National Association of State EMS Officials

# Extended Definition Document NEMSIS / NHTSA 2.2.1 Data Dictionary

# National Association of State EMS Officials EMS Data Managers Council



# Introduction

A definitive call for the standardization of EMS data has existed since the 1970s. A number of key publications and projects, completed in the early to mid 1990s, culminated with the call for, and funding, of the National Emergency Medical Services Information System (NEMSIS).<sup>1</sup> The two overarching purposes of the NEMSIS project included the standardization of EMS data collection among all EMS agencies operating in the United States and aggregating these standardized data into a National EMS Registry to characterize and improve the patient care offered by EMS systems. To accomplish this task, the National Highway Traffic Safety Administration (NHTSA) partnered with the National Association of State EMS Officials (NASEMSO) to bring together a myriad of veterans in the field of EMS to define the second version of the NHTSA Uniform EMS Data Set (NEMSIS 2.2.1). From the outset, it was determined that it was a more important preliminary step to define the dataset than to reach consensus on definitions associated with field values in the dataset.

This document represents an effort to begin the process of defining field values contained in the NEMSIS 2.2.1 dataset. The EMS Data Managers Council with in NASEMSO took on the challenge of defining filed values through a process of consensus, convening several face-to-face discussions and conference calls. The hope of the Council is that this document will continue to promote the development, standardization, and improvement of state and national EMS data systems. For more information regarding NASEMSO and the EMS Data Managers Council, visit www.nasemso.org. Additional information regarding the NEMSIS project can be found at: www.nemsis.org.

#### References:

Mears, G., Dawson, D., & Ornato, J. (2002). Emergency Medical Services Information Systems and a Future EMS National Database. *Prehospital Emergency Care, January/March 2002, Volume 6, Number 1, 123-30.* 

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# NASEMSO Data Managers Council National Element and Value Definition Project

# E01 01 Patient Care Report Number

National Element: Yes, Single Entry

## Definition

The unique number automatically assigned by the EMS agency for each patient care report (PCR). This is a unique number to the EMS agency.

Although the patient care report number is unique to a given agency, it is probably not unique when compared to other agencies within a state or the nation. The NEMSIS Technical Assistance Center uses this variable (and EMS Agency Number [E02-01]) to validate that the same PCR has not been submitted by the state to the National EMS Database multiple times.

# E02 04 Type of Service Requested

National Element: Yes, Single Entry

## Definition

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

## **Field Values:**

- <u>30</u> 911 Response (Scene)
- 35 Intercept
- <u>40</u> Inter-facility Transfer
- 45 Medical Transport
- 50 Mutual Aid
- 55 Standby

#### **Extended Definitions:**

**911 Response (Scene)** - Emergent or immediate response to an incident location, regardless of method of notification (for example, 911, direct dial, walk-in, or flagging down)

*Intercept* – When one EMS Provider meets a transporting EMS unit with the intent of receiving a patient or providing a higher level of care

*Inter-facility Transfer* – Transfer of a patient from one hospital to another hospital

*Medical Transport* – Transports that are not between hospitals or that do not require an immediate response

*Mutual Aid* – Request from another ambulance service to provide emergent or immediate response to an incident location

**Standby** – Initial request for service was not tied to a patient but to a situation where a person may become ill or injured

# E02 05 Primary Role of the Unit

National Element: Yes, Single Entry

## Definition

The primary role of the EMS service which was requested for this specific EMS incident.

#### **Field Values:**

<u>60</u>	Non-Transport
<u>65</u>	Rescue
<u>70</u>	Supervisor
<u>75</u>	Transport

## **Extended Definitions:**

*Non-Transport* - The unit's role in this incident is to provide EMS care but is not intended to provide transport

*Rescue* - The unit's role in this incident is to provide rescue services

Supervisor - The unit's role in this incident is as a supervisor

*Transport* - The unit's role in this incident is to provide transportation of the patient even if no transport happened

# E02 06 Type of Dispatch Delay

National Element: Yes, Multiple Entry

## Definition

The dispatch delays, if any, associated with the dispatch of the EMS unit to the patient encounter.

## **Field Values:**

- -25 Not Applicable
- -10 Not Known
- -5 Not Available
- 80 Caller (Uncooperative)
- 85 High Call Volume
- 90 Language Barrier
- <u>95</u> Location (Inability to Obtain)
- 100 No Units Available
- <u>105</u> None
- 110 Other
- 115 Scene Safety (Not Secure for EMS)
- <u>120</u> Technical Failure (Computer, Phone etc.)

#### **Extended Definitions:**

Caller Uncooperative – Caller uncooperative (i.e. does not answer questions)

*High Call Volume* – High call volume in the dispatch center caused delayed notification of the EMS unit

*Language Barrier* – Difficulty communicating with the caller because of language problems

Location (Inability to Obtain) – Inability to determine where to dispatch the EMS unit

No Units Available - Lack of available EMS units

None – Use if the dispatch of the EMS unit was not delayed

Other - Dispatch was delayed for reasons not listed here

**Scene Safety (Not Secure for EMS)** – Notification of the EMS unit was delayed in dispatch because the scene was unsafe

*Technical Failure (Computer, Phone, etc.)* – Failure of phones, computers, radios, or other technical failure

# E02 07 Type of Response Delay

National Element: Yes, Multiple Entry

# Definition

The response delays, if any, of the unit associated with the patient encounter.

