	Railway Related Accident
36	Rollerblade
30	Self Inflicted
37	Skateboard
43	Skateboard
38	Skiing / Snowboarding
21	Smoke Inhalation
39	Snowmobile
22	Sports Injury
23	Stabbing
23	Stabbing /Cutting
45	Struck by Object
44	Struck by Person
31	Suicide
99	Unknown
24	Venomous Sting
47	Water Sports
25	Water Transport Accident
77	Other
88	Not Applicable

Appendix V

Intent of Injury

Index	Description
1	Unintentional (Accidental)
2	Intentional, Other (Assault)
3	Intentional, Self
99	Unknown
88	Not Applicable

Appendix W

Dispatch Complaint

Index	Description
78900	Abdominal Pain
99530	Allergic Reaction
999010	Animal bites/sting/envenomation - other
2	Assault
72450	Back Pain
999066	Burns
42750	Cardiac Arrest
42800	Cardiac Symptoms
999017	Chest pain (non-traumatic)
93310	Choking
986	CO Poisoning
999020	Cold exposure - w/ symptoms
999022	Convulsions/seizures
25090	Diabetes
999015	Difficulty breathing
99410	Drowning
999069	Electrocution
999071	Eye injuries
12	Fall Victim

Index	Description
78400	Headache
999029	Heat exposure - w/ symptoms
45900	Hemorrhage
78060	Hyperthermia / Fever
41	Industrial Accident
999091	Interfacility
86122	Laceration
1400	OB/GYN
999042	Poisons ingested, injected
29890	Psychiatric Disorder
999051	Sick Person - No other symptoms
78210	Skin Rash / Blisters with Unknown Origin
3	Stab/Gunshot Wound
43600	Stroke
18	Traffic Accident
95990	Trauma
999053	Unconscious, fainting, syncope
77	Other
99	Unknown / Not Obtainable

Appendix X

Preexisting Conditions

Index	Description
49390	Asthma
23990	Cancer
58500	Chronic Renal Failure
51881	Chronic Respiratory Failure
999022	Convulsions/seizures
49320	COPD
29000	Dementia
25090	Diabetes
49280	Emphysema
49090	Heart Disease
40190	Hypertension
27930	Immunosuppressed
53310	Pacemaker/AICD
65990	Pregnancy
31290	Psychiatric Problem
999047	Psychiatric/Behavioral - abnormal
78030	Seizures
76740	Spinal Cord Injury
43600	Stroke/CVA
43500	T.I.A / Transient Cerebral Ischemia
12	Tracheostomy
85400	Traumatic Brain Injury
01190	Tuberculosis
77	Other
88	Not Stated
99	Unknown / Not Obtainable

Appendix Y

Signs and Symptoms and Provider Impression

Index	Description	Index	Description
78900	Abdominal Pain	999902	BLS Medical Condition
999001	Abdominal pain w/ other symptoms	999078	BLS Monitoring - Airway control/positioning enroute
999003	Abnormal Cardiac Rhythm	999077	BLS Monitoring - Suction required enroute
999004	Abnormal skin signs	999079	BLS Monitoring - Third party assistance
999005	Abnormal vital signs w/ symptoms	999066	Burns
999006	Abnormal vital signs w/o symptoms	94900	Burns
51980	Airway Obstruction	999067	Burns - Minor BSA
999044	Alcohol intoxication, drug overdose - ALS	23990	Cancer
999043	Alcohol Intoxication, drug overdose - BLS	42750	Cardiac Arrest
99530	Allergic Reaction	999016	Cardiac arrest - resuscitation in progress
999007	Allergic Reaction - Life Threatening	42790	Cardiac Dysrhythmia
999008	Allergic reaction - other	78500	Cardiac Rhythm Disturbance
999901	ALS Medical Condition	42800	Cardiac Symptoms
999074	ALS Monitoring - Advanced airway management	999026	Cardiac Symptoms other than chest pain
999076	ALS Monitoring - Chemical restraint	999027	Cardiac Symptoms other than chest pain - atypical
999075	ALS Monitoring - IV med required enroute	78550	Cardiogenic Shock
999073	ALS, monitoring required	999017	Chest pain (non-traumatic)
999021	Altered level of consciousness	999017	Chest Pain/Discomfort
999009	Animal bites/sting - Life or Limb Threatening	78650	Chest Pains
999010	Animal bites/sting/envenomation - other	93310	Choking
2	Assault	999018	Choking episode
49390	Asthma	58500	Chronic Renal Failure
72450	Back Pain	51881	Chronic Respiratory Failure
999040	Back pain - non-traumatic suspect cardiac/vascular	986	CO Poisoning
999041	Back pain - non-traumatic, neurological	999019	Cold exposure - life or limb threatening
999072	Bed Confined	999020	Cold exposure - w/ symptoms
31290	Behavioral Problem / Psychiatric Disorder	78001	Coma
999013	Blood Glucose - abnormal	00190	Communicable Disease
57810	Bloody Stools	42810	Congestive Heart Failure
		999022	Convulsions/seizures

