



NORTHAMPTON COUNTY

Department of EMERGENCY MEDICAL SERVICES



STANDARD OPERATING GUIDELINES

TOPIC: EMS Charts & Patient Care Info	SOG #: 2.18
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Approved by: Hollye B. Carpenter	Adopted: 01/01/2013

PURPOSE

To outline a policy regarding the preparation, storage, copying and release of patient care information

SCOPE

All department EMS personnel

CONTENT

An EMS Chart shall be completed per the guidelines set forth in this document.

- In the event EMSCharts.com is not accessible, a VA PPCR shall be completed in the interim. Once EMSCharts.com access is available, all information from the VA PPCR shall be entered. The original VA PPCR shall be maintained as a part of our records.
- In the event a NCEMS provider does not hold the position on the call of AIC, a copy of the VA PPCR completed by the other agency shall be maintained as a part of our records. An EMS Chart shall also be completed, including all the information from the VA PPCR.
- All Charts shall be completed at the end of a shift, prior to leaving.

CHART ENTRY

An EMS Chart shall be created for any call resulting in either of the following:

- Primary and/or only "county staffed" unit response, regardless of outcome;
- ALS or BLS Transport;
- Patient Refusal;
- Patient contact with assessment;
- Treat and transfer of care;
- County response of any volunteer ambulance (documentation requested by volunteer agencies).

An EMS Chart is not required to be completed for move up or move down assignments.

AMBULANCE TRANSPORTS

An EMS Chart shall be completed for each patient transported. BLS charts are to typically be completed back at the station. ALS charts shall typically be completed at the ED in order to retrieve all signatures required.

A copy of all patient care reports shall be provided to the ED, within 12 hours.



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Only the following paper copies will be made of patient care reports:

- One for the ED.
- One for NCEMS (considered original) if an ALS call, which shall include a Physician's signature.

Use of Red Drug Box

- An additional drug sheet shall be printed when a red box is used.
- The drug sheet shall contain documentation of all drugs used, the ED Physician's signature, the pharmacist's signature and a signature of the AIC.

In the event narcotics are used, any unused portion shall be disposed of and witnessed by a nurse. The nurse shall then sign the drug sheet documenting disposal.

All EMS Charts shall be locked and advanced when all the above appropriate copies have been printed.

The paper copies for NCEMS shall be protected upon returning the station, maintaining patient confidentiality.

Immediately upon returning to the station paper copies shall be stored in the appropriate lock box for storage and protection, there by maintaining patient confidentiality.

Making a copy of an EMS Charts once locked is strictly prohibited. If additional copies need to be made for any reason, the Privacy Officer must be notified and shall be responsible for the authorizing or making of any additional copies.

PATIENT REFUSALS

If a patient refuses treatment or transport against medical advice the NCEMS "Informed Consent to Refuse" form shall be completed with all requested information and the patient's or representative's signature. A signature of a witness will also be obtained when available. This original form shall be maintained as a part of our records.

VOLUNTEER AGENCY BILLING

Billing packets will be competed weekly for each volunteer agency. These packets shall include the following paperwork for the appropriate week:

- Copy of the EMS chart for any volunteer unit response.
- Original Hospital Face Sheet.
- Original HIPAA form if it was not a patient refusal. If patient refusal, a copy of the HIPAA is provided.