

**Chapter: COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES**  
**Key Words: Policy/Procedure/Protocol**

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**SUBJECT:** Documentation Standards and  
Transferral of Prehospital Care  
Record (PCR) Information

**POLICY NO:** S-601  
**PAGE:** 1 of 5  
**DATE:** revised July, 1 2018

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**AUTHORITY:** Health and Safety Code, Division 2.5, Sections 1797.202, 1797.204, and 1798;  
California Code of Regulations, Title 22, Sections 100170 and 100171; and  
California EMS System Core Quality Measures (EMSA #166 – Appendix E).

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## I. PURPOSE

To identify minimum patient documentation standards for transferral of prehospital patient information in order to meet state regulations, legal patient documentation requirements, enhance the continuum of care, and provide for Emergency Medical Services (EMS) system oversight and management. This policy reflects Assembly Bill 1129 Amendment to Health and Safety Code, Section 1797.227.

## II. BACKGROUND

### A. Definitions

County of San Diego, Local  
EMS Information System  
(CoSD LEMSIS):

County of San Diego EMS (CoSD EMS) data system and local data standard for EMS as managed and defined by CoSD Local EMS Agency (CoSD LEMSA). This data standard includes the National Emergency Medical Services Information System (NEMSIS), California EMS Information System (CEMSIS), and LEMSA specific data standards and elements.

Data Dictionary:

A document that describes the content, format, and structure of a dataset. The CoSD LEMSIS Data Dictionary can be found at [www.sandiegocountyems.com](http://www.sandiegocountyems.com).

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Patient Response:

A response to an individual who meets any of the following criteria:

1. Is an emergency patient (see CoSD EMS Policy S-415 “Base Hospital Contact/Patient Transportation and Report – Emergency Patients”, Section III.F.), or a patient for whom Base Hospital contact was made
2. Meet “obviously dead” criteria, or who has a Do Not Resuscitate (DNR), Physician Orders for Life-Sustaining Treatment (POLST), or equivalent documentation
3. Transported by a Basic Life Support (BLS) or Critical Care Transportation (CCT) unit
4. Air Medical Transport

Prehospital Care Record (PCR): An electronically generated record that is utilized by EMS field personnel to document and transmit patient care events at time of service. This record in the CoSD LEMSA format is approved and required by CoSD LEMSA as stated by the California EMS Authority (EMSA) and further detailed in the LEMSA Data Dictionary.

### III. POLICY

- A.** A PCR shall be completed and submitted electronically for every person meeting the definition of emergency patient response (see CoSD EMS Policy S-415 “Base Hospital Contact/Patient Transportation and Report – Emergency Patients”), BLS, CCT transport, and the following criteria:

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1. Each agency making patient contact shall complete a PCR which includes personnel from the agency who participated in that patient's case (assessment, treatment, advice, and/or transport).
2. Agencies may complete and electronically submit PCRs for non-patient response (e.g., call cancelled) for statistical analysis and quality by LEMSA.
3. In all incidents involving more than one patient, one form shall be completed for each patient, except when the County's mass casualty plan (Annex D) is activated (see CoSD EMS Policy S-140 "Triage, Multiple Patient Incident/Mass Casualty Incident/Annex D").
4. The PCR shall be completed in accordance with standards provided in the CoSD LEMSIS Data Dictionary to ensure Continuous Quality Improvement (CQI).
  - a. EMS personnel are encouraged to review their documentation and are responsible for PCRs to be complete and accurate.

**B. Paramedic Advanced Life Support (ALS) Documentation**

1. EMS minimum standards as required by the current CoSD LEMSIS Data Dictionary:
  - a. The LEMSIS Data Dictionary includes mandatory data standards and elements required by NEMSIS, CEMSIS, and LEMSIS.
  - b. A minimum validation score of 95 shall be required for all PCRs prior to completion, locking of document, and submission (as defined in the LEMSA EMS Data Dictionary).

**C. Air Medical Documentation**

1. EMS minimum standards as required by the current CoSD LEMSIS Data Dictionary:
  - a. The LEMSIS Data Dictionary includes mandatory data standards and elements required by NEMSIS, CEMSIS, and LEMSIS.
  - b. A minimum validation score of 95 shall be required for all PCRs prior to completion, locking of document, and submission (as defined in the LEMSA EMS Data Dictionary).

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**D. EMT (BLS) Documentation**

1. EMS minimum standards as required by the current CoSD LEMSIS Data Dictionary:
  - a. The LEMSIS Data Dictionary includes mandatory data standards and elements required by NEMSIS, CEMSIS, and LEMSIS.
  - b. A minimum validation score of 95 shall be required for all PCRs prior to completion, locking of document, and submission (as defined in the LEMSA EMS Data Dictionary).

**E. CCT Documentation**

1. EMS minimum standards as required by the current CoSD LEMSIS Data Dictionary:
  - a. The LEMSIS Data Dictionary includes mandatory data standards and elements required by NEMSIS, CEMSIS, and LEMSIS.
  - b. A minimum validation score of 95 shall be required for all PCRs prior to completion, locking of document, and submission (as defined in the LEMSA EMS Data Dictionary).

**F. Transfer of Care**

1. Verbal Report – When patient care is transferred, field personnel shall give a verbal patient care report to the receiving caregiver to ensure continuity of care. The verbal report will relay, but is not limited to: pertinent history, vital signs, interventions, and response to treatment.
2. PCR including field cardiac rhythm strips shall be made available to the physician and/or staff prior to returning to service.
3. For instances of CoSD LEMSIS downtime, refer to CoSD EMS Policy S-603 “System Management and Support during Downtime”.

**G. Data Collection and System Evaluation**

1. EMSA requires all LEMSAs to report a set of outcome-based Core Measures based on data collected by agencies, hospitals, and specialty care centers. The data required to meet these measures is collected through the LEMSIS system; therefore, EMSA will be aware of each agency’s data submission status.

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2. Local defined measures and trends based on data collected from LEMSIS System agencies, hospitals, and specialty care centers will be published by LEMSA.

**H. Hospital Documentation**

1. Base Hospital documentation shall complete all required fields within 48 hours as defined in the LEMSIS Data Dictionary (see CoSD EMS Policy S-603 “System Management and Support during Downtime”).
2. Receiving Hospital documentation shall complete all required fields within 48 hours as defined in the LEMSIS Data Dictionary (see CoSD EMS Policy S-603 “System Management and Support during Downtime”).