



# INLAND COUNTIES EMERGENCY MEDICAL AGENCY POLICY AND PROTOCOL MANUAL

**Reference No. 5030**  
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Page 1 of 3

## REQUIREMENTS FOR PATIENT CARE REPORTS

### I. PURPOSE

To establish requirements for the initiation, transfer, completion, review and retention of patient care reports by BLS and ALS EMS providers that is necessary to maintain medical control and continuity of patient care.

### II. RESPONSIBILITIES FOR INITIATION, TRANSFER, COMPLETION AND REVIEW OF PATIENT CARE REPORTS

#### Initiation of Patient Care Report

- An electronic patient care report (ePCR) must be created for each patient response.
  - EMS providers using their own electronic health record (EHR) system must comply with ICEMA Reference #5040 - Requirements for Collection and Submission of EMS Data.
  - The initiation and completion of the ePCR is the responsibility of the EMS field personnel who participate in the EMS response and/or patient care.
  - If two (2) or more units from the same EMS provider are dispatched, at least one (1) EMS field personnel is required to initiate and complete an ePCR.
  - When two (2) or more units from different EMS providers are dispatched, at least one (1) EMS field personnel from each EMS provider is required to initiate and complete an ePCR.
- EMS field personnel shall obtain, and document all required ICEMA data elements, including all assessments, procedures and medications administered and provided by the EMS field personnel and members of their crews participating in the patient care.
- EMS field personnel shall only document assessment, procedures and medications administered and provided by EMS field personnel within their own organization.
  - If procedures or medications are administered by laypersons or public safety, providers will document those procedures and/ or medications in the applicable ePCR fields.
  - EMS providers must add student and/or intern names and certifications to their user lists, so all EMS field personnel rendering care are appropriately identified on the ePCR.
  - Students must not participate in completing the ePCR.

#### Completion of Patient Care Reports

- The EMS field personnel responsible for patient care shall accurately complete the patient care report and ensure that the ePCR:

- Contains all data elements required by ICEMA including all assessments, procedures and medications administered and provided by the EMS field personnel and members of their crews participating in patient care.
- Includes any additional information required by NEMSIS/CEMIS.
- It is signed by the EMS field personnel (EMS primary care provider/EMS crew member) who is responsible for patient care (EMS provider may require more than one signature).
- It is completed, locked and posted according to this policy.

#### **Transfer of Patient Care Information and Distribution of Patient Care Reports**

- The ICEMA Data System is the preferred method of transferring all patient care information between EMS field personnel, EMS providers, hospitals and ICEMA.
- EMS field personnel transferring patient care must initiate an electronic transfer of all required information to the accepting EMS field personnel concurrently with the verbal transfer of care.
- ePCRs from both the transport agency and the first response agency (if applicable) must be completed and posted to the server within four (4) hours of completion of the response.
  - ePCR upload requirements may be delayed due to an emergency response; however, submission must be completed as soon as possible but no later than the end of shift when the patient response occurred.
  - In situations where the transfer of information is not possible due to connectivity issues, the transfer must be made at the earliest opportunity when connectivity is restored.

#### **Review and Evaluation of Patient Care Reports**

- ICEMA may view or request a copy of any completed ePCR for quality assurance and/or quality improvement.
- The EMS provider is responsible for the monitoring, review, evaluation, and improvement of patient care data per the EMS provider's Quality Improvement Plan.
- The EMS provider is responsible to include all ICEMA and State required EMS system quality indicators in its quality improvement program.
- ICEMA may produce system-wide statistical and quality improvement summary reports based on individual or aggregate data.
- The EMS provider is responsible for the evaluation of individual statistical or quality assurance summary reports.

**III. RESPONSIBILITIES FOR RECORD/REPORT RETENTION**

- All records pertaining to patient care shall be maintained by the EMS provider, hospital, and/or ICEMA as required by State and/or federal regulation. Types of records to be retained, include:
  - Records related to either suspected or pending litigation.
  - Electronic Patient Care Reports (ePCR).
  - Electrocardiograms (EKG/ECG).
  - Capnography waveforms.
  - EMS provider refusal of care documentation.

**IV. PRIVACY**

All EMS providers are responsible to enact policies which ensure patient privacy by restricting access and implementing electronic protections in compliance with State and federal statues, policies, rules and regulations, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

**V. REFERENCES**

<u>Number</u>	<u>Name</u>
5020	Minimum Documentation Requirements for Transfer of Patient Care
5040	Requirements for Collection and Submission of EMS Data