

Subject: Administration – Patient Care Record System
Prehospital Care Report (PCR)

Associated Policies: 2102, 2103, 2109, 2404

- I. Authority and Reference (incorporated herein by references)
 - A. Division 2.5 of Health and Safety Code
 - B. California Code of Regulations, Title 22
 - C. North Coast EMS Policies and Procedures
- II. Purpose
To define the process for documenting patient care and for completion and distribution of the Prehospital Care Report (PCR) form.
- III. Procedure
 - A. A North Coast EMS (NCEMS) approved PCR will be completed for every patient, including cases in which the patient is not transported.
 - B. North Coast EMS agrees to maintain the North Coast EMS employed PCR-Data System software, but reserves the right to leave a fee, approved by the Joint Powers Governing Board, to cover the costs of the maintenance of that system when utilized by approved ALS providers and base hospitals located within the region.
 - C. The PCR will be filled out completely, including all required elements as indicated in the North Coast EMS approved electronic data system. Reporting requirements will change over time and these changes will be reflected in the approved and NCEMS supported electronic data system. North Coast EMS reserves the right to require data beyond that in the National EMS Information System (NEMSIS) and/or California EMS Information System (CEMSIS).
 - D. Each ALS/LALS Service Provider Agency is responsible for training EMT employees in the initiation, completion, and distribution of the PCR. The base hospital Prehospital Care Nurse Coordinator (PCNC) will provide assistance and support in orientation of new personnel to the Prehospital Care Reporting and Database System (PCR-Data System) used in PCR completion.
 - E. The PCR must be completed immediately upon delivery of the patient to the receiving facility. A delay in submitting the report is permissible if extenuating circumstances exist, such as another call/assignment occurring which would preclude the ability to complete the PCR, or a non-transporting EMT transferring patient care to another EMT and not

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- accompanying the patient to the hospital. In these circumstances only, delivery of the completed PCR may be delayed up to 24 hours.
- F. EMT's must utilize the Prehospital Care Reporting and Database System to generate a PCR upon patient delivery to a regional hospital. The PCR must be completed as indicated in the approved electronic data system. Exceptions to the use of the North Coast EMS approved data system are as follows:
 - F. Both the locally installed and online versions of the PCR-Data System are out of service, and the EMT has alerted North Coast EMS to this circumstance by phone or email. Under extenuating circumstances when a PCR is not completed at the time of patient delivery, the prehospital care personnel must:
 - 1. Leave relevant patient information with the receiving hospital RN or MD ensuring that information needed for continuing care of the patient has been provided.
 - 2. Complete the PCR on the PCR-Data System and deliver a copy to the receiving hospital as soon as possible and no more than twenty-four (24) hours after patient delivery.
 - 3. Notify the base hospital PCNC of the delay utilizing the PCR-Data System Notification Form.
 - G. Prehospital care personnel without access to the PCR-Data System may utilize the NCEMS approved (handwritten) PCR. Provision of handwritten PCR forms is the responsibility of the provider. In addition, the base hospital PCNC must be notified in writing utilizing the PCR-Data System Notification Form why the handwritten form was used.
 - H. The PCR must indicate if radio delay and/or radio failure protocols were utilized. (Follow procedures outlined in Policy #2404).
 - I. Review of the PCR will follow the medical control procedure.
 - J. The PCR Notification Form is subject to the approval of the base hospital PCNC.
 - K. All PCR's that have not been entered on the PCR-Data System without an approved PCR Notification Form must be entered on the PCR-Data System before the submitting personnel will be eligible for re-accreditation or re-certification.
- VI. Alternative PCR Data Systems
- A. North Coast approved ALS provider agencies may employ an alternative data system under the following circumstances:
 - 1. Prior to purchase or adoption of any alternative data system, the provider agency must submit the program to North Coast EMS for

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- evaluation. North Coast EMS may reject or require modifications to any PCR data system that does not meet the criteria enumerated below.
2. All data elements employed within any alternative PCR data system shall adhere to National EMS Information System (NEMIS), California EMS Information System (CEMIS), and the North Coast EMS standardized data definitions and coding (NCEMS SDDC), and must be modified to reflect future changes to these standards, unless the data element does not have a NEMIS, CEMIS and/or NCEMS SDDC equivalent.
 3. Any PCR data system submitted for North Coast EMS approval shall link to the data system currently employed and maintained by North Coast EMS throughout the North Coast EMS region such that all North Coast EMS required data (see above III. B.) is entered into the North Coast EMS maintained regional database, and can be viewed, reported on, and queried without additional data manipulation on the part of North Coast EMS. To ensure optimal data validity and standardization, North Coast EMS will require that data be collected following specific data entry formatting, including field names, default field values, data types, multiple choice data elements, etc.
 4. Providers shall assure in writing that the PCR data system they have submitted for approval will be modified to reflect required data changes as determined by North Coast EMS, and that such changes will be effected within 30 days of having received such request by North Coast EMS.
 5. Providers shall assure in writing that the PCR data system they have submitted for approval will employ data security technology comparable to that currently employed within the North Coast EMS approved data system and that all State and Federal medical record confidentiality will be observed. Only provider users having discrete passwords may employ any North Coast EMS approved PCR data system such that the identity of those accessing the system may be determined.
 6. Providers shall assure in writing that PCR data will be forwarded and aggregated to the North Coast EMS database within 24 hours of the respective patient encounter.
 7. North Coast EMS also reserves the right to recoup reasonable costs from any approved ALS Provider or base hospital that utilizes an Alternative PCR Data System approved by North Coast EMS for

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8. Failure to meet the requirements enumerated above will result in the immediate rescission of the provider's authorization to use the alternative PCR data system. **The provider shall acknowledge in writing their understanding of this provision**, and their agreement to have their personnel immediately revert to use of the North Coast EMS Data System until such time as North Coast EMS determines that the provider's alternative data system has been modified to meet North Coast EMS requirements.

Approved as to Form: