

*Oakland County Medical Control Authority*

**Procedure Protocols**

PATIENT CARE RECORD, ELECTRONIC DOCUMENTATION & EMS INFORMATION  
SYSTEM ADDENDUM

February, 2018

Section 7-15.1

***Patient Care Record & Electronic Documentation & EMS Information System  
Addendum***

- A. Prior to emergency department departure, a completed patient care record (PCR) must be left at the ED either in an electronic format, a MCA-approved Field Note Form, or an Oakland County EMS Run Form. If a Field Note Form is left at the ED, an electronic PCR must be made available to the ED within two (2) hours. Electronic PCR's may be submitted to the ED via the following methods:
- EMS printer
  - fax or e-fax
  - secured e-mail
- Each hospital will provide EMS with a computer with Internet access, monitor, printer (including ink and paper), as well as 24-hour equipment support. Each hospital will also provide a secure fax number, secure e-mail.
- B. Special Studies Data: Data submission may be required by the PSRO for special studies as determined by the PSRO Annual Plan and other ad hoc reviews.
- C. Audits: Additional data may be requested to complete periodic agency audits.
- D. Compliance: Late or lack of valid data submission will generate a letter of notification as follows:
- One month: Written letter of notification
  - Two months in a year: Required written corrective action plan to PSRO.
  - Three months in a year: Required in person and in writing presentation of corrective action plan at the next regularly scheduled PSRO.
- E. MFR Agencies: A MFR agency must provide the transporting agency with a complete oral report and their agency's incident number pertaining to the run.
- F. ALS/BLS Non-Transporting Agencies: An ALS or BLS Non-Transporting agency will turn over a written run report to the transporting agency, if it does not delay or interfere with the transport of the patient.
- G. Data Elements:
1. OCMCA approved LSA's shall be required to submit all data elements pertinent to each patient care record.
  2. The OCMCA requires all patient identifiable information be submitted by LSA's and made available to the OCMCA.