## Field Values:

<u>125</u>	Crowd
<u>130</u>	Directions
<u>135</u>	Distance
<u>140</u>	Diversion
<u>145</u>	HazMat
<u>150</u>	None
<u>155</u>	Other
<u>160</u>	Safety
<u>165</u>	Staff Delay
<u>170</u>	Traffic
<u>175</u>	Vehicle Crash
<u>180</u>	Vehicle Failure
<u>185</u>	Weather

## **Extended Definitions:**

Crowd – The presence of sufficent numbers of people to impair normal response
Directions – Bad or inadequate directions, or if the unit got lost en route
Distance – A long distance to the scene from the unit's location when dispatched
Diversion – Diversion of the initially dispatched unit to another incident
HazMat – Hazardous Material danger
None – Use if the arrival of the EMS unit at the scene was not delayed
Other – Other reasons not listed here

Safety – Scene safety issues not related to crowds or HazMat

Staff Delay – Issues arising with crew members' ability to respond

*Traffic* – The sufficent amount of traffic to impair normal response

Vehicle Crash – EMS unit was involved in a crash

*Vehicle Failure* – EMS unit mechanical reasons (i.e., ambulance did not start, flat tire, etc.)

Weather - Adverse weather conditions impairing normal response

# E02 08 Type of Scene Delay

National Element: Yes, Multiple Entry

# Definition

The scene delays, if any, of the unit associated with the patient encounter.

#### Field Values:

<u>190</u>	Crowd
<u>195</u>	Directions
<u>200</u>	Distance
<u>205</u>	Diversion
<u>210</u>	Extrication >20 min.
<u>215</u>	HazMat
<u>220</u>	Language Barrier
<u>225</u>	None
<u>230</u>	Other
<u>235</u>	Safety
<u>240</u>	Staff Delay
<u>245</u>	Traffic
<u>250</u>	Vehicle Crash
<u>255</u>	Vehicle Failure
<u>260</u>	Weather

## **Extended Definitions:**

**Crowd** – The presence of sufficent numbers of people to cause the inappropriate extention of time on scene.

**Directions** – Bad or inadequate directions resulting in the crew having difficulty finding the patient

**Distance** – Distance between the ambulance and the patient

**Diversion** – Need to find receiving hospital not on diversion before departing the scene

Extrication > 20 Min. – Extrication of patient that took longer than 20 minutes

HazMat – Hazardous Material danger

**Language Barrier** – Difficulty communicating with the patient or bystanders because of language problems

None – Use if the total scene time was not extended

Other - Any other factor not described here

Safety – Scene safety issues not related to crowds or HazMat

**Staff Delay** – Total scene time issues arising with crew members

**Traffic** – The presence of a sufficent amount of traffic that causes an inappropriate extension of time on scene

Vehicle Crash – EMS unit was involved in a crash

**Vehicle Failure** – EMS unit had mechanical reasons (i.e., ambulance did not start, flat tire, etc.)

**Weather** – Adverse weather conditions that cause the inappropriate extension of time on scene

# E02 09 Type of Transport Delay

National Element: Yes, Multiple Entry

#### Definition

The transport delays, if any, of the unit associated with the patient encounter.

#### Field Values:

270Directions275Distance280Diversion285HazMat290None295Other300Safety	
280Diversion285HazMat290None295Other	
285HazMat290None295Other	
290         None           295         Other	
295 Other	
300 Safety	
305 Staff Delay	
310 Traffic	
315 Vehicle Crash	
320 Vehicle Failur	е
325 Weather	

#### **Extended Definitions:**

 $\ensuremath{\textit{Crowd}}\xspace$  – The presence of sufficent numbers of people to inappropriately extend transport time

Directions - Bad or inadequate directions, or if the unit got lost en route

Distance – A long distance to the destination from the scene

**Diversion** – Diversion of the transporting unit to a different receiving hospital

HazMat - Hazardous Material danger

None – Use if the arrival of the EMS unit at the destination was not delayed

Other - Other reasons not listed here

Safety – Transport safety issues not related to crowds or HazMat

Staff Delay - Issues arising with crew members' ability to transport

*Traffic* – The presence of a sufficent amount of traffic to inappropriately extend transport time

Vehicle Crash - EMS unit was involved in a crash

*Vehicle Failure* – EMS unit mechanical reasons (i.e., ambulance did not start, flat tire, etc.)

*Weather* – Adverse weather that inappropriately extend transport time

# E02 10 Type of Turn-Around Delay

National Element: Yes, Multiple Entry

## Definition

The turn-around delays, if any, associated with the EMS unit associated with the patient encounter.

