



# CoSD EMS LEMESIS ELITE

Initial LEMESIS Agency Provider Training



# GOALS AND OBJECTIVES

## **LEMSIS Agency Provider/User will be....**

- Able to understand how LEMSIS License Management System (LMS) works with LEMSIS Elite
- Able to understand the difference between LEMSIS Elite and LEMSIS Elite Field
- Able to understand how to document the PCR in the most efficient manner
- Able to understand the PCR is dynamic, for example fields will appear or disappear depending on the call situation
- Able to understand call flow begins in the field:
  - CAD Incident Number required
  - Early Base Hospital contact is more important than ever because the CAD incident number prompts the MICN to generate the Base Hospital Record (BHR)(per S-415)



# TERMINOLOGY

- **NEMSIS** - National Emergency Medical Services Information System. NEMSIS is the national repository for EMS data
- **CEMSIS** - California Emergency Medical Services Information System
- **CoSD LEMSIS** - County of San Diego Local Emergency Medical Services Information System
- **LEMSIS LMS – License Management System** (also referred to as LEMSIS Licensing Portal)
- **LEMSIS ELITE** - CoSD LEMSIS prehospital documentation module
  - **BHR** - Base Hospital Record used for MICN documentation
  - **PCR** - Prehospital Care Record used for field/medic documentation
  - **Elite Web** - Arm of Elite for Agency Administration Management and Reporting
  - **Elite Field** - Arm of Elite in which PCR are documented from the field personnel
    - **Transfers** - The process of electronically moving records from one provider to another
      - **Upload** – Transferring the PCR to the Base Hospital and other provider involved in call
      - **Download** - Importing an uploaded PCR sent by another agency/unit on scene
    - **Posting** – Process to save the PCR to the server



# GENERAL INFORMATION

**LEMSIS LMS** – License Management System (also referred to as the LEMESIS Licensing Portal)

- Information related to personnel and your agency is managed in LMS which syncs with Elite

**LEMSIS Elite**

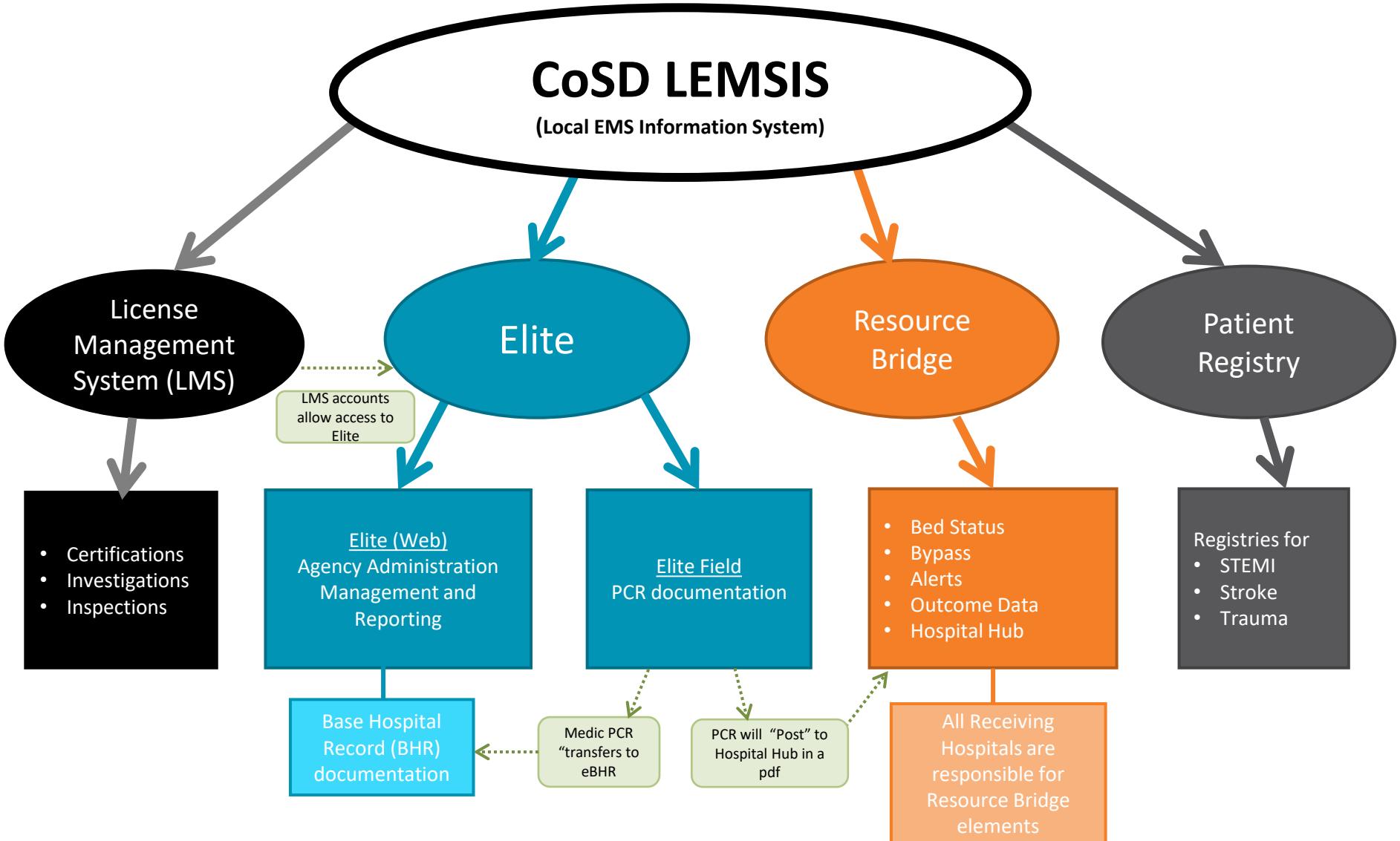
- CoSD LEMESIS Elite is the module with a dynamic data collection tool
- Today is the Initial training; future trainings will be made available as the new functions are implemented and feedback is received
- **AB 1129** – State mandate for agencies to submit NEMSIS, CEMSIS and LEMESIS compliant data in real time to the LEMSA

**General patient care documentation policies for all prehospital can be found in:**

- S-601 Documentation Standards and Transferral of Prehospital Care Record (PCR) Info
- S-602 EMS Provider Data Submission Process
- S-603 System Management and Support During Downtime
- S-415 Base Hospital Contact/Patient Transportation and Report



# OVERVIEW





# LEMSIS ELITE Module

The Prehospital Care Reporting System  
for County of San Diego EMS



# IF YOU CAN'T LOG INTO ELITE FIELD...

**Have you activated your account on the CoSD LEMSIS Licensing Portal? If you can't activate your account:**

- Do you have an email associated with your account? Your agency administrators and supervisors can check

**Are you on your agency's roster?**

- Ensure your agency administrator added you to the agency roster

**Do you have the correct username and password?**

- They are the same as your Licensing Portal username and password
- You can only try your password 20 times. If it doesn't work after 20 tries, your account will be suspended and you won't be able to get into Elite until CoSD EMS staff unlocks your account
- *DO NOT try your password 20 times.* Click the Forgot Password link, find the message sent to the email address in your account, and click the link to reset your password. The new password will also update in the Licensing Portal so you always have the same password for both systems



# IF YOU'VE LOGGED IN AND CAN'T GET TO THE PCR...

- Do you have a certification with CoSD EMS? If you are on your agency's roster, but your CoSD LEMSIS Licensing Portal (LMS) application has not been issued, you will not be able to access the ePCR
- Is your certification number (P-number, E-number) in your Licensing Portal account? If there is no certification number, you will not be able to access the ePCR
- Is your certification expired? If it's expired, your agency administrator may have removed your access temporarily



# LEMSIS ELITE FIELD > PARAMEDIC INTERNS

- Per Policy P-302
- In order for a paramedic intern to have access to ALS treatments when documenting in Elite they must:
  - Complete the *Other Healthcare Provider* application on the LEMSIS Licensing Portal, including:
    - Selecting “Paramedic Intern” as their level
    - Providing the name of the agency they will be interning with
  - If the intern is not already on the agencies roster, they will need to be claimed by the Agency Admin

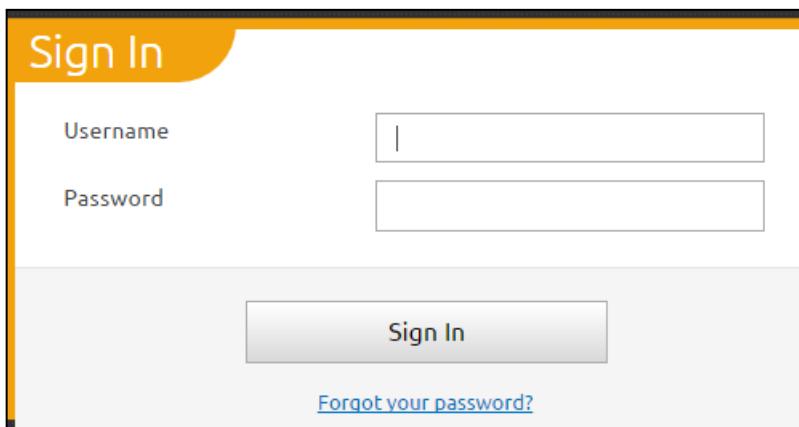


# LEMSIS ELITE > LOGIN

There are separate logins for **Elite (Web)** and **Elite Field** **\*\*Same Username and Password\*\***

**Elite (Web)** is the environment where agency administration, management, and reporting occurs

Web Address:  
<https://cosd.imagetrendelite.com/Elite>



Sign In

Username

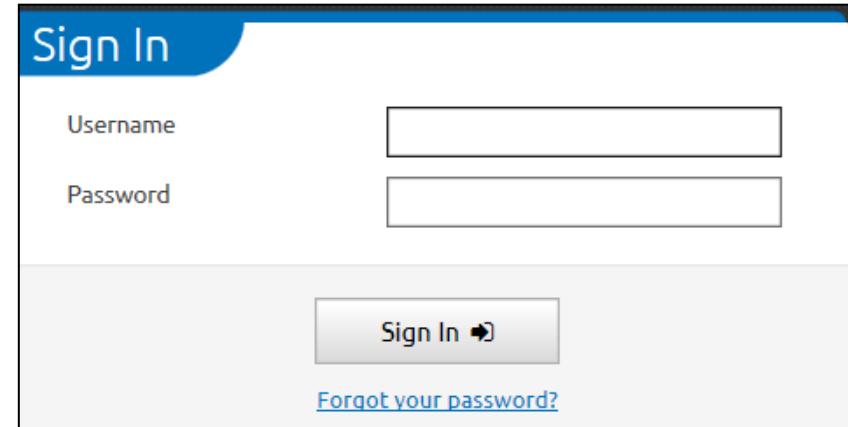
Password

[Forgot your password?](#)



**Elite Field** is the environment where field personnel will enter PCRs – this environment will be addressed during this training

Web Address:  
<https://cosd.imagetrendelite.com/Elite/Organizationscounty/RunForm/Login>



