

PAPER PCR ELEMENTS and DESCRIPTION

#	CATEGORY	DESCRIPTION
1	EMS Agency - #48 (C0_01)	Can be automatically populated or could be reported electronically if not on PCR.
2	Provider Agency (E02_01) CEMSIS	Would be automatically populated by ePCR or hand entered. See codes below: 1. Benicia Fire Dept 4. Medic Ambulance Svc. 5. Vacaville Fire Dept. 6. Rio Vista Fire Dept. 7. Fairfield Fire Dept. 8. Cordelia Fire Dept 9. Dixon Fire Dept. 20. Other Ground Ambulance Agency permitted by EMS Agency 90. CALSTAR Air Ambulance 91. CHP EMS Aircraft (H-30) 92. REACH Air Ambulance 99. Other EMS Aircraft
3.	Unit # (E02_12) CEMSIS	Unique Solano County dispatch ID #.
4.	Incident # (E2_02) CEMSIS	The unique number provided by the agency responding to the call. May be pre-populated by ePCR.
5.	Date	The actual date of the call.
6.	Time of onset	When patient's symptoms started.
7.	PCR # (E01_01) CEMSIS	Unique number assigned by ePCR to each call or by provider.
8.	Primary method of payment (E07_01) CEMSIS	The primary method of payment or type of insurance associated with this EMS encounter. See list of codes below: -5 – Not available -10 – Unknown -15 – Not reported -20 – Not recorded -25 – Not applicable 720 – Private commercial insurance/HMO 725 – State Medicaid (Medi-CAL) 730 – Medicare 735 – Not billed 740 – Military insurance/other Government insurance 745 – Self pay or uninsured 750 – Workers' Compensation
9.	Incident Location (E08_12) CEMSIS	Location of incident must include city. This could be automatically pre-populated from ePCR or must be entered manually.

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10.	Grid # or GPS (scene coordinates) (E08_10) CEMSIS	Enter the GPS coordinates of the incident location. Could be pre-populated in the ePCR.
11.	Incident Zip Code (E08_15) CEMSIS	Enter the incident location zip code.
12.	Patients' telephone number (Solano County specific)	Enter the patients' 10-digit telephone number.
13.	Patient's first name (Solano County specific)	Enter the patients' first name
14.	Patient's last name (E06_01) CEMSIS	Enter the patient's last or family name. Could be auto-populated by ePCR.
15.	Patient's address (Solano County specific)	Enter the patient's physical home address.
16.	Patient's city (Solano County specific)	Enter the patient's city where they live.
17.	Patient's state (Solano County specific)	Enter the state where the patient resides.
18.	Patient zip code (E06_08) CEMSIS	Enter the patient's zip code. This element could be extracted from the ePCR.
19.	Responsible party name (Solano County specific)	To be entered if the patient is a minor or under a conservatorship.
20.	Responsible party address (Solano County specific)	To be entered if the patient is a minor or under a conservatorship.
21.	Responsible party city (Solano County specific)	To be entered if the patient is a minor or under a conservatorship.
22.	Responsible party state. (Solano County specific)	To be entered if the patient is a minor or under a conservatorship.
23.	Responsible party zip code. (Solano County specific)	To be entered if the patient is a minor or under a conservatorship.
24.	Responsible party phone number. (Solano County specific)	To be entered if the patient is a minor or under a conservatorship.
25.	Age (E06_13) CEMSIS	Enter the patient's age.
26.	Age Units (E06_15) CEMSIS	Enter the units that best describe the patient's actual age (day, months, years).
27.	DOB (E06_16) CEMSIS	Enter the patient's date of birth (mm/dd/yyyy).
28.	Sex (E06_11) CEMSIS	Enter the patient's gender.

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29.	Weight (E16_01) CEMSIS	Enter the patient's approximate weight in kilograms.
30.	PMD (Private Medical Doctor) (Solano County specific)	Enter the name of patient's regular MD (This information may be found on prescription bottles)
31.	Partial patient ID number (E06_10) CEMSIS	Enter the last five digits of the patient's social security number.
32.	Race (E06_12) CEMSIS	Enter the patient's race into this area. (C, N, A)
33.	Chief complaint	Enter the patient's chief complaint.
34.	Past medical history	Enter the patient's pertinent medical history in this area.
35.	Medications	Enter the patient's prescribed medications in this area.
36.	History of Sub/ History of ETOH (E12_19) CEMSIS	This box should be checked if there is evidence of drug or ETOH use at the scene or the patient indicates their use of controlled substances.
37.	Mechanism of Injury (E10_03) CEMSIS	This indicates if the type of injury is caused by blunt force, penetrating injury, or burn. See table below:
38.	Intent of Injury (E10_02) CEMSIS	If possible, the prehospital personnel can determine how the injury occurred.
39.	Cause of Injury (E10_01) CEMSIS	This provides information on the reported/suspected external cause of the injury.
40.	Physical exam (Solano County EMS Requirement)	Details the patient's physical exam finding. Physical exams should be done serially and recorded on the PCR.
41.	Medication (E16_03, E18_04, E18_05, E18_06, E18_07, E18_08) CEMSIS	These data elements provide information on medication administration to patients.
42.	Procedures (E19_03, E19_05, E19_06, E19_07) CEMSIS	These data elements provide information on procedures done by paramedics to patients.
43.	EKG (E14_03) CEMSIS	Document patient's initial cardiac monitor rhythm or any changes. A 6-second strip must be attached to the PCR.
44.	Patient's Vital Signs (E14_04, E14_05, E14_06, E14_07, E14_11, E14_12) CEMSIS	These are measured on patient. Serial vital signs should always be performed, time permitting.

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45.	Pain scale (E14_23) CEMSIS	This documents the level of pain the patient is experiencing. Ten (10) is the maximum level of pain.
46.	Glasgow Coma Scale (GCS) (E14_19) CEMSIS	This documents the patient's initial level based on eye, verbal, and motor responses.
47.	Number of patients (E08_05) CEMSIS	This lists the number of patients at the scene of an incident.
48.	MCI (box) (E08_06) CEMSIS	Checking this box indicates the patient was a patient in a multi-casualty incident.
49.	Response Code & Transport Code (E02_20) CEMSIS	This indicates the code that responding unit used going to the scene and the code used transporting from the scene to destination.
50.	First Responder & aid performed before arrival. (E09_01, E09_02, E09_3) CEMSIS	This field indicates the care patients received by initial first responders and their agency.
51.	Primary clinical impression (E09_15) CEMSIS	This is the primary injury or illness the paramedic is treating the patient for.
52.	Secondary clinical impression (E09_16) CEMSIS	This is the secondary injury or illness the paramedic is treating the patient for.
53.	Receiving Facility (Solano County specific)	This field is to note the patient's destination.
54.	Reason for destination (E20_16) CEMSIS	This checkbox fields provide reasons why a specific destination was chosen.
55.	Narrative (Solano County specific)	This field allows the paramedic to document items/information not captured in any other field and provide a summary of the call.
56.	Times: (E05_03 - E05_07; E05_09 - E05_11; E05_13) CEMSIS	This is the area to document call times.
57.	Signature block and paramedic/EMT number (Solano County specific)	This field contains the treating paramedic/EMT signature and certification/accreditation number.