Index	Description	Index	Description
49320	COPD	999030	Hemorrhage - Severe
46500	Cough, pneumonia, URI	40190	Hypertension
79820	Death - Unknown cause	78060	Hyperthermia / Fever
82900	Deformity	45890	Hypotension
27650	Dehydration	99160	Hypothermia
29000	Dementia	78601	Hypoventilation
25090	Diabetes	27930	Immunosuppressed
04510	Dialysis	41	Industrial Accident
78080	Diaphoresis	999032	Infectious diseases - isolation procedure
78791	Diarrhea	13690	Infectious Process
999015	Difficulty breathing	94790	Inhalation Injury / Burns
83000	Dislocation	999091	Interfacility
78040	Dizziness	86122	Laceration
99410	Drowning	999068	Lightning
78810	Dysuria	999056	Major Trauma
38870	Ear Pain	999083	Medical conditions - contraindicates - Pt Safety
999069	Electrocution	999081	Medical conditions - contraindicates other transpt
99480	Electrocution	999084	Medical conditions - contraindicates Pt Safety
999091	EMTALA-certified interfacility transfer	999088	Medical conditions - Special Handling 1 person
999071	Eye injuries	999085	Medical conditions - Special Handling Isolation
37991	Eye Pain	999087	Medical conditions - Special Handling Ortho device
999023	Eye symptoms (non-traumatic)	999090	Medical conditions - Special Handling Position
12	Fall Victim	999086	Medical conditions - Special Handling Pt Size
82900	Fracture - Close	999089	Medical conditions - Special Handling Severe pain
82910	Fracture - Open	999035	Medical device failure
53690	GI Problems	999034	Medical Device Failure - Life threatening
18990	GU Problems	999055	Medical/legal
92290	Gunshot Wound(s)	78701	Nausea
999033	Hazmat exposure		
78400	Headache		
49090	Heart Disease		
99250	Heat Exhaustion		
999028	Heat exposure - life threatening		
999029	Heat exposure - w/ symptoms		
45900	Hemorrhage		
999031	Hemorrhage - Life Threatening		

Index	Description	Index	Description
999070	Near Drowning	999048	Psychiatric/Behavioral - Threat to self/others
999054	Near syncope, weakness or dizziness	51400	Pulmonary Edema
999036	Neurologic Distress	96600	Puncture/Stab
999024	Non-traumatic headache - w/ neuro distress	78609	Respiratory
999025	Non-traumatic Headache - w/o neuro symptoms	79910	Respiratory Arrest
88	Not Stated	999014	Respiratory Arrest
1400	OB/GYN	51881	Respiratory Failure
77	Other	78030	Seizures
999062	Other Trauma - Amputation - all other	9990	Sepsis
999061	Other Trauma - Amputation - digits	3800	Sepsis
999058	Other Trauma - Major Bleeding	999092	Service not available at originating facility
999057	Other Trauma - Monitor/Maintain Airway	999093	Service not covered
999065	Other Trauma - NOS	999011	Sexual assault w/ injuries
999060	Other Trauma - penetrating extremity	999012	Sexual assault w/o injuries
999064	Other Trauma - Severe pain require pharmacological	78605	Shortness of Breath
999059	Other Trauma - susp fracture/dislocation	999050	Sick Person - Fever w/o symptoms
999063	Other Trauma - Susp head, chest, or abdominal	999049	Sick Person - Fever w/symptoms
78090	Pain	999052	Sick Person - N/V, diarrhea, incapacitated
78421	Pain - Neck	999051	Sick Person - No other symptoms
999038	Pain - severe - unable to ambulate or sit BLS	78210	Skin Rash / Blisters with Unknown Origin
999039	Pain - severe -ALS	98790	Smoke Inhalation
999037	Pain, acute and severe not otherwise specified	999080	Specialty care monitoring
78510	Palpitations	84890	Sprain/Strain
34490	Paralysis	3	Stab/Gunshot Wound
78270	Petechia, non-traumatic ecchymosis	98950	Stings / Venomous Bites
999042	Poisons ingested, injected	43600	Stroke
999045	Post Op procedure complications	72981	Swelling of limb
999046	Pregnancy complication/childbirth/labor	78020	Syncope
65990	Pregnancy/Childbirth	43500	T.I.A / Transient Cerebral Ischemia
29890	Psychiatric Disorder	18	Traffic Accident
999047	Psychiatric/Behavioral - abnormal	999900	Transport for Exam
		95990	Trauma
		999053	Unconscious, fainting, syncope
		99	Unknown / Not Obtainable
		78009	Unresponsive / Altered Level of

Index	Description	Index	Description
	Consciousness	78703	Vomiting
46500	Upper Respiratory Infection	78070	Weakness
62380	Vaginal Bleeding		