## **Field Values:**

<u>330</u>	Clean-up	

- <u>335</u> Decontamination
- <u>340</u> Documentation
- 345ED Overcrowding
- 350 Equipment Failure
- <u>355</u> Equipment Replenishment
- <u>360</u> None
- 365 Other
- 370 Staff Delay
- 375 Vehicle Failure

## **Extended Definitions:**

Clean-up - EMS unit clean up takes longer than normal

Decontamination – EMS unit decontamination

Documentation - Patient care documentation takes longer than normal

ED Over-crowding – Over-crowding in the hospital emergency department

Equipment Failure – Equipment Failure with the exception of the EMS unit

**Equipment Replacement** – Re-supply of the EMS unit takes longer than normal

None - There were no delays in returning to service

Other – Any other reason not listed here

Staff Delay - Issues arising with crew members

*Vehicle Failure* – EMS unit mechanical reasons (i.e., ambulance did not start, flat tire, etc.)

# E03 01 Complaint Reported by Dispatch

National Element: Yes, Single Entry

#### Definition

The complaint dispatch reported to the responding unit.

Values do not need further definition.

# E03 02 EMD Performed

National Element: Yes, Single Entry

#### Definition

Indication of whether EMD was performed for this EMS event.

#### Field Values:

- 0No570Yes, With Pre-Arrival Instructions
- 575 Yes, Without Pre-Arrival Instructions

#### **Extended Definitions:**

**No** – EMD was not performed for this incident.

**Yes, with Pre-Arrival Instructions** – EMD was performed for this incident and the caller was given instructions on how to provide treatment (CPR, bleeding control, etc.) for the patient.

**Yes, without Pre-Arrival Instructions** – EMD was performed for this incident but no treatment instructions were given.

**Common Null Value – Not Available** – Used when EMD is not available in the provider's primary service area. (If your dispatchers never provide EMD, this will always be the correct value).

**Common Null Value – Not Known** – Used when the EMS provider's Do Not Know if EMD service was provided for this incident.

# E06 12 Race

National Element: Yes, Single Entry

## Definition

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

#### Field Values:

- 660 American Indian or Alaska Native
- 665 Asian
- 670 Black or African American
- 675 Native Hawaiian or Other Pacific Islander
- 680 White
- 685 Other Race

#### **Extended Definitions:**

*White* - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa. It includes people who indicate their race as "White" or indicate heritage such as Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish.

**Black or African American** - A person having origins in any of the Black racial groups of Africa. It includes people who indicate their race as "Black, African Am., or Negro,"or indicate heritage such as African American, Afro American, Kenyan, Nigerian, or Haitian.

**American Indian and Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.

**Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. It includes "Asian Indian," "Chinese," "Filipino," "Korean," "Japanese," "Vietnamese," and "Other Asian."

*Native Hawaiian or Other Pacific Islander* - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other

**Pacific Islands** - It includes people who indicate their race as "Native Hawaiian," "Guamanian or Chamorro," "Samoan," and "Other Pacific Islander."

**Other race** - Includes all other responses not included in the "White", "Black or African American", "American Indian and Alaska Native", "Asian" and "Native Hawaiian or Other Pacific Islander" race categories described above.

# E06 13 Ethnicity

National Element: Yes, Single Entry

## Definition

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

#### **Field Values:**

690Hispanic or Latino695Not Hispanic or Latino

#### **Extended Definitions:**

*Hispanic or Latino* - A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race.

*Not Hispanic or Latino* - A person not of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race.

# E06 14 Age

National Element: Yes, Single Entry

## Definition

The patient's age (either calculated from date of birth or best approximation).

#### **Field Values:**

10001 Relevant Value for Data Element Patient Care

#### **Extended Definitions:**

Calculated from Date of Birth; if DOB not available, ask age; if not possible approximate age.

# E07 01 Primary Method of Payment

National Element: Yes, Single Entry

## Definition

The primary method of payment or type of insurance associated with this EMS encounter.

#### Field Values:

- 720 Insurance
- 725 Medicaid
- 730 Medicare
- 735 Not Billed (for any reason)
- 740 Other Government
- 745 Self Pay
- 750 Workers Compensation

#### **Extended Definitions:**

**Note** - This element is not about what insurance the patient has, but rather how your agency will be reimbursed for this incident.

**Commercial Insurance** - Use this value if this incident will be billed to a commercial insurance plan such as health insurance or auto insurance that is paid for privately by the patient, the patient's family, or the patient's employer (excluding Worker's Compensation).

*Medicaid* - Use this value if this incident will be billed to Medicaid, the state/federal program that pays for medical assistance for individuals and families with low incomes and resources.

*Medicare* - Use this value if this incident will be billed to Medicare, the federal health insurance program for people 65 and older, or persons under 65 with certain disabilities

**Not Billed (for any reason)** - Use this value if the patient will not be billed at all for this incident

**Other Government (not Medicare, Medicaid, or Worker's Comp)** - Use this value if this incident will be billed to a government insurance policy besides Medicare, Medicaid, or Worker's Compensation

**Self Pay / Patient Has No Insurance** - Use this value if this incident will be billed to the patient directly, or if the patient has no insurance policy that will pay for this incident

*Worker's Compensation* - Use this value if this incident will be billed to Worker's Compensation

*Not Applicable* - (e.g.; agency never bills for service or if the call is non-billable)

**Not Available** - Use this value if this incident will be billed but the type of insurance is not known

# E07 34 CMS Service Level

National Element: Yes, Single Entry

## Definition

The CMS service level for this EMS encounter.

