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December 20, 2022

EMS CARDIAC MONITOR DATA RETENTION COMMUNITY CONSENSUS GUIDANCE

A Monitor Data Workgroup was formed as part of the San Diego County EMS Office quality assurance/quality improvement (QA/QI) program. This memo reports the community consensus guidance for cardiac monitor data retention.

The Workgroup was tasked with developing consensus recommendations for communitywide cardiac monitor data management. Base Station Physician Committee (BSPC) members and EMS agency representatives participated in the Workgroup. Following multiple meetings, rounds of open community input, and best practice reviews, the Workgroup determined that an enhanced QA/QI process would be achieved by ensuring standardization in EMS cardiac monitor data integration and retention.

The final Workgroup recommendations are adopted, with minor modifications, and attached to this memo. We appreciate all community members for their participation in the development of this product.

Sincerely,

Kristi L. Koenig, MD, FACEP, FIFEM, FAEMS, Medical Director
San Diego County Emergency Medical Services Office
San Diego County Fire

cc: Andrew Parr, EMS Administrator

Attachment:
EMS Cardiac Monitor Data Retention Community Consensus Guidance, December 20, 2022

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EMS CARDIAC MONITOR DATA RETENTION COMMUNITY CONSENSUS GUIDANCE

EMS agencies should retain the following for at least one year
- 12-Lead EKGs/EKG rhythm strips (including initial, final and changes in rhythm)
- End-tidal CO_2 data (capnometry and capnography)
- Chest compression data
- Automatic blood pressure data

Data should be maintained on the following subset of patients
- All cardiac arrest/CPR
- All treated dysrhythmias
- Assisted ventilation — BVM or advanced airway placement (include $EtCO_2$ data)

    For patients meeting the above criteria (cardiac arrest, treated dysrhythmias, assisted ventilation)
    - Preserve audio recordings
    - Perform 100% agency QA/QI review including performance feedback to field personnel
    - Permanently store patient data
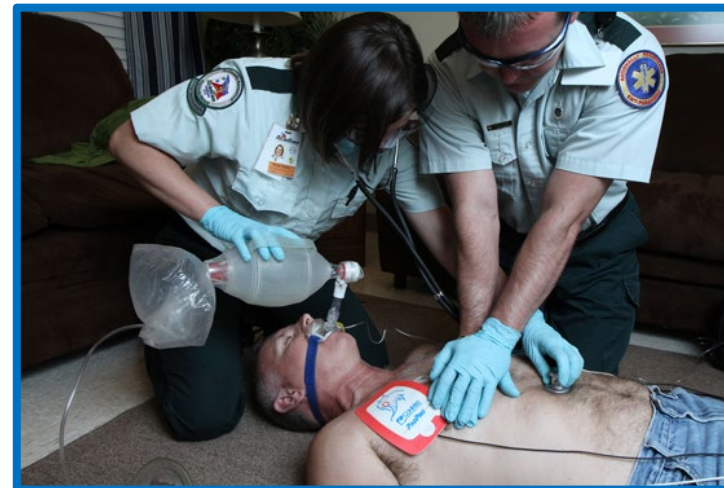
Additional best practice recommendations
- Collect, store, and retain cardiac monitor data for acute status patients, including, but not limited to, STEMI, stroke, and trauma cases
- Maintain or institute processes for uploading and integrating monitor data points into the PCR
- For CPR cases, use, retain, and integrate cardiac monitor "code summary" functionality

EMS Cardiac Monitor Data Workgroup Best Practice Recommendations

Patient Inclusion Criteria

- Cardiac Arrest (including ROSC)
- Assisted Ventilation (BVM or Advanced Airway Placement)
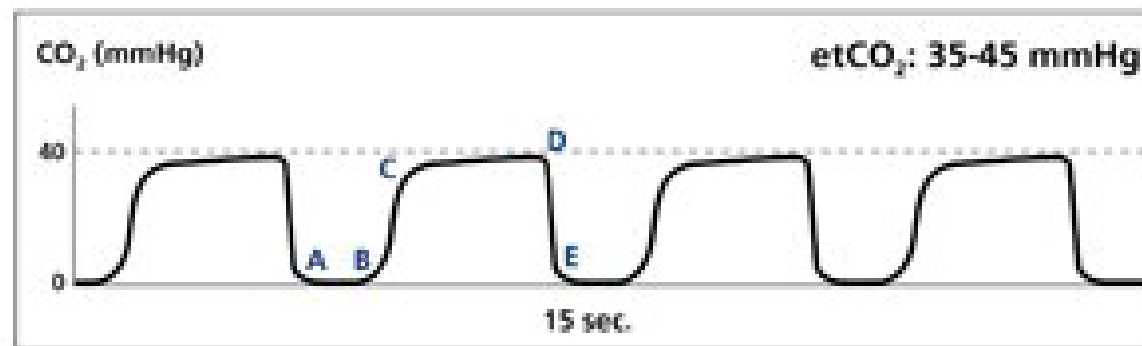- Dysrhythmias Requiring Treatment

EMS Cardiac Monitor Data Workgroup
Best Practice Recommendations

Data Elements for Retention (store for at least 1 year)

- Continuous $EtCO_2$ Recordings
- EKG Rhythm Strips (Initial, Final, and Any Changes **or** Continuous)
- Chest Compression Metrics
- Automatic Blood Pressure Data

EMS Cardiac Monitor Data Workgroup Best Practice Recommendations

Agency Actions for All Patients Who Meet Criteria

- Perform QA Review
- Preserve Audio Recordings
- Establish Process for Integrating into PCR
- For CPR Cases, Integrate "Code Summary"