Appendix Z

Factors Affecting

Index	Description
2	Adverse Road Conditions
1	Adverse Weather
6	Biological Hazards
10	Crowd Control
11	Delay in EMS Access
8	Extrication > 20 Minutes
9	Hazardous Materials
7	Language Barrier
13	Mass Casualty Incident
14	Specialized Rescue
5	Uncooperative Patient
4	Unsafe Scene
3	Vehicle Problems
88	Not Applicable

Appendix AA

Incident Location

Index	Description
9	Bar/Restaurant
15	Clinic/ Dr's Office
22	Correctional Facility
17	EMS Rendezvous
16	Extended Care Facility
13	Farm/Ranch
14	Hospital/Acute Care Facility
8	Hotel/Motel
10	Industrial
23	Mental Health Facility
11	Mine/Quarry
88	Not Applicable
26	Ocean
25	Off Road
12	Office/Business
3	Other Traffic Way
77	Other/Unspecified
4	Public Place
5	Recreation Area
1	Residence
18	School/College
24	Specialty Care Facility
2	Traffic Way 55+ mph
6	Waterway
7	Wilderness

Appendix BB

Safety Devices

Index	Description
6	Airbag
9	Airbag - Not Deployed
5	Child Safety Seat
8	Eye Protection
10	Harness
7	Helmet
3	Lap Belt Only
4	Lap/Shoulder
1	Not Available/Used
13	Personal Flotation Device
11	Protective Clothing/Pads
12	Respiratory Protection
2	Shoulder Belt Only
14	Smoke/Co Detector
88	Not Applicable
99	Unknown

Appendix CC

Motor Vehicle Impact

Index	Description
1	Head-on
2	Lateral
3	Ejection
4	Rear
5	Rollover
6	Rotation
7	Intrusion
77	Not Listed
88	Not Applicable
99	Unknown

Appendix DD

Injury Indicators

Index	Description
7	20+ Speed Change
2	Burn 10%/Face/Airway
12	Death Same Vehicle
8	Deformity 20+ Inches
11	Ejection
16	Extrication 15+ Minutes
3	Extrication 20+ Minutes
4	Fall 20+ Feet
1	Flail Chest
9	Intrusion 12+ Inches
5	Limb Paralysis
15	Motorcycle 20+ mph/sep.
13	Pedestrian vs. MV 5+ mph
14	Pedestrian Thrown/Run Over
10	Rollover
6	Speed 40+ mph
77	Other

Appendix EE

Position in Vehicle

Index	Description
1	Driver
10	Front Middle Passenger
11	Front Right Passenger
12	Second Left Passenger
13	Second Middle Passenger
14	Second Right Passenger
15	Third Left Passenger
16	Third Middle Passenger
17	Third Right Passenger
18	Fourth Left Passenger
19	Fourth Middle Passenger
2	Front Row Passenger
20	Fourth Right Passenger
3	Second Row Passenger
4	Third Row Passenger
5	Fourth Row Passenger
6	Truck Bed
66	Cargo
77	Other Passenger
88	Not Applicable
99	Unknown

Appendix FF

Procedures and Treatments

Index	Description
1301	Abdominal Thrusts
1620	Assisted Ventilations
1805	Auto Defib.
1302	Back Blows
1603	Bag Valve Mask
2101	Bandage
2110	Bleeding Controlled
1203	Blood Draw
1204	Blood Glucose Level Check
1210	Blood Products
2410	Board - Long
2415	Board - Short
2102	Burn Care
1660	Capnography
502	Cardiovert
110	Central Vein IV
2402	Cervical Collar
601	Chest Decompression
2104	Cold Pack
2000	CPR
301	Cricothyrotomy
2403	C-Spine Imm. Dev.
2401	C-Spine Stabilize
501	Defib
500	Defib/Cardiovert
2105	Delivery (OB)
1602	Demand Valve
205	EGTA/EOA/PTL/CombiTube
400	EKG
401	EKG - 12 Lead
201	Endo Trach. Int.
202	EOA

Index	Description
4000	Extrication
2400	Full Spinal Immobilization
2103	Hot Pack
102	Intraosseous IV
205	Intubation - Multi-lumen
202	Intubation - Nasotracheal
201	Intubation - Orotracheal
2106	Ipecac
2107	Irrigation
109	IV - Ext Jugular
101	IV - Peripheral
103	IV - Saline Lock
1303	Manual
1901	MAST Applied
1902	MAST Inflated
1401	Nasopharyngeal
601	Needle Thorac.
1202	NG Tube
88	Not Applicable
2108	Oral Glucose
1402	Oropharyngeal
77	Other
1610	Oxygen 10-15 lpm
1609	Oxygen 1-9 lpm
1611	Oxygen Administered
550	Pacing
1750	Patient Restrained
1601	Pocket Mask
1650	Pulse Oximetry
1701	Splint - Extremity
1710	Splint - Traction
1500	Suctioning

Index	Description
302	Surgical Airway
2120	Tourniquet

Index	Description
1201	Urinary Cath.
220	Ventilator