



Administrative Policy		7701
Effective September 21, 2018		Expires March 31, 2019
Policy: Patient Care Records	Approval: Medical Director Reza Vaezazizi, MD	Signed
Applies To: PSP, EMT, AEMT, PM, MICN, BHP, EMS System	Approval: REMSA Director Bruce Barton	Signed

PURPOSE

This policy sets the minimum requirements for patient care records, distribution, reporting, and data collection. Each first response agency and/or transport service may adopt additional internal requirements in order to meet their administrative and operational needs.

AUTHORITY

[California Health and Safety Code - Division 2.5: Emergency Medical Services \[1797. - 1799.207.\]](#)
[California Code of Regulations, Title 22. Social Security, Division 9. Prehospital Emergency Medical Services](#)

Patient Care Records

A REMSA electronic patient care report (ePCR) will be completed for every patient response. The highest level of REMSA authorized provider from each agency or service seeing a patient will each complete a PCR/ePCR. Students may not participate in completing the ePCR. The ePCR must be completed by the licensed or certified provider(s) directly participating in the patient encounter.

The ePCR must accurately and completely document the patient response and care while including the information required by Title 22, Chapter 4, Article 8, and Section 100170. Additionally, the ePCR must comply with the Level I, II, and III CEMSIS Data System Standards, and all applicable REMSA policies and procedures. In the case of a Multiple Casualty incident, a minimum of a single ePCR must be completed by the first responder agency, with the required ICS forms scanned and attached.

Record Distribution

The ePCR will be distributed in this manner:

1. The first response agency’s and transport agency’s completed ePCR must be made available in the online hospital database, to the Prehospital Receiving Center (PRC) and/or Base Hospital (BH) that received the associated patient within two hours.
2. Copies of the ePCR will be provided upon request to:
 - a. The REMSA authorized PRC or BH that received the associated patient.
 - b. The BH that provided medical direction for a specific patient or incident.
 - c. REMSA.

Required hardware, internet/data access, phone lines, and administration are the responsibility of each agency or service utilizing the ePCR.

Documentation requirements may be deferred when emergency response is required, but must be completed as soon as possible. All attempts to complete ePCR’s should be made prior to end of shift for EMS providers.

Multi-casualty incident (MCI) records, including incident command system forms and triage tags, will be distributed in this manner:

1. A hard copy of the MCI records will be provided to the BH that provided medical direction and/or REMSA within three business days of the request.

Voice recordings and BH communication logs will be distributed in this manner:

1. These will be provided to REMSA within three business days of the request.

Record Review

Each agency, service, PRC, BH, and the EMS Agency will review patient care records as required by the Riverside County EMS System Quality Improvement Program.

Record Retention

All Patient care records must be securely retained for at least seven years, or for two years after the patient reaches the age of majority, whichever is longer. Privacy will be protected by compliance with the Health Insurance Portability and Accountability Act (HIPAA).

Data Collection

All first response and ground transport programs will transition to the REMSA contracted ePCR system by January 1, 2017. Any modifications to data elements and/or user interface will be developed through the Data Group and approved by REMSA. This will allow each program's data to be pooled for County wide analysis, quality improvement processes, and research. This application will also be used to report data to the California EMS Authority (EMSA) database. REMSA will collect, validate, and report this data. Electronic patient care records via the REMSA authorized ePCR system are the only acceptable method of capturing patient response data.