

Oakland County Medical Control Authority
System Protocols
DOCUMENTATION

June, 2018

Section 8.12

Documentation Policy

1. An EMS patient care record will be completed by all responding Life Support Agencies (LSA) on all patients where any type of care has been rendered, to include: vital signs, assessment, including those patients who refuse treatment or transport, and cancelled calls.
2. LSAs accompanying the patient will complete the EMS patient care record in a timely fashion and deliver a copy of the record to the receiving facility (See Data Submission Protocol).
3. All EMS patient care records will be completed in their entirety and the EMS personnel completing the EMS patient care record will create clear, legible, and professional documentation.
4. Medical abbreviations that are not on the OCMCA Approved Medical Abbreviation List are not permitted.
5. The patient care record will be distributed in the following manner:
 - a. First copy kept by agency for their record.
 - b. Second copy will be sent/left to the receiving facility to be attached to the medical record.
 - c. A copy shall be made available to the OCMCA.
6. Any information pertaining to the patient (e.g. 12-Lead EKG) must include the patient's full name and date of birth.

NOTE: The EMS patient care record is a confidential patient care document and is not to be released to anyone other than those involved in the patient's care or OCMCA's Professional Standards Review Organization, without the patient's written release of information permission.