## Field Values:

<u>990</u>	BLS
<u>995</u>	BLS, Emergency
<u>1000</u>	ALS, Level 1
<u>1005</u>	ALS, Level 1 Emergency
<u>1010</u>	ALS, Level 2
<u>1015</u>	Paramedic Intercept
<u>1020</u>	Specialty Care Transport
<u>1025</u>	Fixed Wind (Airplane)
<u>1030</u>	Rotary Wing (Helicopter)

## **Extended Definitions:**

**Basic Life Support (BLS)** - Basic life support (BLS) is transportation by ground ambulance vehicle and the provision of medically necessary supplies and services, including BLS ambulance services as defined by the State. The ambulance must be staffed by an individual who is qualified in accordance with State and local laws as an emergency medical technician-basic (EMT-Basic). These laws may vary from State to State or within a State. For example, only in some jurisdictions is an EMT-Basic permitted to operate limited equipment onboard the vehicle, assist more qualified personnel in performing assessments and interventions, and establish a peripheral intravenous (IV) line.

**Basic Life Support (BLS) - Emergency** - When medically necessary, the provision of BLS services, as specified above, in the context of an emergency response. An emergency response is one that, at the time the ambulance provider or supplier is called, it responds immediately. An immediate response is one in which the ambulance provider/supplier begins as quickly as possible to take the steps necessary to respond to the call.

Advanced Life Support, Level 1 (ALS1) - Advanced life support, level 1 (ALS1) is the transportation by ground ambulance vehicle and the provision of medically

necessary supplies and services including the provision of an ALS assessment or at least one ALS intervention. An advanced life support (ALS) assessment is an assessment performed by an ALS crew as part of an emergency response that was necessary because the patient's reported condition at the time of dispatch was such that only an ALS crew was qualified to perform the assessment. An ALS assessment does not necessarily result in a determination that the patient requires an ALS level of service. An advanced life support (ALS) intervention is a procedure that is in accordance with State and local laws, required to be done by an emergency medical technician-intermediate (EMT-Intermediate) or EMT-Paramedic.

Advanced Life Support, Level 1 (ALS1) - Emergency - When medically necessary, the provision of ALS1 services, as specified above, in the context of an emergency response. An emergency response is one that, at the time the ambulance provider or supplier is called, it responds immediately. An immediate response is one in which the ambulance provider/supplier begins as quickly as possible to take the steps necessary to respond to the call.

Advanced Life Support, Level 2 (ALS2) - Advanced life support, level 2 (ALS2) is the transportation by ground ambulance vehicle and the provision of medically necessary supplies and services including (1) at least three separate administrations of one or more medications by intravenous push/bolus or by continuous infusion (excluding crystalloid fluids) or (2) ground ambulance transport, medically necessary supplies and services, and the provision of at ALS2 procedures least one of the listed below: a. Manual defibrillation/cardioversion: b. Endotracheal intubation: c. Central venous line: d. Cardiac pacing; e. Chest decompression; f. Surgical airway; or g. Intraosseous line.

Paramedic Intercept (PI) - Paramedic Intercept services are ALS services provided by an entity that does not provide the ambulance transport. This type of service is most often provided for an emergency ambulance transport in which a local volunteer ambulance that can provide only basic life support (BLS) level of service is dispatched to transport a patient. If the patient needs ALS services such as EKG monitoring, chest decompression, or I.V. therapy, another entity dispatches a paramedic to meet the BLS ambulance at the scene or once the ambulance is on the way to the hospital. The ALS paramedics then provide services to the patient. This tiered approach to life saving is cost effective in many areas because most volunteer ambulances do not charge for their services and one paramedic service can cover many communities. Prior to March 1, 1999, Medicare payment could be made for these services, but only when the claim was submitted by the entity that actually furnished the ambulance transport. Payment could not be made directly to the intercept service provider. In those areas where State laws prohibit volunteer ambulances from billing Medicare and other health insurance, the intercept service could not receive payment for treating a Medicare beneficiary and was forced to bill the beneficiary for the entire service. Paramedic intercept services furnished on or after March 1, 1999,

may be payable separate from the ambulance transport, subject to the requirements specified below. The intercept service(s) is:

- Furnished in a rural area;
- Furnished under a contract with one or more volunteer ambulance services; and,

• Medically necessary based on the condition of the beneficiary receiving the ambulance service.

In addition, the volunteer ambulance service involved must:

- Meet the program's certification requirements for furnishing ambulance services;
- Furnish services only at the BLS level at the time of the intercept; and,
- Be prohibited by State law from billing anyone for any service.