Sign In

Username

Password

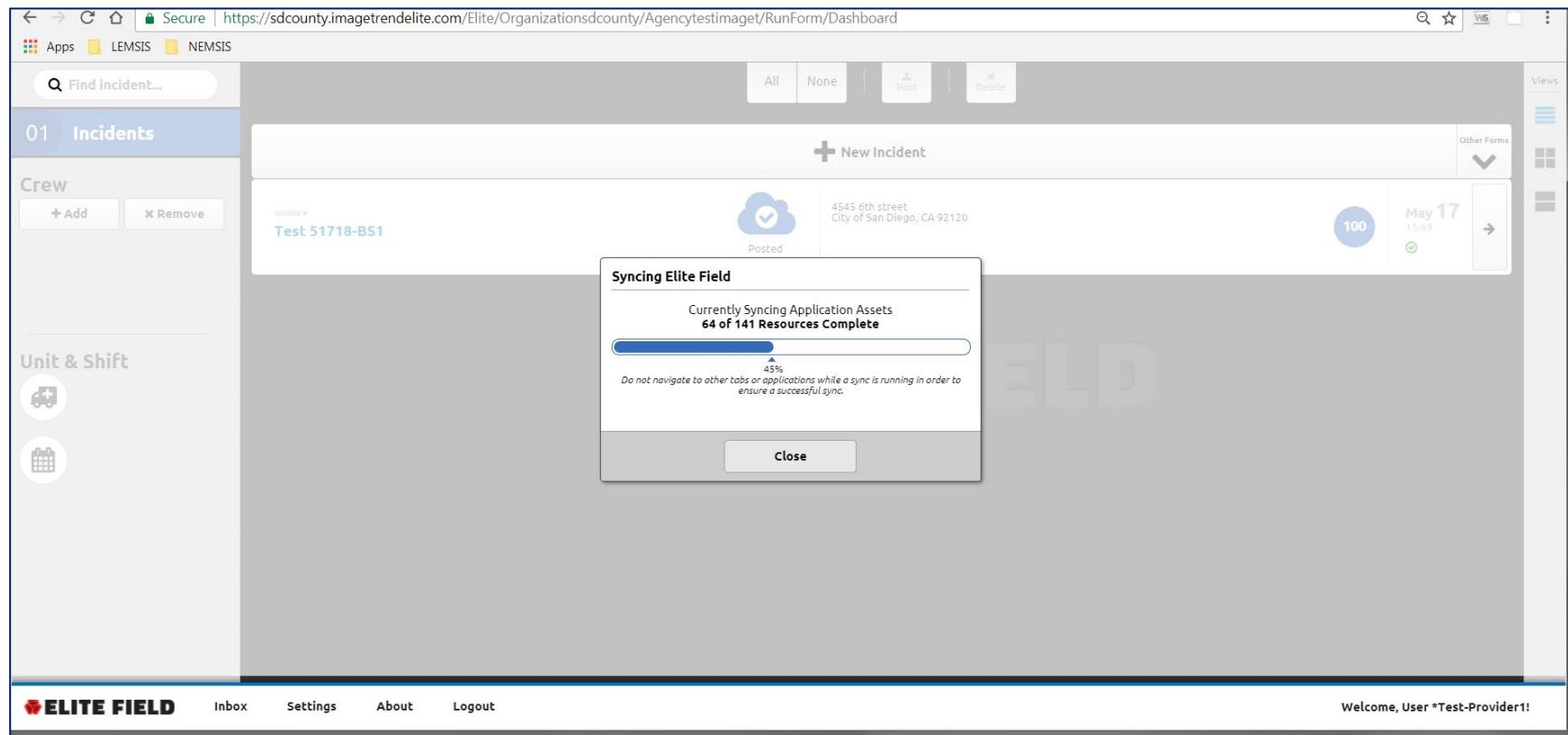
[Forgot your password?](#)

Set up Icon on devices for easy access to Elite Field



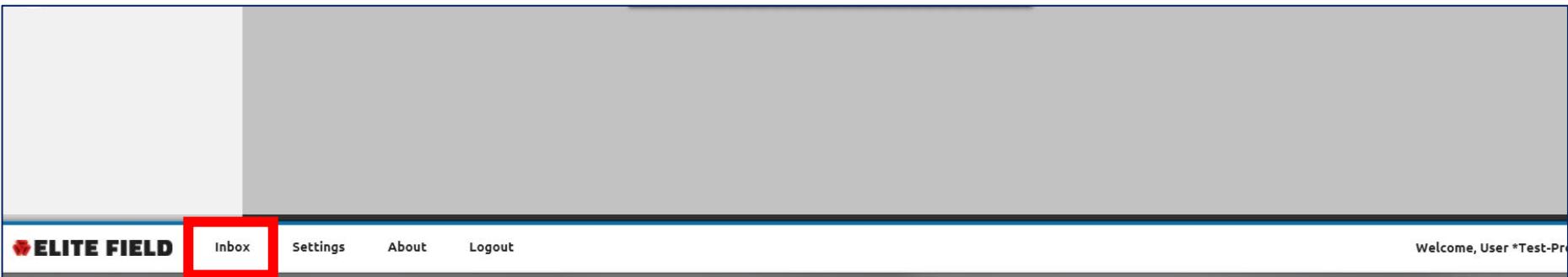
# LEMSIS ELITE FIELD LOGIN > SYNCING

- Syncing automatically occurs when you login to ensure the program is up-to-date
- Generally takes < 2 minutes; depends on the last time the sync was performed



# LEMSIS ELITE FIELD LOGIN > INBOX

- **Inbox** – Internal Email/Messaging feature



- The number of new messages will show
- When connected to the internet, clicking *Inbox* opens the Inbox in a new tab in Elite Web



# DIFFERENCE BETWEEN THE ELITE FIELD AND ELITE PCR VIEWS

Elite Field PCR View – will have a **Post** button and the label “**ELITE FIELD**”

Find field...

Save Post Print PDF CAD EKG Transfers Close

ELITE FIELD

MPI Fields

Incident Number:

Number of Patients at Scene:

Mass Casualty Incident:

Single Multiple None

No Yes

Elite Web PCR View – will NOT have a Post button and the “**ELITE FIELD**” label

Find field...

Save Print PDF CAD EKG Transfers (0) Messages Close

MPI Fields

Incident Number:

Number of Patients at Scene:

Mass Casualty Incident:

Single Multiple None

No Yes

Add Patient To Incident



# LEMSIS ELITE FIELD > SETTING UP CREW/UNIT

Select for each Crew:

- Name
- Level
- Role for the shift
  - Crew marked “Primary Care Giver” will auto populate as performing assessments and treatment

Select your assigned Unit and Call Sign  
(for some agencies they are the same)



00 Incidents

Find incident...

Crew

Crew Member: Test.Provider, User

Level: Paramedic

Role(s):

OK

New Incident

View

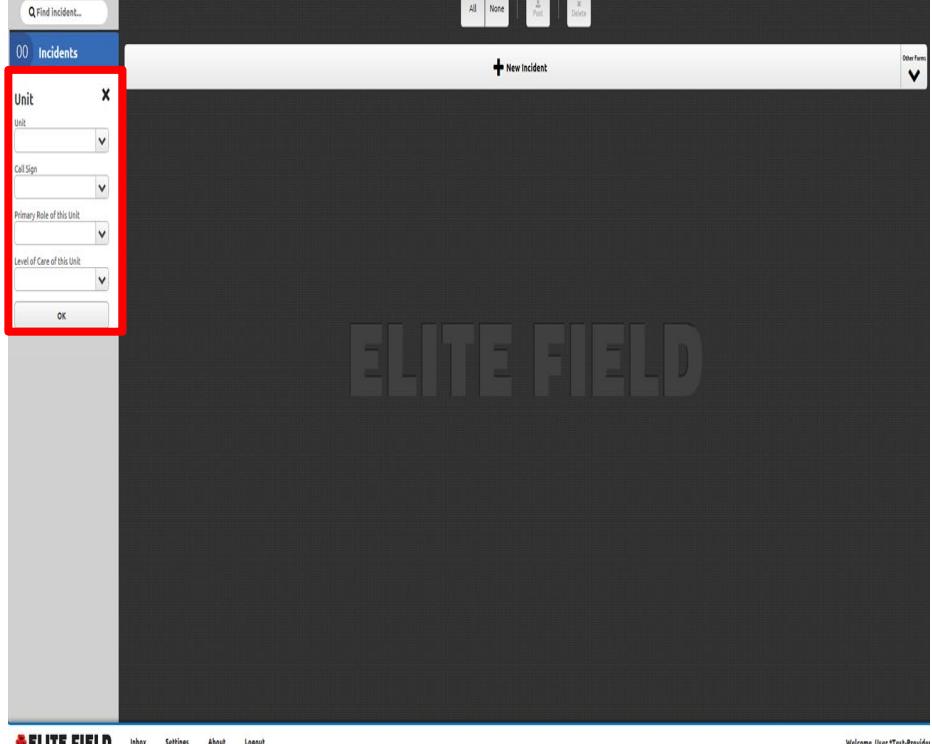
All None

Order Form

ELITE FIELD

Inbox Settings About Logout

Welcome, User \*Test.Provider!



00 Incidents

Find incident...

Unit

Unit:

Call Sign:

Primary Role of this Unit:

Level of Care of this Unit:

OK

New Incident

View

All None

Order Form

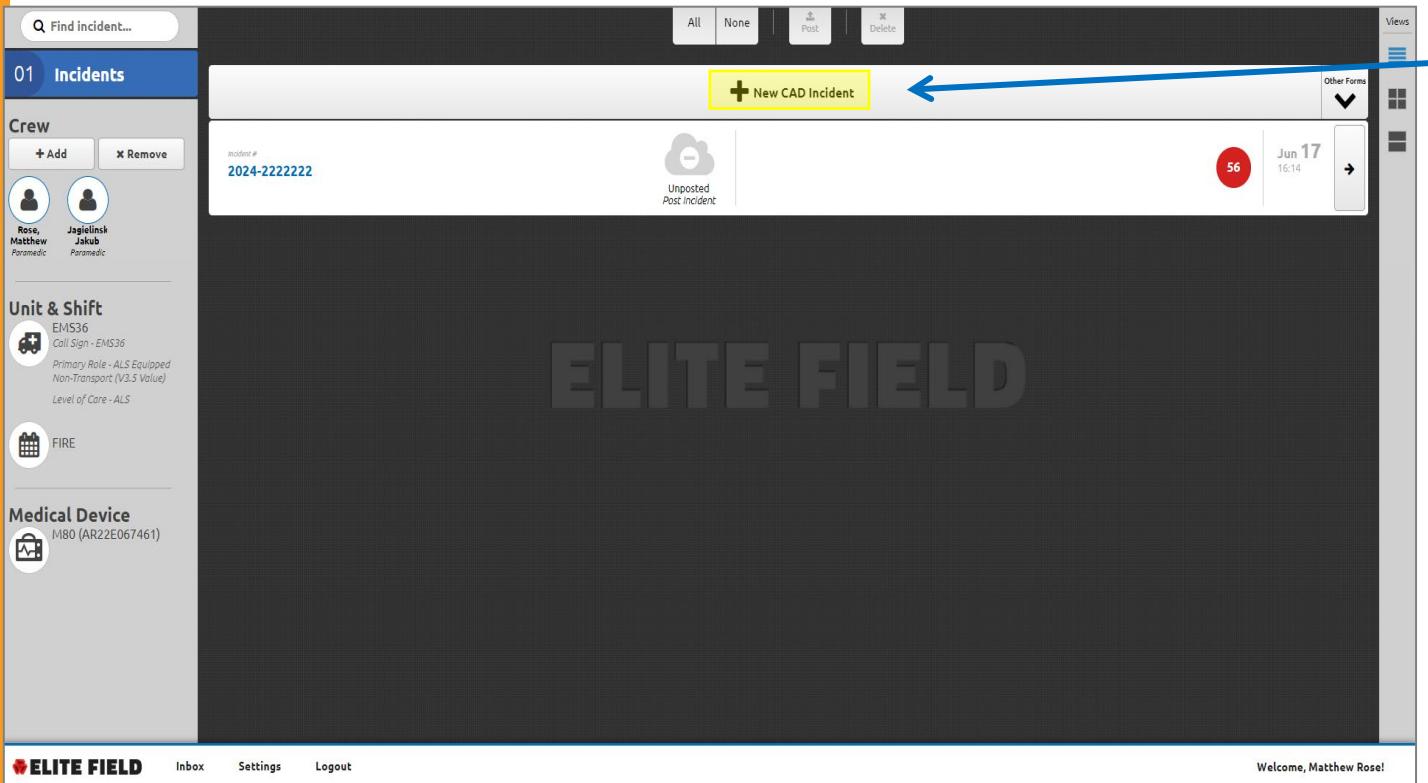
ELITE FIELD

Inbox Settings About Logout

Welcome, User \*Test.Provider!



