

Waterford Ambulance Service
Policy & Procedure Manual

Patient Care Reports
Created: 08/01/2012
Revised:

A **complete** patient care report (PCR) must be filled out any time contact with a patient occurs (transported, refusal, walk-in, etc.) or there is potential for contact with a patient (cancelled prior to arrival, stand-by etc.).

Everyone incident number generated by Waterford Emergency Communications Center (WECC) must have an associated patient care report.

Each PCR must be **completely** filled out by the EMT. This include incident number, times, billing information, etc.

Each PCR must be completed prior to the end of the call. In extenuating circumstances, if the report absolutely cannot be filled out prior to the end of the call. The information that has been gathering needs to be safe guarded by the EMT. The member needs to notify the president by email or by phone. Under no circumstances, are the PCR's to be left in an individual's mailbox, taken with an individual mailbox that is no secured.

Any EMT who violates HIPPA or cause an unnecessary delay in the processing of PCRs may be suspension and or termination without prior warning... These are serious that have the potential to place liability on Waterford Ambulance Service, as well as disrupting the ability to collect billing revenue. Completing a PCR in a timely manner is core components of the requirements of an Emergency Medical Technician-please keep that in mind.

A PCR is a complete and concise record of what happened to the patient. **It is a legal document and will become part of the patient's medical records.**

A PCR is designed to provide the Emergency Department with the Chief Complaint, a through history of illness or injury, the care provided in the pre-hospital setting, and any improvement or deterioration in the patient's condition prior to arrival in the emergency department.

The PCR is also a legal document which supports your actions and judgment. The law takes the position that "if it is not documented, it wasn't done"

In all case where a patient is transported to a hospital, PCRs shall be completed in the Emergency Department **prior to leaving** and a complete copy shall be left with the Emergency Department staff.

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The PCR should contain (at a minimum) the following information:

1. General patient information (name, age, sex, complete address including apartment, unit and /or floor number).
2. Exact location of the incident (complete address including apartment, unit and/or floor number).

Note: if the incident occurred on the street (ex: a motor vehicle crash), then the closest numerical address or block number is needed, as well as any intersections (ex: In front of 88 Clark Lane, 850 block of Hartford Road, or at the intersection of Cross Road and Foster Road.

3. Status and position of the patient upon your arrival.
4. Chief Complaint, history of the present illness or accident, mechanism of injury, and description of the scene.
5. Other people or agencies that provided care or information at the scene.
6. Head to toe assessment finding
7. At least two complete set of vital signs
8. Change in patient status
9. What was done prior to your arrival and by whom.
10. Complete and accurate time log
11. Details of care you provided and the patient's response to treatment
12. Any specific detail that may be specific to the situation

All appropriate boxes must be marked, even if the information is repeated in the narrative section of the PCR.

*** REMEMBER: The PCR is your opportunity to paint a picture of your observations and findings. The more complete your PCR is, the less risk of liability there is. ***