Finally, the entity furnishing the ALS paramedic intercept service must:

• Meet the program's certification requirements for furnishing ALS services, and,

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

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

Specialty Care Transport (SCT) - Specialty care transport (SCT) is the interfacility transportation of a critically injured or ill beneficiary by a ground ambulance vehicle, including the provision of medically necessary supplies and services, at a level of service beyond the scope of the EMT-Paramedic. SCT is necessary when a beneficiary's condition requires ongoing care that must be furnished by one or more health professionals in an appropriate specialty area, for example, emergency or critical care nursing, emergency medicine, respiratory care, cardiovascular care, or a paramedic with additional training. The EMT-Paramedic level of care is set by each State. Care above that level that is medically necessary and that is furnished at a level of service above the EMT-Paramedic level of care is considered SCT. That is to say, if EMT-Paramedics without specialty care certification or qualification - are permitted to furnish a given service in a State, then that service does not qualify for SCT. The phrase "EMT-Paramedic with additional training" recognizes that a State may permit a person who is not only certified as an EMT-Paramedic, but who also has successfully completed additional education as determined by the State in furnishing higher level medical services required by critically ill or critically injured patients, to furnish a level of service that otherwise would require a health professional in an appropriate specialty care area (for example, a nurse) to provide. "Additional training" means the specific additional training that a State requires a paramedic to complete in order to qualify to furnish specialty care to a critically ill or injured patient during an SCT.

*Fixed Wing (FW) Air Ambulance* - Fixed Wing air ambulance is the transportation by a fixed wing aircraft that is certified by the Federal Aviation Administration (FAA) as a fixed wing air ambulance and the provision of medically necessary services and supplies.

**Rotary Wing (RW) Air Ambulance** - Rotor Wing air ambulance is the transportation by a helicopter that is certified by the FAA as a rotary wing ambulance, including the provision of medically necessary supplies and services.

# E08 06 Mass Casualty Incident

National Element: Yes, Single Entry

#### Definition

Indicator if this event would be considered a mass casualty incident (overwhelmed existing EMS resources).

#### Field Values:

<u>0</u>	No
1	Yes

#### **Extended Definitions:**

**Yes** - Indicator if this event would be considered a Mass Casualty Incident (anything overwhelming existing EMS resources).

A mass casualty incident is defined as an event which generates more patients at one time than locally available resources can manage using routine procedures or resulting in a number of victims large enough to disrupt the normal course of emergency and health care services and would require additional non-routine assistance.

# E08 07 Incident Location Type

National Element: Yes, Single Entry

## Definition

The kind of location where the incident happened.

#### **Field Values:**

- <u>1135</u> Home/Residence
- 1140 Farm
- <u>1145</u> Mine or Quarry
- <u>1150</u> Industrial Place and Premises
- 1155 Place of Recreation or Sport
- 1160 Street or Highway
- <u>1165</u> Public Building (schools, gov. offices)
- <u>1170</u> Trade or service (business, bars, restaurants, etc)
- <u>1175</u> Health Care Facility (clinic, hospital, nursing home)
- <u>1180</u> Residential Institution (Nursing Home, jail/prison)
- 1185 Lake, River, Ocean
- 1190 Other Location

#### **Extended Definitions:**

*Home / Residence* - Any home, apartment, or residence (not just the patient's home). Includes the yard, driveway, garage, pool, garden, or walk of a home, apartment, or residence. Excludes assisting living facilities.

*Farm* – A place of agriculture, except for a farmhouse, Includes land under cultivation and non-residential farm buildings.

*Mine or Quarry* – Includes sand pits, gravel pits, iron ore pits, and tunnels under construction.

*Industrial Place and Premises* – A place where things are made or are being built, includes construction sites, factories, warehouses, industrial plants, docks, and railway yards.

*Place of Recreation or Sport* – Includes amusement parks, public parks and playgrounds, sports fields/courts/courses, sports stadiums, skating rinks, gymnasiums, swimming pools, waterparks, and resorts.

*Street or Highway* – Any public street, road, highway, or avenue including boulevards, sidewalks and ditches.

**Public Building (schools, government offices)** – Any publicly owned building and its grounds, including schools and government offices.

*Trade or Service (business, bars, restaurants, etc.)* – Any privately owned building used for business and open to the public. Includes bars, restaurants, office buildings, churches, stores, bus/railway stations. Excludes health care facilities.

*Health Care Facility (clinic, hospital)* – A place where health care is delivered, includes, clinics, doctor's offices, and hospitals.

**Residential Institution (nursing home, assisted living, jail / prison)** – A place where people live that is not a private home, apartment, or residence. Includes, nursing homes, assisted living, jail/prison, orphanage, and group homes. (Where assisted living has a medical resource individual available but does not provide patient care on a regular basis.)

Lake, River, Ocean – Any body of water, except swimming pools.

*Other Location* – Any place that does not fit any of the above categories (this should be very rare).

# E09 01 Prior Aid

National Element: Yes, Multiple Entry

#### Definition

Any care which was provided to the patient prior to the arrival of this unit.

## **Field Values:**

10001 Relevant Value for Data Element Patient Care

Values do not need further definition.

# E09 02 Prior Aid Performed by

National Element: Yes, Multiple Entry

#### Definition

The type of individual who performed the care prior to the arrival of this unit.

#### Field Values:

- 1195 EMS Provider
- 1200 Law Enforcement
- 1205 Lay Person
- 1210 Other Healthcare Provider
- 1215 Patient

#### **Extended Definitions:**

*EMS Provider* – Any dispatched responder who provides pre-hospital medical care.

*Law Enforcement* – Officer who's primary role is not to provide pre-hospital medical care.

*Lay Person* – An individual without formal medical training with no duty to respond to the incident.

**Other Healthcare Provider** – Physician, Registered Nurse or other person, not dispatched, that indicates they work in a healthcare related field.