# LEMSIS ELITE FIELD > CREATING A NEW INCIDENT



Create a run through the  
“+ New CAD Incident”  
Bar at top of page

ONE PCR required per Agency

Example Situations:

- **CVFD 1st Responder to CVFD Ambulance**

In the situation when transferring patient to a different agency there will be 2 PCRs (one per Agency):

- **CVFD 1st Responder to AMR Ambulance**

Note : A line listing of existing PCRs is found here



# LEMSIS ELITE FIELD > INITIAL VIEW OF A NEW PCR

The screenshot shows the LEMESIS Elite Field software interface. The main window is titled "MPI Fields". The left sidebar lists various modules: MPI (selected), HOME, RUN INFO, PT. INFO / HX, ASSESS/INTERVENTION, TRANSPORT, BILLING, SIGN/AMA/CNTRL SUB, REQ REPORTING, SUPPLEMENTAL Qs, and FIRE. The right sidebar lists other modules: Mileage, Timeline, JotPad, Prim/PQRST, Assessment, Adv Airway, IV/IO, Meds, Devices, SpineSplint, and All. The main panel contains fields for Incident Number (Incident#-20191005-TEST-PCR-000808), Number of Patients at Scene (Single, Multiple, None), Mass Casualty Incident (No, Yes), Is this a Fireline Paramedic Incident? (No, Yes), Add Patient To Incident, Patient Number, Age, and Age Units (Years, Months, Days). The bottom status bar shows a user icon, "No Patient Name Entered | Incident # Incident#-20191005-TEST-PCR-000808", a validation count of 46, a menu icon, and a status of "In Progress".

Note: The PCR appearance may vary depending on the device, browser, and/or zoom setting



# LEMSIS ELITE FIELD > MAIN AREAS OF A PCR (TOP)

Main Menu in Elite Field - Save, Post, View/Print in pdf, CAD, EKG, Transfers, Close (Note: The Post button is only seen in Elite Field not Elite (Web))

Search Bar

Section & Panels

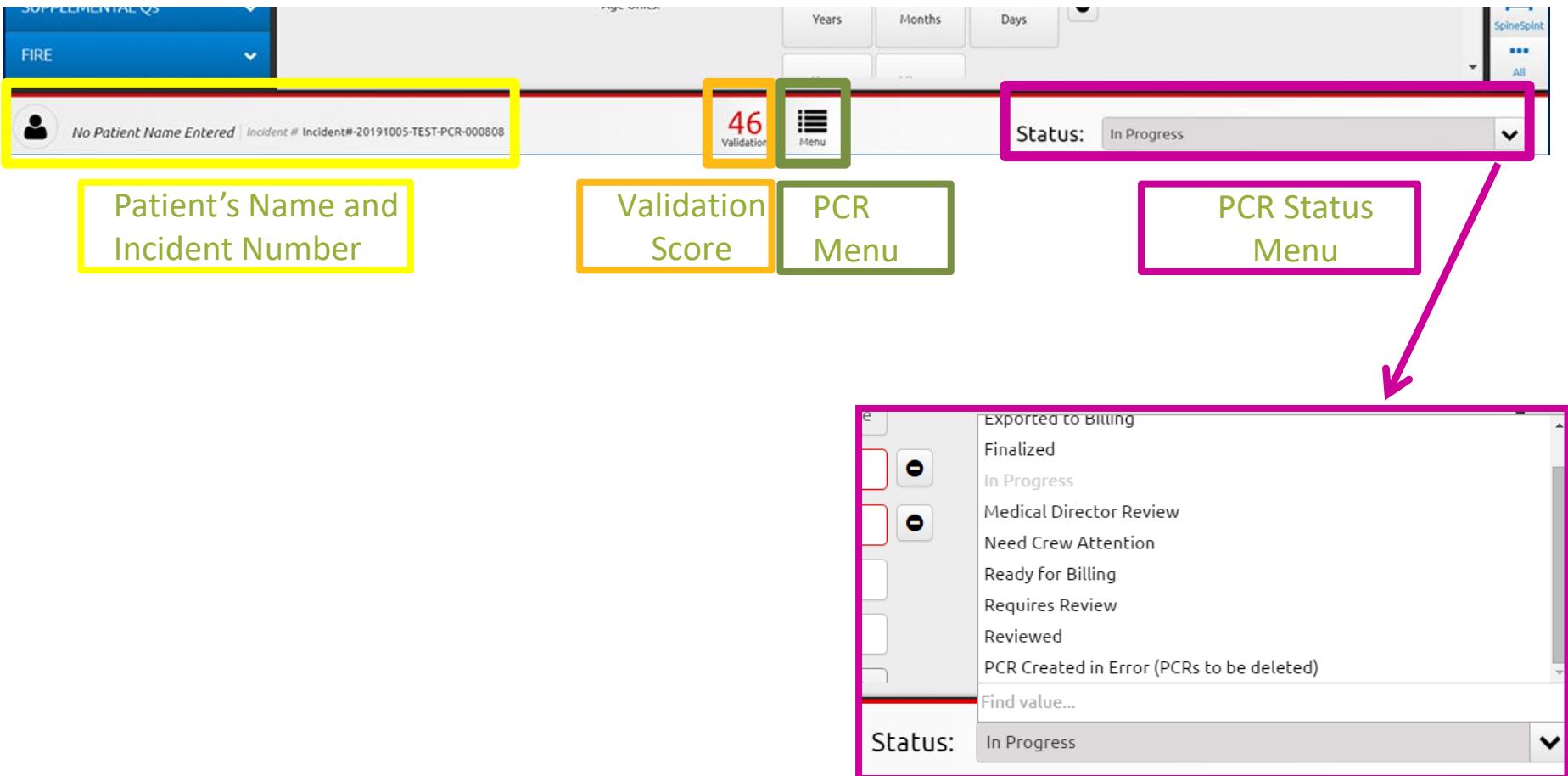
Documentation Area

Times, Mileage, Situation Tools, JotPad, & Power tools

The screenshot displays the LEMSS Elite Field software interface. At the top is a navigation bar with buttons for Save, Post, Print, PDF, CAD, EKG, Transfers, and Close. A yellow callout box highlights this bar with the text: "Main Menu in Elite Field - Save, Post, View/Print in pdf, CAD, EKG, Transfers, Close (Note: The Post button is only seen in Elite Field not Elite (Web))". Below the navigation bar is a sidebar titled "FIELDS TO TRANSFER (to Tr Unit/BH)" containing fields for incident number, first EMS unit arriving, unit notified by, arrival date/time, and patient details like last name, first name, middle initial, date of birth, and age. A pink callout box labeled "Section & Panels" points to the sidebar. At the bottom of the sidebar is a message: "No Patient Name Entered". To the right of the sidebar is a vertical toolbar with icons for Times, Mileage, Timeline, Situations, JotPad, and various medical and administrative tools. A green callout box labeled "Times, Mileage, Situation Tools, JotPad, & Power tools" points to this toolbar. The bottom of the interface features a status bar with a user icon, the number 58, a Validation button, a Menu button, and a Status dropdown set to "In Progress".



# LEMSIS ELITE FIELD > MAIN AREAS OF A PCR (BOTTOM)



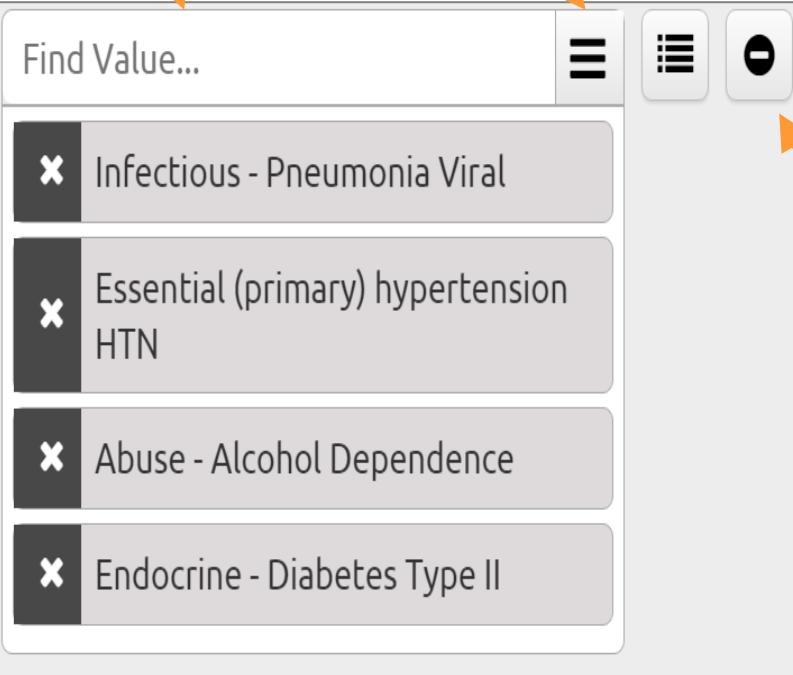
# LEMSIS ELITE FIELD > BUTTONS ON A PCR

	Add an item (crew member, exam, intervention)
	Closes the current screen/panel; removes an entry
	Next to search bar, Click to open drop down
	Opens a list panel on the left margin grouped in categories per list type.
	Click to select a Null Value “Non-Reported”, “Not Applicable”, “Not Reported”, “Unable to Obtain”, etc.
	Exclamation marks warn of required input
	Clock - Use to auto fill the current date/time



# LEMSIS ELITE FIELD > BASIC FIELD NAVIGATION

Each format has advantages for efficient documentation



The screenshot shows a medical history field with a search dropdown and a side panel. The search dropdown contains a list of conditions: Infectious - Pneumonia Viral, Essential (primary) hypertension HTN, Abuse - Alcohol Dependence, and Endocrine - Diabetes Type II. The side panel is open on the left, showing a list of null values: N/A, Not Listed (Use Other), Not Recorded, Not Reporting, None Reported, Refused, Unable to Complete, and Unresponsive.

**Search** - Use if you know exactly what you are looking for

**Dropdown** – Use for smaller list (such as selecting a Base Hospital)

**Side Panel** - opens list on the left side

- Can be sorted by category, alphabetically, or searched (entering partial info will bring up all options including what you entered)
- Use for larger list – medical history, meds and allergies

**Null value** – will bring up null options such as Not Reported, etc.

Note: "N/A, Not Listed (Use Other)" is only used if you're unable to find what you are looking for and need to enter it in a text field

N/A, Not Listed (Use Other)	Not Recorded	Not Reporting
None Reported	Refused	Unable to Complete
Unresponsive		



# LEMSIS ELITE FIELD > BASIC FUNCTIONS OF A PCR

## Sections & Panels

- Top to bottom
- Change Red to Blue

Find field...

Save Print PDF CAD EKG Transfers (0) Messages Close

Fields To Transfer (to Tr Unit/BH)

Incident Number: Incident#-20191005-TEST-PCR-000809

First EMS Unit Arriving on Scene: M99

Unit Notified by Dispatch Date/Time: 10/05/2019 12:26:32

Arrived at Patient Date/Time: [ ] [ ] [ ]

Last Name: [ ] [ ]

First Name: [ ] [ ]

Middle Initial/Name: [ ]

Date of Birth: [ ] [ ] [ ]

Age: [ ] [ ] [ ]

Age Units: Years Months Days [ ] [ ]

Hours Minutes [ ] [ ]

No Patient Name Entered Incident # Incident#-20191005-TEST-PCR-000809 32 Validation Menu Status: In Progress

Mileage Timeline JotPad Prim/PQRST Assessment Adv Airway IV/IO Meds Devices SpineSplint All

## Documentation Area

- Fields with
- Turn Sections and Panels from Red to Blue
- Increase Validation Score – *100 is required for record to upload to the State*

## All Tools

- Made to help with efficient documentation



# LEMSIS ELITE FIELD > DYNAMIC FEATURES

- **Fields that are repeated on the PCR only need to be completed in one location, others will autofill**
  - i.e. - *Patient Name* is located on both “Fields to Transfer” and “Patient Information” panels; it only needs to be entered in once
- **Dynamic nature of the PCR**
  - Sections, Panels and Fields will appear or disappear based on situations and documentation
    - MPI Section
    - Trauma, STEMI, Stroke, and Cardiac Arrest Panels
    - Pregnancy related Fields



# DOCUMENTING IN A PCR > HOME SECTION

*Home > Fields to Transfer (to Tr Unit/BH)* Panel is intended as a one-page area for the minimum amount of information to transfer the PCR