*Patient* – Person needing emergency medical services treatment or transportation.

# E09 03 Outcome of the Prior Aid

National Element: Yes, Single Entry

#### Definition

What was the outcome or result of the care performed prior to the arrival of the unit?

#### Field Values:

<u>1220</u>	Improved
<u>1225</u>	Unchanged
1230	Worse

Values do not need further definition.

# E09 04 Possible Injury

National Element: Yes, Single Entry

#### Definition

Indicates that the reason for the EMS encounter was related to an injury or traumatic event. This data element provides documentation to classify the EMS Reason for Encounter as either injury or non-injury related based on mechanism and not on actual injury.

#### Field Values:

<u>0</u>	No
<u>1</u>	Yes

Values do not need further definition

# E09 12 Chief Complaint Organ System

National Element: Yes, Single Entry

#### Definition

The primary organ system of the patient injured or medically affected. This is to be completed by EMS personnel with a minimum of an EMT-Paramedic level of credentialing.

#### Field Values:

<u>1350</u>	Cardiovascular
<u>1355</u>	CNS/Nero
<u>1360</u>	Endocrine/Metabolic
<u>1365</u>	GI
<u>1370</u>	Global
<u>1375</u>	Musculoskeletal
<u>1380</u>	OB/Gyn
<u>1385</u>	Psych
<u>1390</u>	Pulmonary
<u>1395</u>	Renal
<u>1400</u>	Skin

## **Extended Definitions:**

Cardiovascular – heart, arteries, veins CNS / Neuro – brain, spinal cord, nerves Endocrine / Metabolic – diabetes, thyroid, liver GI / Abdomen – mouth, esophagus, stomach, intestines Global – other organs and systems or multiple organs and systems Musculoskeletal / Injury – muscles, bones, joints, tendons, ligaments, cartilage OB / GYN – female reproductive system Psychiatric / Behavioral – mental, emotional, behavioral Respiratory – lungs, trachea, airway Renal / GU Problems – kidneys, male reproductive system Skin – external (look up definition)

# E09 13 Primary Symptom

National Element: Yes, Single Entry

# Definition

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

## Field Values:

<u>1405</u>	Bleeding
<u>1410</u>	Breathing Problem
<u>1415</u>	Change in responsiveness
<u>1420</u>	Choking
<u>1425</u>	Death
<u>1430</u>	Device/Equipment Problem
<u>1435</u>	Diarrhea
<u>1440</u>	Drainage/Discharge
<u>1445</u>	Fever
<u>1450</u>	Malaise
<u>1455</u>	Mass/Lesion
<u>1460</u>	Mental/Psych
<u>1465</u>	Nausea/Vomiting
<u>1470</u>	None
<u>1475</u>	Pain
<u>1480</u>	Palpitations
<u>1485</u>	Rash/Itching
<u>1490</u>	Swelling
<u>1495</u>	Transport Only
<u>1500</u>	Weakness
<u>1505</u>	Wound

## **Extended Definitions:**

Bleeding – Active, Inactive, Internal or External.

**Device** / **Equipment Problem** – Patient device (i.e., ICD, Implantable Defibrillator, Insulin Pump, Portacath, Central Line, etc.).

Malaise - General non-specific feeling of illness.

**Palpitations** – The sensation of a rapidly or irregularly beating heart; fluttering, pounding racing, skipping a beat, jumping around in the chest.

**Wound** – A type of physical trauma wherein the skin is torn, cut or punctured (i.e., an open wound). This field value is not defined as blunt force trauma causing, for example, a contusion (i.e., a closed wound).

*Transport Only* – The patient presents with no identifiable injury or illness.

# E09 14 Other Associated Symptoms

National Element: Yes, Multiple Entry

# Definition

Other symptoms identified by the patient or observed by EMS personnel.

# Field Values:

<u>1405</u>	Bleeding
<u>1410</u>	Breathing Problem
<u>1415</u>	Change in responsiveness
<u>1420</u>	Choking
<u>1425</u>	Death
<u>1430</u>	Device/Equipment Problem
<u>1435</u>	Diarrhea
<u>1440</u>	Drainage/Discharge
<u>1445</u>	Fever
<u>1450</u>	Malaise
<u>1455</u>	Mass/Lesion
<u>1460</u>	Mental/Psych
<u>1465</u>	Nausea/Vomiting
<u>1470</u>	None
<u>1475</u>	Pain
<u>1480</u>	Palpitations
<u>1485</u>	Rash/Itching
<u>1490</u>	Swelling
<u>1495</u>	Transport Only
<u>1500</u>	Weakness
<u>1505</u>	Wound

## **Extended Definitions:**

See comments for E09\_13

# E10 01 Cause of Injury

National Element: Yes, Single Entry

# Definition

The category of the reported/suspected external cause of the injury

## **Field Values:**

4005	
<u>1885</u>	Motor Vehicle traffic accident
<u>1890</u>	Pedestrian traffic accident
<u>1895</u>	Motor Vehicle non-traffic accident
<u>1900</u>	Bicycle Accident
<u>1905</u>	Water Transport accident
<u>1910</u>	Aircraft related accident
<u>1915</u>	Drug poisoning
<u>1920</u>	Chemical poisoning
<u>1925</u>	Falls
<u>1930</u>	Fire and Flames
<u>1935</u>	Smoke Inhalation
<u>1940</u>	Excessive Heat
<u>1945</u>	Excessive Cold
<u>1950</u>	Venomous stings (plants, animals)
<u>1955</u>	Bites
<u>1960</u>	Lightning
<u>1965</u>	Drowning
<u>1970</u>	Mechanical Suffocation
<u>1975</u>	Machinery accidents
<u>1980</u>	Electrocution (non-lightning)
<u>1985</u>	Radiation exposure
<u>1990</u>	Firearm injury (accidental)
<u>1995</u>	Firearm assault
<u>2000</u>	Firearm self inflicted
<u>2005</u>	Rape
<u>2010</u>	Stabbing assault
<u>2015</u>	Child battering
	-

## **Extended Definitions:**

*Motor vehicle traffic accident* - Includes any motor vehicle incident occurring on a public road or highway. Public road or highway includes any road open to

the use of the public for purposes of vehicular traffic as a matter of right or custom.

*Motor vehicle non-traffic accident* - Includes any motor vehicle incident occurring entirely off public roadways or highways. For instance an incident involving an All Terrain Vehicle (ATV) in an off the road location would be counted under this sub-category.

**Pedestrian Traffic Accident** - Includes responses in which a motor vehicle/pedestrian incident occurs on a public road or highway where the pedestrian was injured. Includes individuals on skates, in baby carriages, in wheelchairs, on skateboards, etc.

*Bicycle Accident* - Includes bicycle-related incidents not involving a motorized vehicle.

*Water Transport* - Includes all incidents related to a watercraft. Excludes drowning incidents unless they are related to watercraft use. Thus, if a person falls out of a boat and drowns, it should be counted within this category. If a person drowns in a swimming pool or bathtub, it should be counted under Drowning.

Aircraft Related Crash - Excludes spacecraft.

*Drug Poisoning* - Includes poisoning by drugs, medicinal substances, or biological products.

*Chemical Poisoning* - Includes poisoning by solid or liquid substances, gases, and vapors, which are not included under Drug Poisoning.

*Falls* - Excludes falls which occur in the context of other external causes of injury such as fire, or falling in incidents involving Machinery. These types of injuries should be coded as such.

*Fire and Flames* - Includes burning by fire, asphyxia or poisoning from conflagration or ignition, and fires secondary to explosions. Excludes injuries related to Machinery, and vehicle related incidents, which should be counted under their respective sub-categories.

**Smoke Inhalation** - Includes smoke and fume inhalation from conflagration.

*Excessive Heat* - Includes thermal injuries related to weather or heat produced by man, such as in a boiler room or factory. Excludes heat injury from conflagration, this should be counted under Fire and Flames.

*Excessive Cold* - Includes cold injury due to weather exposure, or cold produced by man, such as in a freezer.

**Venomous Stings (Plant, Animals)** - Includes stings from spiders, scorpions, insects, marine life or plants. Excludes "bites" and should be coded as such.

**Bites** - Includes bites (e.g., dogs, snakes and lizards, etc.). Excludes venomous stings which should be coded as such.

*Lightning* - Excludes falling off an object secondary to lightning and injuries from fire secondary to lightning.

**Drowning** - Includes responses to drowning/near drowning that are not related to watercraft use. Includes swimming and snorkeling incidents, bathtubs, hot tubs, holding ponds, buckets, etc.

*Mechanical Suffocation* - Includes suffocation in bed or cradle (crib death), closed space suffocation, plastic bag, hanging, etc.

*Machinery Accidents* - Includes responses in which machinery in operation was involved.

*Electrocution (Non-Lightning)* - Includes responses in which an incident related to electric current from exposed wire, faulty appliance, high voltage cable, live rail, or open electric socket. Excludes electrocution by lightning.

*Radiation Exposure* - Excludes complications of radiation therapy.

**Rape** - This sub-category should be entered in all instances where there was sufficient suspicion by the EMS responder that the responder would be required by law to report the case to authorities as a suspected case of rape.

*Stabbing Assault* - Includes reported cuts, punctures, or stabs to any part of the body.

**Child Battering** - Includes all forms of suspected child battering. This subcategory should be entered in all instances where there was sufficient suspicion by the EMS responder that the responder would be required by law to report the case to authorities as a suspected case of child abuse.

# E12 01 Barriers to Patient Care

National Element: Yes, Multiple Entry

## Definition

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

## **Field Values:**

- <u>2600</u> Developmentally Impaired
- <u>2605</u> Hearing Impaired
- 2610 Language
- 2615 None
- 2620 Physically Impaired
- 2625 Physically Restrained
- 2630 Speech Impaired
- <u>2635</u> Unattended or Unsupervised (including minors)
- 2640 Unconscious

Values do not need further definition.