**Working top to bottom:**

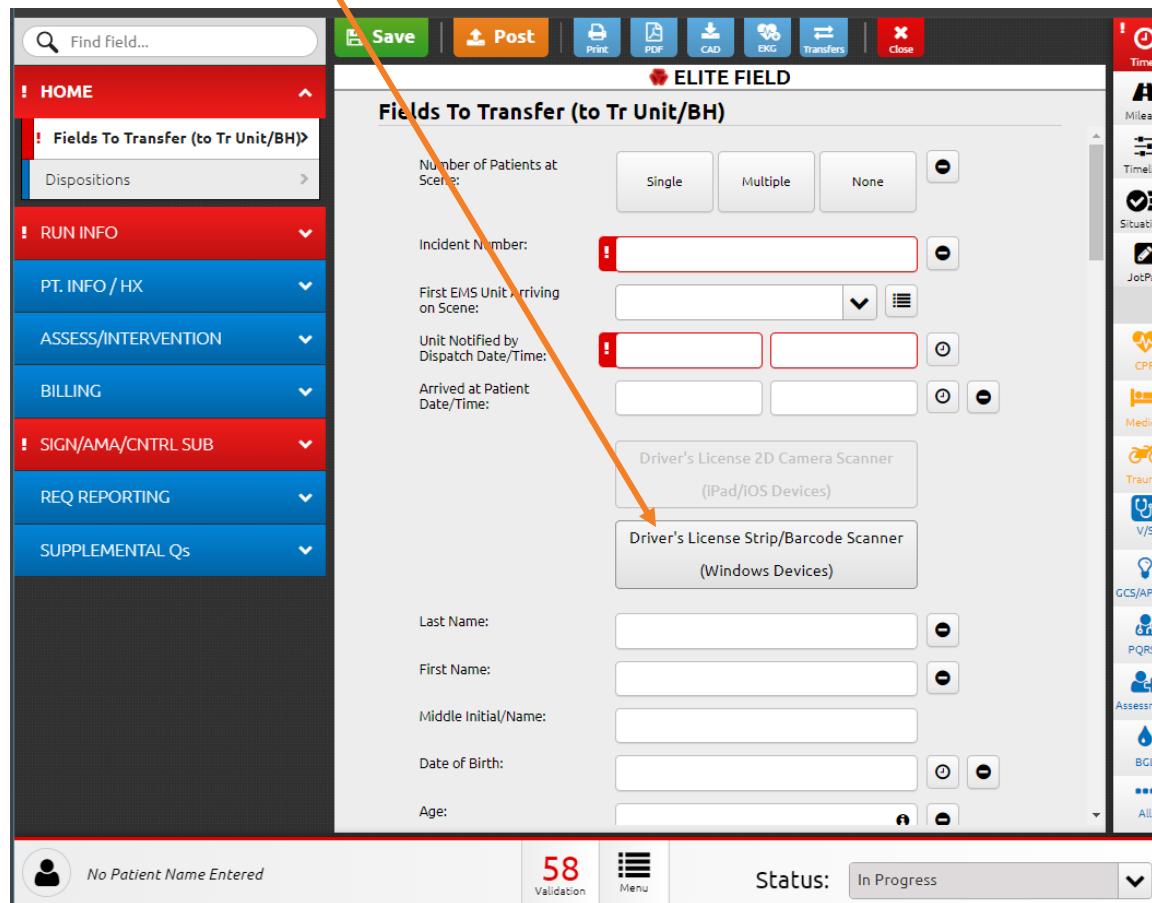
*Home Section > Fields to Transfer (to TR Unit/BH)* Panel

- Complete Home pane to facilitate transfer of PCR to TR Unit/BH
- Complete Power Tools for Vitals, GCS, and PQRST
- Once complete, transfer (upload) PCR



# HOME SECTION > DRIVER LICENSE SCANNER

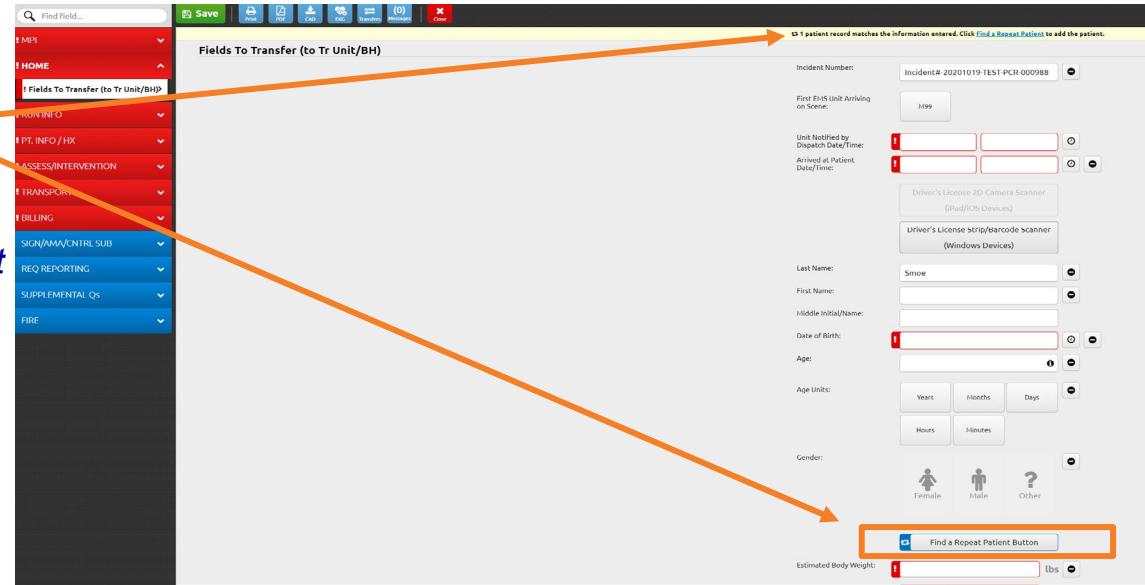
Drivers License Scanner button(s) are located  
at the top of the Home panel



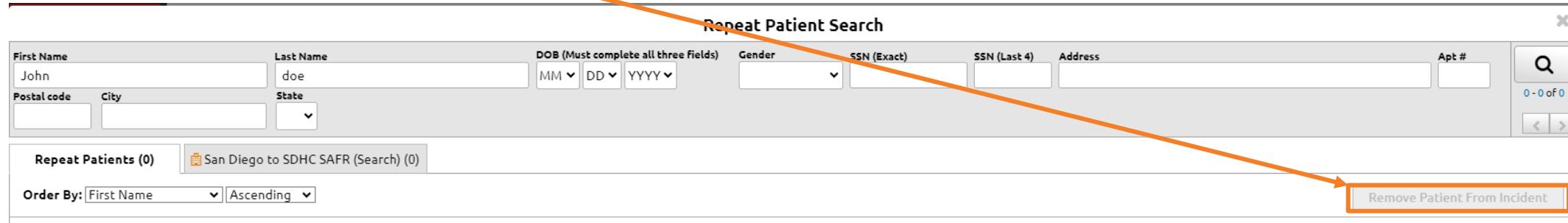
# DOCUMENTING IN A PCR > REPEAT PATIENT

## Repeat Patients on the *Fields to Transfer* panel

- After entering basic demographic data select button or notice bar at top indicating how many matching patients
- Choose correct patient from *Repeat Patient Search* result box
- Repeat Patient Undo Button
  - Removes patient information that was incorrectly downloaded
  - Select the *Find a Repeat Patient Button* again
  - Select the *Remove Patient From Incident* button
  - This removes all downloaded data except First and Last Name

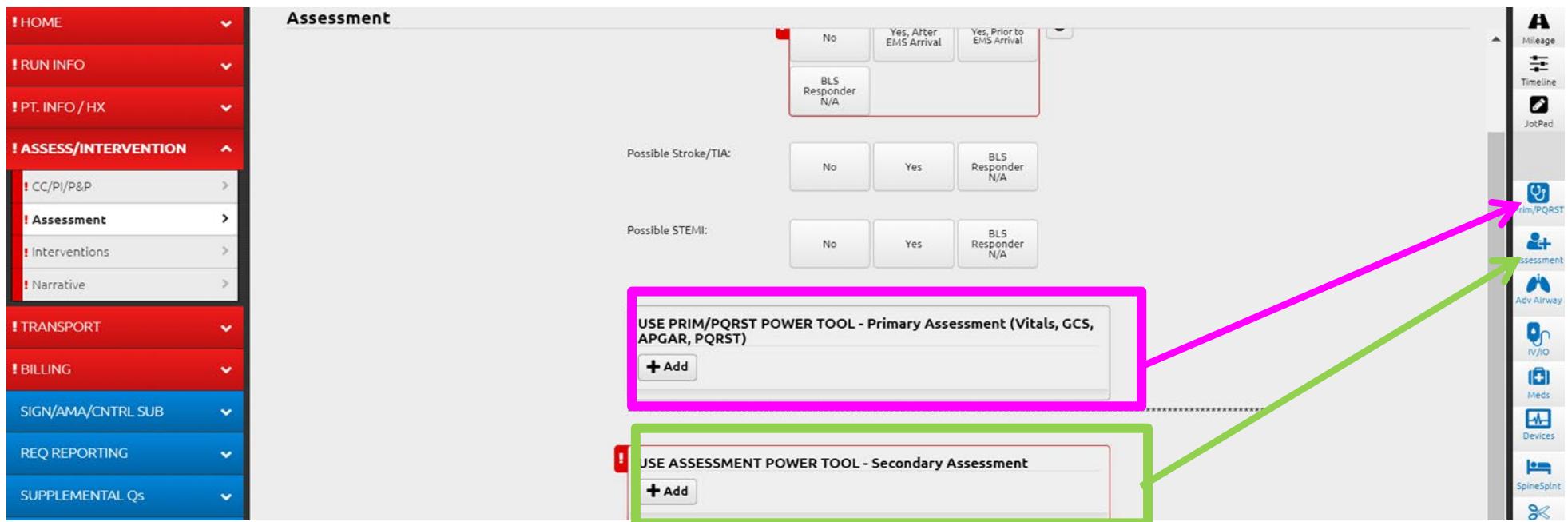


## Repeat Patient Search



# DOCUMENTING IN A PCR > POWER TOOLS

- A shortcut to document data that is often entered multiple times - Vitals, Meds, Procedures
- Use when directed by the labels on PCR to facilitate efficient documentation
  - Take notice of labels on PCR that direct next steps:
    - To enter Primary Assessment use *Prim/PQRST Power Tool* not the Add button
    - To enter Secondary Assessment use *Assessment Power Tool* not the Add button



# DOCUMENTING IN A PCR > PRIM/PQRST POWER TOOL

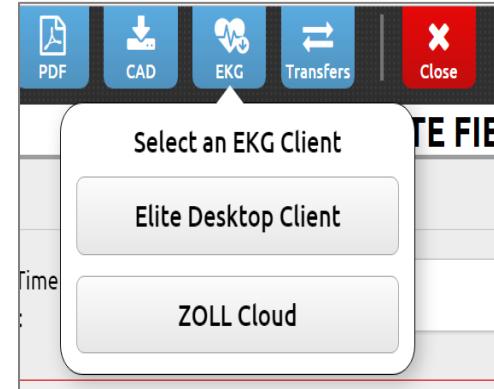
The screenshot shows a software interface for documenting medical information. At the top, there are buttons for 'OK', 'Cancel', and 'Delete'. Below this is a 'Primary' section with fields for 'Crew Member', 'Date', 'Time', and 'Prior to Arrival' (with options 'No' and 'Yes'). The 'Method of Blood Pressure Measurement' section includes buttons for 'Cuff-Automated', 'Cuff-Manual Auscultated', 'Cuff-Manual Palpated Only', 'Doppler', 'Venous Line', and 'Arterial Line'. The 'Pulse/Heart Rate' section includes a 'Favorites' button and a 'More' button. The 'Pulse Quality' section includes buttons for 'Normal', 'Absent', 'Bounding', 'Rapid', 'Slow', and 'Weak'. The 'Method of Heart Rate Measurement' section includes buttons for 'Palpated', 'Electronic Monitor - Cardiac', 'Electronic Monitor - Pulse Oximeter', 'Electronic Monitor (Other)', 'Doppler', and 'Auscultated'. Each section has a 'Search' button to the right.

Note: Menus with the *More* button will expand to show more options



# DOCUMENTING IN A PCR > VITALS

- **Importing EKG monitor data**
  - Easiest and most accurate way to document vitals
  - Enters imported data into the Prim/PQRST Power Tool/Vitals Section
- **NOT Importing EKG monitor data**
  - Manually enter into the Prim/PQRST Power Tool/Vitals Section



**One complete set of vitals is required before transferring to Base Hospital – manually entered**





# Uploading V/S and treatment from Zoll monitor

## Events on monitor upload as case file.

- Need to “Close case” prior to upload (automatically closes case if monitor was turned off)
- Can upload multiple case files into one PCR
- All but snapshot will create the corresponding event in ePCR (will need details completed after downloading)

## Things that trigger an event to be created that populates ePCR

- Any electricity use: Will create treatment event
- Blood pressure reading: Will bring over **all** V/S at the time the BP is captured and create Assessment in ePCR  
(Can delete or modify in ePCR if inaccurate)
-  **Snapshot:** Good for SVT conversion captures 24 seconds (12 proceeding and 12 following pressing button)  
(You can hit it as many times as needed)  
**Use Snapshot for capturing ETCO2 for each required marker (prior/post intubation and at transfer of care)**
- **12 lead:** Save a viewable high quality 12 lead that transfers with report
- **Code markers:** EPI, Amio, IV, IO, ETI, KING, ASA, NTG, Fen, Atro

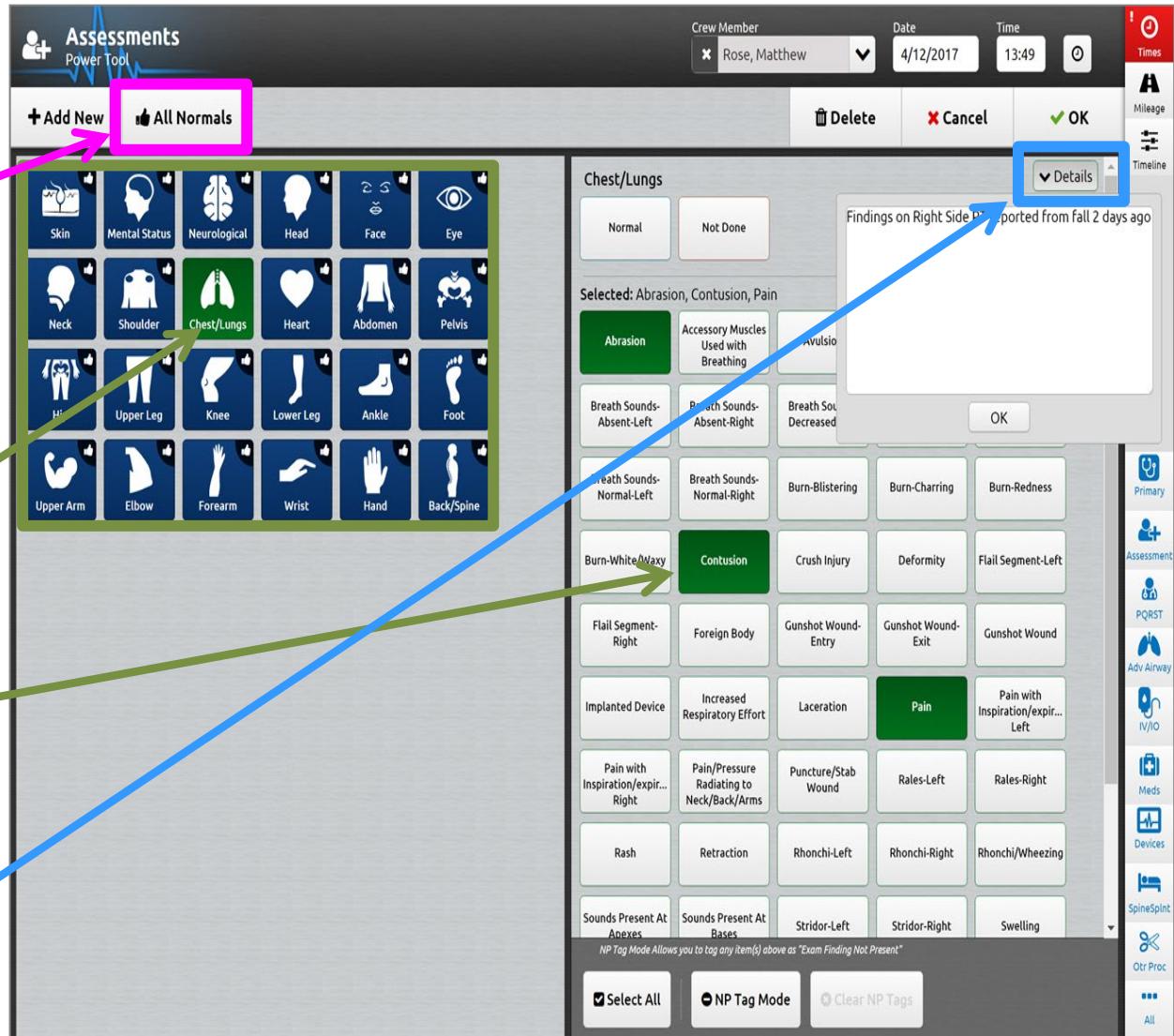
\*Can use as a placeholder, example: If selected codemarker “FEN” when Narcan was given, it will timestamp and create medication event you can correct in ePCR after download.

# DOCUMENTING IN A PCR > ASSESSMENT POWER TOOL



## Assessment Power Tool

1. Always start with selecting the *All Normal* button (so all areas turn blue)
2. Then select all applicable Abnormal findings (area turns green)
3. Then select detailed findings (turns green)
4. Detail dropdown button allows for enhanced description of each area



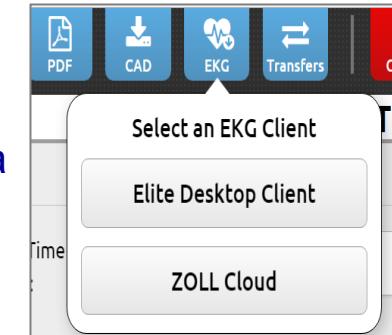
# DOCUMENTING IN A PCR > VITALS

## To document Vitals:

- Manually enter the Primary Power Tool



- If agency has an integrated EKG monitor data can be imported via the EKG button



## One complete set of vitals is required:

- Before transferring to Base Hospital
- To satisfy the validation rules



# Documenting in a PCR > Situation Tools

The Situation tools will default everything to what is considered normal for the medication or procedure.

Example:



Defaults all the following fields:

- The Crew Member
- Current Time
- Medication Given
- Dosage to 324
- Dosage units to mg
- Route to Oral
- Successful
- No complications
- Standing Order

- Always Review your documentation for accuracy, If anything is different or incorrect modified as needed.
- When using code markers on Monitor ensure you are not doubling up on treatments.



## DOCUMENTING IN A PCR > INTERVENTIONS

1. If your agency has monitor integration, you are able to document using **code markers**;
  - Add Medications, IV Placement, Advanced Airway, etc. - depending on the options available on your EKG monitor
  - Still required to complete details if imported - example dose, route, etc.
2. Use the Situation and Power Tools to manually document interventions.



# V3.5 DISPOSITION FIELD CHANGES

The major change in V3.5 revolves around the Disposition Field(s):

- V3.4 had one field
  - ✓ Incident/Patient Disposition
- V3.5 has five fields that capture this data (separating out the information in the current field)
  - ✓ This Unit's Disposition
  - ✓ This Unit's Patient Evaluation/Care Disposition
  - ✓ This Unit's Crew Disposition
  - ✓ This Unit's Transport Disposition
  - ✓ Reason for Refusal/Release Disposition

Field Name	Field Value
This Unit's Disposition	Patient Contact Made
	Canceled Prior to Arrival at Scene
	Canceled on Scene, No Patient Contact
	Cancelled on Scene, No Patient Found
	Non-Patient (i.e. Lift Assist, Organ Transport)
This Unit's Patient Evaluation/Care Disposition	Patient Evaluated and Care Provided
	Patient Evaluated and Refused Care
	Patient Evaluated, No Care Required
	Patient Refused Evaluation and/or Care
	Support Services Provided
	Not Applicable
	Not Recorded
This Unit's Crew Disposition	Initiated and Continued Primary Care
	Initiated Primary Care and Transferred to Another EMS Crew
	Provided Care Supporting Primary EMS Crew
	Assumed Primary Care from Another EMS Crew
	Incident Support Services Provided
	Back in Service, No Care or Support Services Required
	Back in Service, Care or Support Services Refused
This Unit's Transport Disposition	Not Applicable
	Not Recorded
	Transport by This EMS Unit (This Crew Only)
	Transport by This EMS Unit, with a Member of Another Crew
	Transport by Another EMS Unit
	Transport by Another EMS Unit, with a Member of This Crew
	Patient Refused Transport
Reason for Refusal/Release Disposition	Non-Patient Transport
	No Transport
	Not Applicable
	Not Recorded
	Against Medical Advice
Reason for Refusal/Release Disposition	Released Per Protocol
	Released to Law Enforcement
	Other, Not Listed (i.e. Elopement)
	Other, Not Listed (i.e. Elopement)



# DOCUMENTING IN A PCR > PRESET VALUES

<b>Dispositions</b>	
Transport Dispositions:	
Transport Patient	
Transport After Receiving Care From First Responder	
Transport With First Responder As Primary Care Provider	
Transport to Landing Zone	
Ride in With Transporting Unit	
Transfer Care To Transporting Unit	
Non-Transport Dispositions:	
AMA / Refusal	
Treat No Transport, AMA	
Pronouncement [No Resuscitation Attempted]	
Pronouncement [Resuscitation Attempted]	
Lift Assist, Non-Patient	
Cancelled Dispositions:	
Cancelled Prior to Arrival at Scene	
Cancelled on Scene, No Patient Contact	
Cancelled on Scene, No Patient Found	

Transport

Non-Transport

Options are designed so you are only able to see appropriate values based off the "Primary Role of the Unit" field.



# DOCUMENTING IN A PCR > PRESET VALUES

For the given situation it will fill out the several fields listed as appropriate, showing the current Value and the new value for after you hit apply.

These values do not lock and are always able to be changed as required.

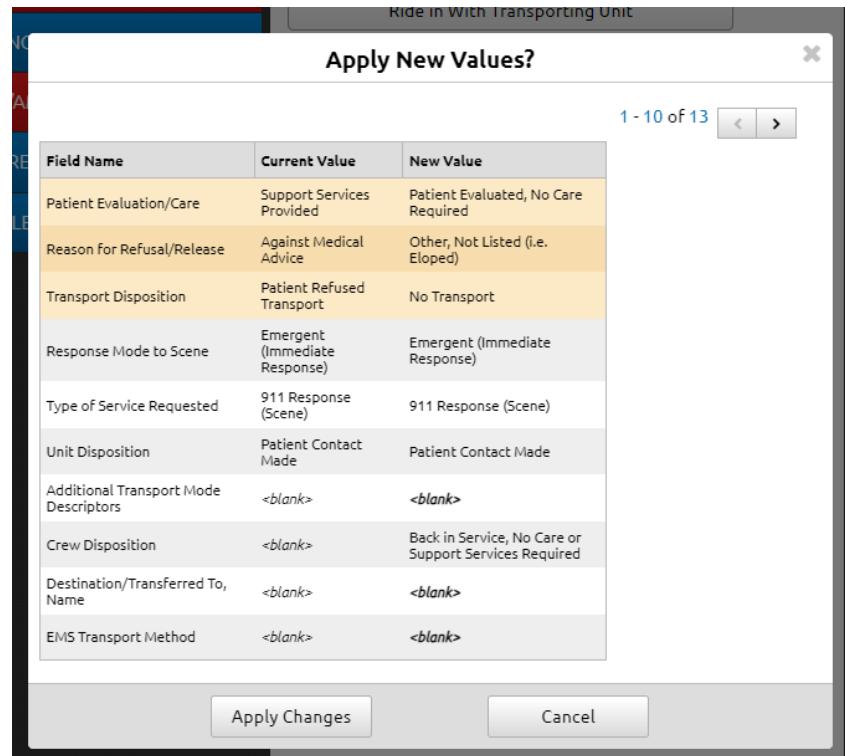
Ride In With Transporting Unit

Apply New Values?