# E19 05 Number of Procedure Attempts

National Element: Yes, Multiple Entry

#### Definition

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

#### **Field Values:**

10001 Relevant Value for Data Element Patient Care

#### **Extended Definitions:**

Clarification of the term 'attempt' – An active attempt to perform the procedure. Specific examples include:

Oral airways – The tip of the airway or the larygoscope breaks the plane of the teeth Nasal airways – The tip of the airway breaks the plane of the nares

Surgical airways – The skin over the intended airway site is broken

Vascular access – The skin over the intended access site is broken

# E19 06 Procedure Successful

National Element: Yes, Multiple Entry

#### Definition

Indication of whether or not the procedure performed on the patient was successful.

#### Field Values:

<u>0</u>	No
<u>1</u>	Yes

#### **Extended Definition:**

Clarification of the term 'successful' - An indication of whether the procedure / intervention was completed as intended, regardless of the patient's response or outcome.

# E19 07 Procedure Complication

National Element: Yes, Multiple Entry

# Definition

Any complication associated with the performance of the procedure on the patient.

## **Field Values:**

- 4500 None
- 4505 Altered Mental Status
- 4510 Apnea
- 4515 Bleeding
- 4520 Bradycardia
- 4525 Diarrhea
- 4530 Esophageal Intubation-immediately detected
- 4535 Esophageal Intubation-other
- 4540 Extravasion
- 4545 Hypertension
- 4550 Hyperthermia
- 4555 Hypotension
- 4560 Hypoxia
- 4565 Injury
- 4570 Itching/Urticaria
- 4575 Nausea
- 4580 Other
- 4585 Respiratory Distress
- 4590 Tachycardia
- 4595 Vomiting

## **Extended Definitions:**

Clarification of the term 'complication' - These are complications caused by the performance of the procedure by EMS.

4530 – **Esophageal Intubation-immediately detected** means the misplacement/displacement of the airway was detected in the prehospital setting

4535 - **Esophageal Intubation-other** means the misplacement / displacement of the airway was detected in the hospital or clinical setting

# E20 10 Incident/Patient Disposition

National Element: Yes, Single Entry

# Definition

Type of disposition treatment and/or transport of the patient.

## **Field Values:**

- 4815 Cancelled
- 4820 Dead at Scene
- 4825 No Patient Found
- 4830 No Treatment Required
- 4835 Patient Refused Care
- 4840 Treated and Released
- 4845 Treated, Transferred Care
- 4850 Treated, Transported by EMS
- 4855 Treated, Transported by Law Enforcement
- <u>4860</u> Treated, Transported by Private Vehicle

#### **Extended Definitions:**

4815 - Cancelled - Cancelled prior to patient contact

4820 - **Dead at Scene** - Either dead on arrival or dead after arrival with field resuscitation not successful and not transported

4825 - No Patient Found - EMS was unable to find a patient at the scene

4830 - *No treatment required* - Assessment resulted in no identifiable condition requiring treatment by EMS

4835 - *Patient Refused Care* - Patient refused to give consent or withdrew consent for care

4840 - *Treated and released* - The patient was treated by EMS but did not require transport to the hospital

4845 - *Treated, Transferred Care* - The patient was treated but care was transferred to another EMS unit

4850 - *Treated, transported by EMS* - The patient was treated and transported by the reporting EMS unit

4855 - *Treated, transported by law Enforcement* - The patient was treated and transported by a law enforcement unit

4860 - *Treated, Transported by Private Vehicle* - The patient was treated and transported by means other than EMS or law enforcement

# E20 16 Reason for Choosing Destination

National Element: Yes, Single Entry

# Definition

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

## **Field Values:**

<u>4990</u>	Closest Facility (none below)
<u>4995</u>	Diversion
<u>5000</u>	Family Choice
<u>5005</u>	Insurance Status
<u>5010</u>	Law Enforcement Choice
<u>5015</u>	On-Line Medical Direction
<u>5020</u>	Other
<u>5025</u>	Patient Choice
<u>5030</u>	Patient's Physicians Choice
<u>5035</u>	Protocol
<u>5040</u>	Specialty Resource Center

#### **Extended Definitions:**

Closest Facility (none below) - The closest hospital/facility.

Diversion - First choice hospital/facility is unable to accept patient.

*Family Choice* – Transported to hospital/facility chosen by the patients' family or a person acting on the patient's behalf.

*Insurance Status* – The hospital/facility is chosen based on insurance coverage.

*Law Enforcement Choice* – Transported to hospital/facility chosen by Law Enforcement.

**On-Line Medical Direction** – Transported to hospital/facility as directed by medical control either on-line or on-scene.

*Other* – Not one of the other options listed.

*Patient Choice* – Transported to hospital/facility of patient's choice.

**Patient's Physicians Choice** – Transported to hospital/facility chosen by the patient's physician.

*Protocol* – Patient transport to alternate facility in accordance with Medical Director approved protocols/guidelines.

**Specialty Resource Center** – Transport to a specialty facility based upon unique needs of the patient.

# E20 17 Type of Destination

National Element: Yes, Single Entry

# Definition

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

## **Field Values:**

<u>5045</u>	Home
<u>5050</u>	Hospital
<u>5055</u>	Medical Office/Clinic
<u>5060</u>	Morgue
<u>5065</u>	Nursing Home
<u>5070</u>	Other
<u>5075</u>	Other EMS Responder (air)
<u>5080</u>	Other EMS Responder (ground)
<u>5085</u>	Police/Jail

Values do not need further definition