1 - 10 of 13

Field Name	Current Value	New Value
Patient Evaluation/Care	Support Services Provided	Patient Evaluated, No Care Required
Reason for Refusal/Release	Against Medical Advice	Other, Not Listed (i.e. Eloped)
Transport Disposition	Patient Refused Transport	No Transport
Response Mode to Scene	Emergent (Immediate Response)	Emergent (Immediate Response)
Type of Service Requested	911 Response (Scene)	911 Response (Scene)
Unit Disposition	Patient Contact Made	Patient Contact Made
Additional Transport Mode Descriptors	<blank>	<blank>
Crew Disposition	<blank>	Back in Service, No Care or Support Services Required
Destination/Transferred To, Name	<blank>	<blank>
EMS Transport Method	<blank>	<blank>

Apply Changes Cancel



# EXAMPLE DISPOSITION SITUATIONS

## Treated and Transported by This Unit

This Unit's Disposition:	<input checked="" type="checkbox"/> Patient Contact Made	<input type="checkbox"/> Cancelled Prior to Arrival at Scene	<input type="checkbox"/> Cancelled on Scene, No Patient Contact
	<input type="checkbox"/> Cancelled on Scene, No Patient Found	<input type="checkbox"/> Non-Patient (i.e. Lift Assist, Organ Transport)	
This Unit's Patient Evaluation/Care Disposition:	<input checked="" type="checkbox"/> Patient Evaluated and Care Provided	<input type="checkbox"/> Patient Evaluated and Refused Care	<input type="checkbox"/> Patient Evaluated, No Care Required
	<input type="checkbox"/> Patient Refused Evaluation and/or Care	<input type="checkbox"/> Support Services Provided	
This Unit's Crew Disposition:	<input checked="" type="checkbox"/> Initiated and Continued Primary Care	<input type="checkbox"/>	<input type="checkbox"/>
This Unit's Transport Disposition:	<input checked="" type="checkbox"/> Transport by This EMS Unit (This Crew Only)	<input type="checkbox"/>	<input type="checkbox"/>
Reason for Refusal or Release Disposition:	<input type="checkbox"/> Against Medical Advice	<input type="checkbox"/> Released Per Protocol	<input type="checkbox"/> Released to Law Enforcement
	<input type="checkbox"/> Other Not Listed (i.e. Elopement)		



# EXAMPLE DISPOSITION SITUATIONS

## First Responder Transfers Care to Another Agency/Unit to Transport – ALS or BLS

Response Information					
This Unit's Disposition:					
<input checked="" type="checkbox"/> Patient Contact Made <input type="checkbox"/> Cancelled Prior to Arrival at Scene <input type="checkbox"/> Cancelled on Scene No Patient Contact					
<input type="checkbox"/> Cancelled on Scene, No Patient Found <input type="checkbox"/> Non-Patient (i.e. Lift Assist, Organ Transport)					
This Unit's Patient Evaluation/Care Disposition:					
<input checked="" type="checkbox"/> Patient Evaluated and Care Provided <input type="checkbox"/> Patient Evaluated and Refused Care <input type="checkbox"/> Patient Evaluated, No Care Required					
<input type="checkbox"/> Patient Refused Evaluation and/or Care <input type="checkbox"/> Support Services Provided					
This Unit's Crew Disposition:					
<input checked="" type="checkbox"/> Initiated Primary Care and Transferred to Another EMS Crew <input type="checkbox"/> <input type="checkbox"/>					
What Level of Care/Service was this Pt Transferred To?:					
<input type="checkbox"/> ALS <input checked="" type="checkbox"/> BLS					
This Unit's Transport Disposition:					
<input checked="" type="checkbox"/> Transport by Another EMS Unit <input type="checkbox"/> <input type="checkbox"/>					



# EXAMPLE DISPOSITION SITUATIONS

AMA

This Unit's Disposition:	<input checked="" type="checkbox"/> Patient Contact Made	<input type="checkbox"/> Cancelled Prior to Arrival at Scene	<input type="checkbox"/> Cancelled on Scene, No Patient Contact
	<input type="checkbox"/> Cancelled on Scene, No Patient Found	<input type="checkbox"/> Non-Patient (i.e. Lift Assist, Organ Transport)	
This Unit's Patient Evaluation/Care Disposition:	<input type="checkbox"/> Patient Evaluated and Care Provided	<input checked="" type="checkbox"/> Patient Evaluated and Refused Care	<input type="checkbox"/> Patient Evaluated, No Care Required
	<input type="checkbox"/> Patient Refused Evaluation and/or Care	<input type="checkbox"/> Support Services Provided	
This Unit's Crew Disposition:	<input checked="" type="checkbox"/> Back in Service, Care or Support Services Refused	<input type="checkbox"/>	<input type="checkbox"/>
This Unit's Transport Disposition:	<input checked="" type="checkbox"/> Patient Refused Transport	<input type="checkbox"/>	<input type="checkbox"/>
Reason for Refusal or Release Disposition:	<input checked="" type="checkbox"/> Against Medical Advice	<input type="checkbox"/> Released Per Protocol	<input type="checkbox"/> Released to Law Enforcement



# EXAMPLE DISPOSITION SITUATIONS

## BLS Unit's PCR when Transporting a BLS Downgrade

This Unit's Disposition:	Patient Contact Made	Cancelled Prior to Arrival at Scene	Cancelled on Scene, No Patient Contact
	Cancelled on Scene, No Patient Found	Non-Patient (i.e. Lift Assist, Organ Transport)	
This Unit's Patient Evaluation/Care Disposition:	Patient Evaluated and Care Provided	Patient Evaluated and Refused Care	Patient Evaluated, No Care Required
	Patient Refused Evaluation and/or Care	Support Services Provided	
This Unit's Crew Disposition:	<input checked="" type="checkbox"/> Assumed Primary Care from Another EMS Crew <input type="button" value="▼"/> <input type="button" value="☰"/> <input type="button" value="✖"/>		
<b>What Level of Care/Service was this Pt Assumed From?</b>			
<input type="button" value="+ Add"/>			
What Level of Care/Service was this Pt Assumed From? <input type="button" value="✖"/>			
What Level of Care/Service was this Pt Assumed From?: ALS			
This Unit's Transport Disposition:	<input checked="" type="checkbox"/> Transport by This EMS Unit (This Crew Only) <input type="button" value="▼"/> <input type="button" value="☰"/> <input type="button" value="✖"/>		



# EXAMPLE DISPOSITION SITUATIONS

## Assisting Primary EMS Crew

This Unit's Disposition:	<input checked="" type="checkbox"/> Patient Contact Made	<input type="checkbox"/> Cancelled Prior to Arrival at Scene	<input type="checkbox"/> Cancelled on Scene, No Patient Contact
	<input type="checkbox"/> Cancelled on Scene, No Patient Found	<input type="checkbox"/> Non-Patient (i.e. Lift Assist, Organ Transport)	
This Unit's Patient Evaluation/Care Disposition:	<input type="checkbox"/> Patient Evaluated and Care Provided	<input type="checkbox"/> Patient Evaluated and Refused Care	<input type="checkbox"/> Patient Evaluated, No Care Required
	<input type="checkbox"/> Patient Refused Evaluation and/or Care	<input checked="" type="checkbox"/> Support Services Provided	
This Unit's Crew Disposition:	<input checked="" type="checkbox"/> Incident Support Services Provided		
This Unit's Transport Disposition:	<input checked="" type="checkbox"/> Transport by Another EMS Unit		
Reason for Refusal or Release Disposition:	<input type="checkbox"/> Against Medical Advice	<input type="checkbox"/> Released Per Protocol	<input type="checkbox"/> Released to Law Enforcement
	<input type="checkbox"/> Other, Not Listed (i.e. Elopement)		

This Unit's Transport Disposition field can be completed with other options  
– *Transported by Another EMS Unit* will be the most common



# EXAMPLE DISPOSITION SITUATIONS

First Responder/Engine's PCR -  
Medic from Engine Transports/Rides in Another Other  
Unit's/Agency's Ambulance

<p>This Unit's Disposition:</p> <p>Patient Contact Made</p> <p>Cancelled Prior to Arrival at Scene</p> <p>Cancelled on Scene, No Patient Contact</p> <p>Cancelled on Scene, No Patient Found</p> <p>Non-Patient (i.e. Lift Assist, Organ Transport)</p>	<p>This Unit's Patient Evaluation/Care Disposition:</p> <p>Patient Evaluated and Care Provided</p> <p>Patient Evaluated and Refused Care</p> <p>Patient Evaluated, No Care Required</p> <p>Patient Refused Evaluation and/or Care</p> <p>Support Services Provided</p>	<p>This Unit's Crew Disposition:</p> <p>Initiated and Continued Primary Care</p> <p>Transport by Another EMS Unit, with a Member of This Crew</p>
---	--	---



# EXAMPLE DISPOSITION SITUATIONS

## Transporting Unit's PCR when a Member of Another Agency/Unit Rides Along

This Unit's Disposition:	<input checked="" type="checkbox"/> Patient Contact Made	<input type="checkbox"/> Cancelled Prior to Arrival at Scene	<input type="checkbox"/> Cancelled on Scene, No Patient Contact
	<input type="checkbox"/> Cancelled on Scene, No Patient Found	<input type="checkbox"/> Non-Patient (i.e. Lift Assist, Organ Transport)	
This Unit's Patient Evaluation/Care Disposition:	<input checked="" type="checkbox"/> Patient Evaluated and Care Provided	<input type="checkbox"/> Patient Evaluated and Refused Care	<input type="checkbox"/> Patient Evaluated, No Care Required
	<input type="checkbox"/> Patient Refused Evaluation and/or Care	<input type="checkbox"/> Support Services Provided	
This Unit's Crew Disposition:	<input checked="" type="checkbox"/> Provided Care Supporting Primary EMS Crew	<input type="checkbox"/>	<input type="checkbox"/>
This Unit's Transport Disposition:	<input checked="" type="checkbox"/> Transport by This EMS Unit, with a Member of Another Crew	<input type="checkbox"/>	<input type="checkbox"/>



# EXAMPLE DISPOSITION SITUATIONS

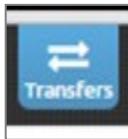
## Lift Assist

This Unit's Disposition:	Patient Contact Made	Cancelled Prior to Arrival at Scene	Cancelled on Scene, No Patient Contact
	Cancelled on Scene, No Patient Found	<b>Non-Patient (i.e. Lift Assist, Organ Transport)</b>	
This Unit's Patient Evaluation/Care Disposition:	Patient Evaluated and Care Provided	Patient Evaluated and Refused Care	Patient Evaluated, No Care Required
	Patient Refused Evaluation and/or Care	<b>Support Services Provided</b>	
This Unit's Crew Disposition:	<input checked="" type="checkbox"/> Incident Support Services Provided		
This Unit's Transport Disposition:	<input checked="" type="checkbox"/> No Transport		
Reason for Refusal or Release Disposition:	Against Medical Advice	Released Per Protocol	Released to Law Enforcement
	Other, Not Listed (i.e. Elopement)		



# TRANSFERS > UPLOAD

## Upload



- **Private BLS Agencies**
  - Only Upload (to BH) when making Base contact (per S-415)
- **ALS Agencies and Public BLS Agencies**
  - Upload (to BH) when making Base Hospital contact (per S-415)
  - Upload to Transporting Agency/Unit when transferring care
- Upload the PCR one time only during the incident for each intended destination.
  - Select BH or Agency uploading to which allows them to download PCR



# TRANSFERS > DOWNLOAD



## Download

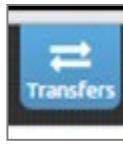
- **Download** the PCR that was uploaded to you by another Agency on scene
- Units will only **Download** if there is a transfer of care by an ALS Engine or ALS transporting unit to the transporting unit
- Download is only available from Agencies that use LEMESIS Elite



# ELITE FIELD > TRANSFERS

## Upload Transfer

You must upload to the correct Agency/Unit for them to be able to access the file



Find field... Save Post Print PDF CAD EKG Timeline Close

ELITE FIELD

Fields To Transfer to BH

Arrived at Patient Date/Time:

Find a Repeat Patient Button

Last Name:

Upload Transfer

Transfer to Agency: Current Agency

Transfer to Unit: M80|M80

Would you like to remove this incident from this Elite Field device after transferring?

Yes, Transfer and Remove  No, Transfer and Keep  Cancel

Hours  Minutes

Gender:  Female  Male  Other

Estimated Body Weight:  lbs  kg

Length Based Tape Measure:

No Patient Name Entered Validation 40 Menu Status: In Progress

Download Transfer  
Download data from server into your PCR

Find field... Save Post Print PDF CAD EKG Timeline Close

ELITE FIELD

Fields To Transfer to BH

Arrived at Patient Date/Time:

Download Transfer

Unit Notified Date: 01/11/2017 to 04/12/2017  Clear Dates  Search All Columns

Unit: Call Sign: All All

Order By: Unit Notified by Dispatch Date/Time  Newest First

Transfer To Call Sign	Unit Number	Incident Number	Address
M80	M80	666666	1358 Cedar Street

Unit Notified by Dispatch Date/Time 2/9/2017 13:17:26 Agency TEST - ImageTrend Call Sign 109

Refresh List Validation 40 Menu Status: In Progress

When Uploading you have the options to save or delete:

- If same agency “Yes, Transfer and Remove”
- If Different agency “No, Transfer and Keep” (one PCR per Agency)



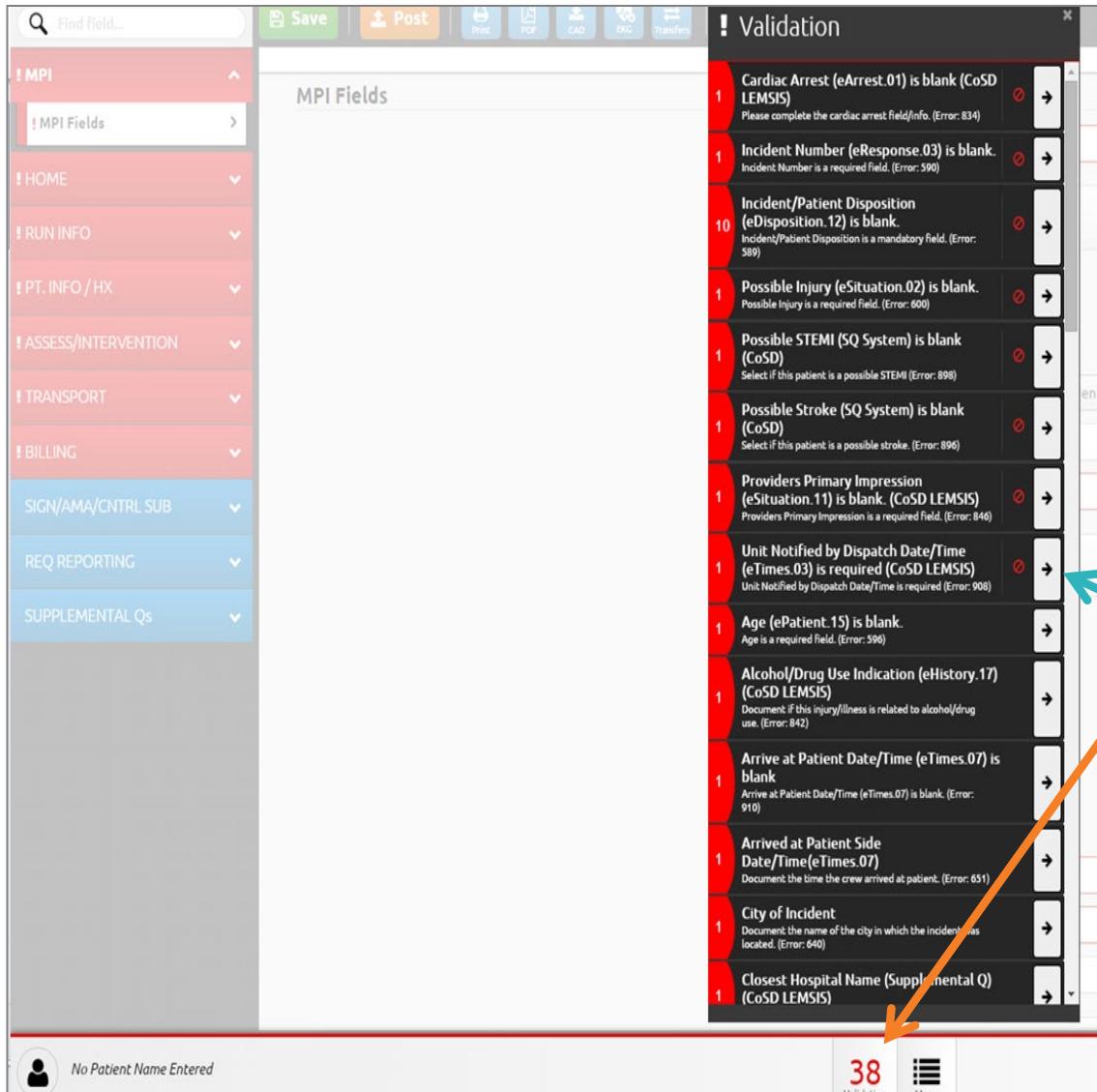
# POST EARLY – POST OFTEN

- Data from the Elite PCR easily flows to many sources
  - Transferring Agency/Unit
  - Base Hospital Record
  - State PCR Data Repository (CEMSIS)
- **Receiving Facility** – Physicians at the receiving facility can view critical information, including vitals and EKG findings, well before you arrive to the hospital. However, this only occurs when the PCR is “posted”.
  - The first posting should occur with just a few initial data elements immediately after the destination facility is entered
  - Subsequent posting should occur prior to hospital arrival whenever critical data elements are entered including:
    - EKG
    - Abnormal Vitals
    - Change in patient condition
    - Change in Destination
    - Any other pertinent updates



“POST EARLY – POST OFTEN”

# VALIDATION SCORE



The screenshot shows a software interface with a sidebar on the left containing various menu items: ! MPI, ! HOME, ! RUN INFO, ! PT. INFO / HX, ! ASSESS/INTERVENTION, ! TRANSPORT, ! BILLING, SIGN/AMA/CNTRL SUB, REQ REPORTING, and SUPPLEMENTAL Qs. The main area is titled 'MPI Fields' and shows a 'Validation' dialog box. The validation score is 38. The dialog lists 17 validation errors, each with a red exclamation mark and a red 'Validation' button. The errors are:

- 1 Cardiac Arrest (eArrest.01) is blank (CoSD LEMESIS)
- 1 Incident Number (eResponse.03) is blank. Incident Number is a required field. (Error: 590)
- 10 Incident/Patient Disposition (eDisposition.12) is blank. Incident/Patient Disposition is a mandatory field. (Error: 589)
- 1 Possible Injury (eSituation.02) is blank. Possible Injury is a required field. (Error: 600)
- 1 Possible STEMI (SQ System) is blank (CoSD)
- 1 Possible Stroke (SQ System) is blank (CoSD)
- 1 Providers Primary Impression (eSituation.11) is blank. Providers Primary Impression is a required field. (Error: 846)
- 1 Unit Notified by Dispatch Date/Time (eTimes.03) is required (CoSD LEMESIS)
- 1 Age (ePatient.15) is blank. Age is a required field. (Error: 596)
- 1 Alcohol/Drug Use Indication (eHistory.17) (CoSD LEMESIS)
- 1 Arrive at Patient Date/Time (eTimes.07) is blank
- 1 Arrived at Patient Side Date/Time(eTimes.07)
- 1 City of Incident
- 1 Closest Hospital Name (Supplemental Q) (CoSD LEMESIS)

At the bottom of the validation dialog, there is a red 'Validation' button. A red arrow points from the text 'Clicking the Validation number button to find the fields that need to be completed' to this button. Another red arrow points from the text 'Then click arrow next to the field listed to go to that field' to the 'Validation' button.

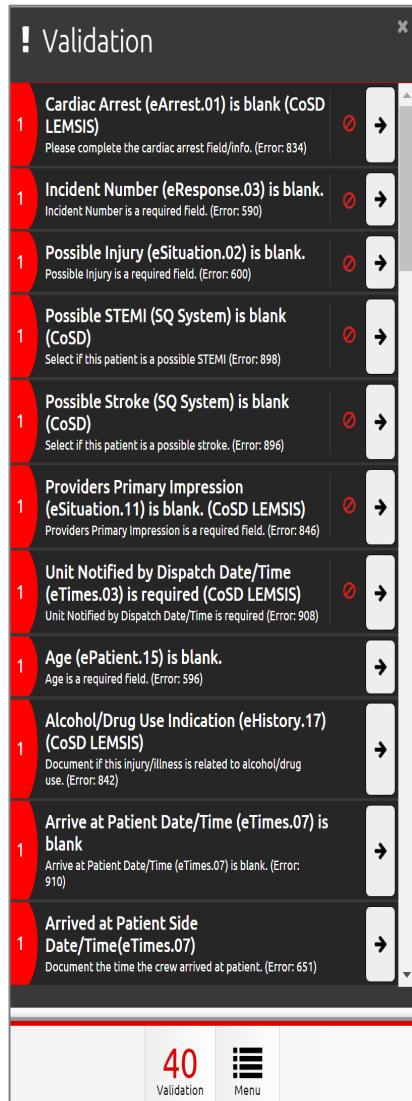
**Validation Score** - As fields are completed the validation score will increase

If red bars or exclamation marks remain, this indicates incomplete required fields, clear this up by:

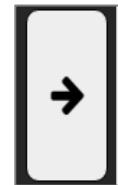
- 1) Clicking the Validation number button to find the fields that need to be completed
- 2) Then click arrow next to the field listed to go to that field
- 3) Repeat #1 and #2 until all red bars are blue and score reaches 100



# VALIDATION SCORE (CONTINUED)



= Closed Call rule  
These **must** be answered  
on all calls to Post



= Shortcut link  
Will take you to location  
of missing rule

# ELITE FIELD > POST

- **Posting** the PCR saves to the server/cloud
- **Posting** is required:



1) Once Base Hospital contact is made

**AND**

2) Once the call is complete - **Posting** allows access to the PCR for the Base and Receiving Hospitals

However, additional posting should occur prior to hospital arrival whenever critical data elements are entered including:

- EKG
- Abnormal Vitals
- Change in patient condition
- Change in destination
- Any other pertinent updates

**“POST EARLY – POST OFTEN”**

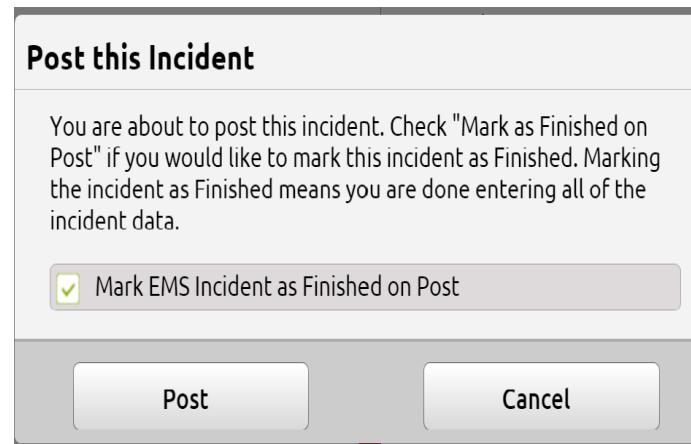


# COMPLETING DOCUMENTATION AND FINAL POST

## Final Posting



- When documentation is complete, perform the final Post
- To put the PCR in a “Finish” status check the box next to “Mark EMS Incident as Finished on Post” – This step many vary based on your Agency Billing Process



- Per Policy S-601 - All PCR's for patients transported to the hospital will be finished Prior to leaving the hospital
- All PCRs will be automatically **Locked** after 24 hours
- Locked PCRs can only be unlocked by Agency Administrators/Supervisors



# CRITERIA FOR UPLOADING TO THE STATE (CEMSIS)

## **Criteria for PCR to Activate Upload to the State (CEMSIS)**

### **Crew Documentation Responsibilities (All 4 must be met):**

- Validation = 100
- Incident is marked as Finished
- PCR Status
  - For Incidents that will be Billed, Status = Ready for Billing
  - For Incidents that are Not-Billed, Status = Finalized
- Incident is Locked (will occur after 24 hours)

**If a PCR does not meet these criteria, Administrators will notify crew to fix**

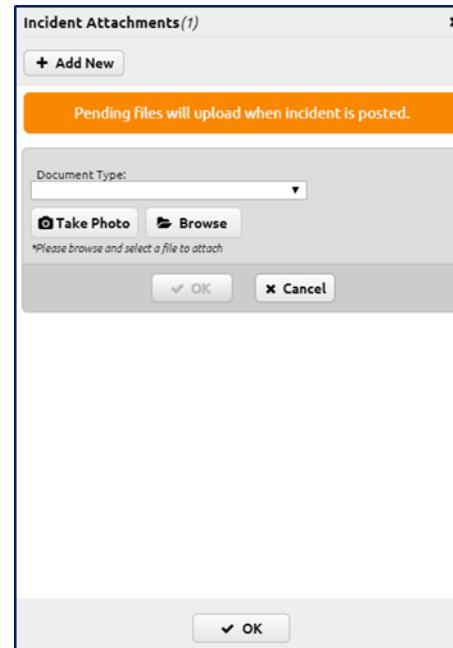


# ATTACHMENTS

## To attach supporting documents

Click the  button located in the bottom middle

1. Select attachments
2. Add New
3. Browse to find file or take a photo
4. Select OK for file
5. Select OK to close dialogue box



# TROUBLESHOOTING TIPS

**If you are having issues with your device such as....kicking you out or not letting you document calls make sure the following things have been checked:**

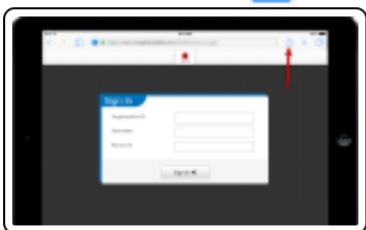
- **Cache/Clear History**
  - make sure all Incidents have been Posted, clearing the cache will remove them
- **Browser**
  - **Chrome**
    - **Recommended browser**
    - **Use the most current version as possible**



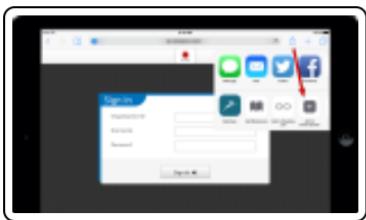
# IPAD ICON

## How to Create a Desktop Icon on iPads Elite Field

1. In Safari on an iPad, navigate to your Elite Field login page and log in.
2. Elite Field begins syncing automatically. If it does not, select *Settings > Sync*.
3. Log out of Elite Field.
4. Select the *Send to*  icon.



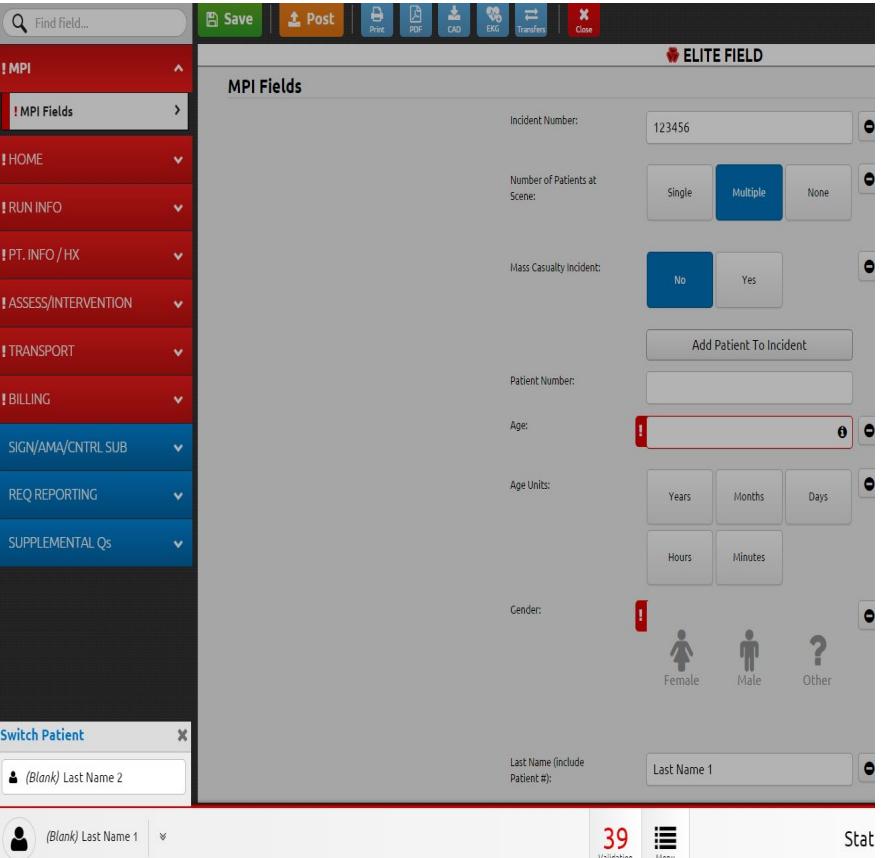
5. Select the *Add to Home Screen* button.



The Elite Field link appears on the iPad's desktop.



# DOCUMENTING MPI/MCI'S

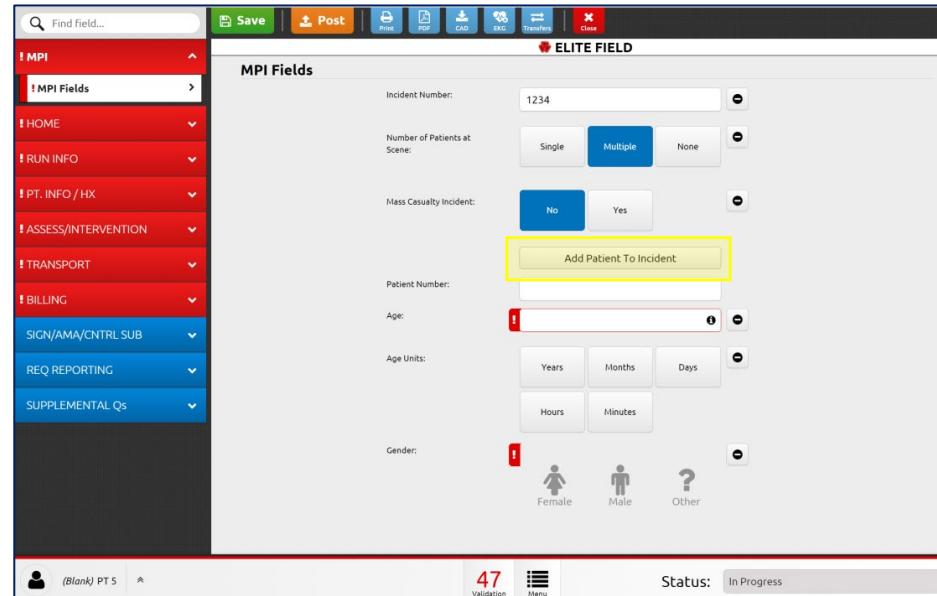


The screenshot shows the MPI Fields panel in the ELITE FIELD software. The interface includes a sidebar with various menu items like HOME, RUN INFO, and BILLING. The main panel displays fields for Incident Number (123456), Number of Patients at Scene (set to 'Multiple'), Mass Casualty Incident (set to 'No'), Patient Number, Age (with dropdown for Years, Months, Days, Hours, Minutes), and Gender (Female, Male, Other). A 'Save' button is located at the top, and a 'Switch Patient' dropdown is at the bottom.

- This is not intended to be used during an MCI
- **MPI Section > MPI Fields Panel**
  - *Number of Patients at Scene* field > Select “Multiple”
  - *Mass Casualty Incident* > Select “No”
  - Click *Add Patient to Incident* button for each patient (doing this links PCRs together and keeps the same incident #)
- Allows easy navigation between patients since a line list of patients is created in the lower left corner (Name area)
- Allow transfer of PCRs to different unit, as needed
- If you selected “Single” in the *Number of Patients at Scene* field and later encounter additional patients, you can change this field back to “Multiple” at any time to add patients.

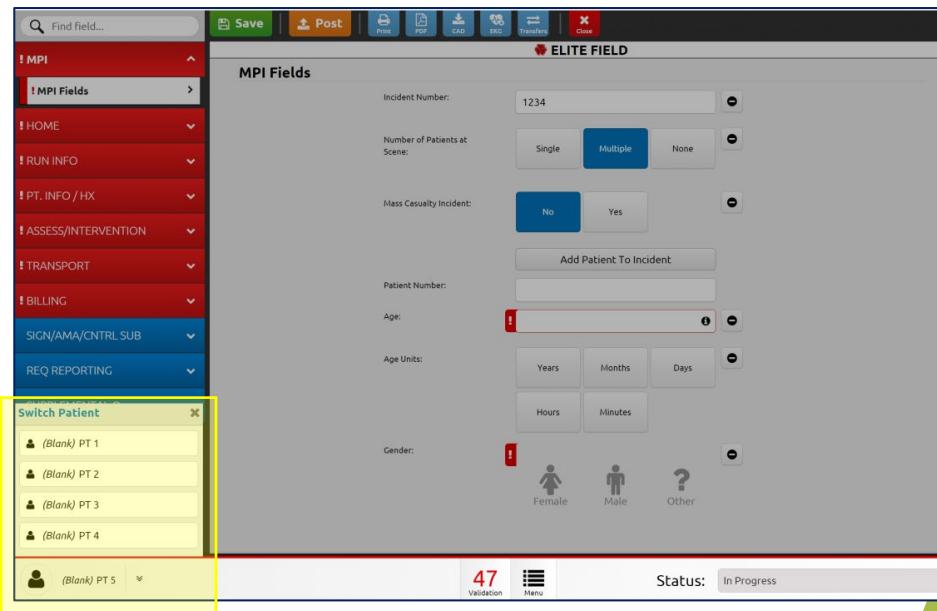


Add Patient to Incident button  
– allows you to add as many  
Patients as needed



The screenshot shows the Elite Field software interface. On the left is a vertical navigation menu with items like MPI Fields, HOME, RUN INFO, PT. INFO / HX, ASSESS/INTERVENTION, TRANSPORT, BILLING, SIGN/AMA/CNTRL SUB, REQ REPORTING, and SUPPLEMENTAL Qs. The main panel is titled 'MPI Fields' and contains fields for Incident Number (1234), Number of Patients at Scene (Multiple selected), Mass Casualty Incident (No selected), Patient Number, Age, Age Units, and Gender. At the bottom left of the main panel is a button labeled 'Add Patient To Incident' with a yellow box around it. The bottom of the screen shows a status bar with a user icon, '(Blank) PT 5', a red '47' validation icon, a menu icon, and a status of 'In Progress'.

Switch between Patients by  
clicking the **Patient Name**  
button in the bottom left  
corner



The screenshot shows the Elite Field software interface, similar to the one above but with a 'Switch Patient' dropdown menu open. The menu is titled 'Switch Patient' and lists five patient entries: '(Blank) PT 1', '(Blank) PT 2', '(Blank) PT 3', '(Blank) PT 4', and '(Blank) PT 5'. The entire list is highlighted with a yellow box. The rest of the interface is identical to the first screenshot, including the navigation menu, main panel fields, and status bar.

## For an MCI

### *MPI Section > MPI Fields Panel*

- *Number of Patients at Scene* field > Select “Multiple”
- *Mass Casualty Incident* > Select “Yes”
- With MCIs certain validation rules are inactivated
- After the call, all supporting paperwork can be attached to the run (Pictures or scans of triage tags, department ICS tactical worksheets, etc.)

The screenshot shows the 'MPI Fields' panel in the NEMED Elite software. The panel is titled 'MPI Fields' and contains the following fields:

- Incident Number: 123456
- Number of Patients at Scene: Multiple (selected)
- Mass Casualty Incident: Yes (selected)
- Patient Number: (empty)
- Age: 1 (highlighted in red)
- Age Units: Years, Months, Days, Hours, Minutes
- Gender: Female, Male, Other
- Last Name (include Patient #): Last Name 1

The status bar at the bottom indicates 54 Validation and Status: In Progress.

# NEXT STEPS

## Today:

- **Confirm Logins**

## After Today:

- **Practice**
  - Use generic logins
  - Now until Go-Live
- **Go-Live**
  - TBD
- **Questions**
  - Agency Administrators



Any questions?

