



Carroll County Department of Fire and EMS

EMS Policies and Procedures

Standard Operating Procedure: 3.17	Effective Date: June 8, 2023
Subject: EMS Reporting and Documentation	Section: Emergency Medical Services
Authorized: Michael Stoner, Assistant Chief	Revision Date: September 20, 2023

I. PURPOSE

EMS documentation is the record of the unique professional activities transforming clinical judgments and interventions into a professional, legal, and financial document. Accountability to federal, state, and local regulations is an expectation of all health care providers. As a mirror of professional practice, patient care report documentation reflects the relationship between the provider and its sponsoring agency to the legal standards and regulations under which we practice.

II. DEFINITIONS

Image Trend Elite – An electronic medical record software platform designed specifically for documentation of prehospital emergency medical service care.

Field Bridge- An ImageTrend, portable computer-based EMS record input program. This program synchronizes report entries with Maryland eMeds by means of an internet connection.

Patient Contact- A patient contact occurs any time an EMS or Fire unit is on the location or scene of an incident where a person is visually observed, verbally indicated there is, or is assessed for a suspected medical condition or traumatic injury.

Posting- The transfer (syncing) of Field Bridge electronic EMS reports to Maryland eMeds using an internet connection.

Synchronizing- Synchronizing a Field Bridge portable computer with Maryland eMeds for program and departmental updates.

HIPAA – The Health Insurance Portability and Accountability Act of 1996 is federal legislation governing how patient health information is collected, maintained, and distributed.

COMAR 30.03.04.04- Maryland State Law that states each emergency medical service (EMS) program is required to provide the Maryland Institute of Emergency Medical Service System (MIEMSS) a Maryland Electronic Medical Report (eMeds) for all EMS related responses.

III. PROCEDURES

- A. Portable computers access to the internet shall be restricted to posting calls, syncing with Maryland eMeds system, and receiving calls. These portable computers are not intended to be used for general computing and web access unless you have authorization and for the purpose of carrying out duties and responsibilities of your position.
- B. The primary provider providing patient care will submit documentation of patient care using eMeds.
 - i. All other unit that have patient contact will be added to the patient care report.
 - ii. Each unit shall enter emeds and attach an addendum to the report with the patient care that they completed.
- C. If an Out of County Unit transports a patient from a call that originated in Carroll County, the first responder shall complete an eMeds report for the call.
- D. In the instance of electronic issues or computer malfunction, reports may be completed on the paper patient care report short forms as authorized by the State of Maryland and MIEMSS.
- E. All paper forms shall be scanned and attached to the eMeds report or filled out electronically and attached to eMeds report. This shall include refusals
- F. All eMeds report shall be completed by the end of the shift or within 24 hours of the call.
- G. Any report that is not completed within the required 24 hours of the completion of your shift shall be reviewed and may result in disciplinary action.
- H. Ambulance billing Authorization and Privacy Acknowledgement Forms shall be completed for every patient transported by a Carroll County EMS Unit. If electronic signature is unavailable a paper copy shall be signed and attached to the eMeds report. See attachment D for paper copy
- I. All Priority One (1) patients as determined by Maryland Medical Protocols shall have an eMeds report completed at the hospital.
- J. An eMeds report shall be generated for all calls an ambulance is dispatched for. This includes emergency medical calls, fire calls, patient assists, cancelled calls and ambulance transfers/ standbys.

- K. eMeds reports are legal and confidential documents that are bound by HIPAA and other legal privacy protections. All personnel are expected to maintain document security in complying with federal and state laws and department policies.
- L. All reports shall be completed to 100% completion.
- M. All skills that are completed shall be attributed to the clinician performing the skill.
- N. A completed and well written narrative shall include an organized and chronological format. Carroll County Department of Fire and EMS recommends the use of the “S.O.A.P.” format.
 - i. S: Subjective
 - a. Information that is provided directly by the patient, bystanders, and/or the scene.
 - ii. O: Objective Information
 - a. Verifiable information found during the clinician’s patient assessment.
 - b. The list of objective findings shall be listed in a bulleted format based on the body system or body part assessed.
 - iii. A: Assessment
 - a. Active statement indicating the potential illness or injury the patient is being treated for.
 - iv. P: Plan of Care
 - a. Details the actions taken to assess, treat, and or transport the patient.
- O. Patient refusals shall require a signature from a witness. The order of preference for a witness shall be:
 - i. Family or Friend
 - ii. Law Enforcement
 - iii. Crew member from another unit
 - iv. Crew member from unit providing care
- P. Patient Definitions
 - i. A **PATIENT** is anyone that meets any of the following criteria
 - a. Makes a request from medical services; or,
 - b. Has evidence of an obvious injury or illness; or,
 - c. Has a mechanism of injury or nature of illness that creates reasonable suspicion; or,
 - d. Receives any portion of an assessment, treatment, or transportation.
 - ii. A **NO PATIENT** is anyone who does not meet the above criteria. Justification shall be documented within the narrative section of the report.
- Q. Any clinician that has repeated issues with patient care documentation shall be required to utilize the SOAP format.
- R. Approved Abbreviations

- i. Any medically approved abbreviation shall be acceptable while documenting patient care in eMeds. However, care must be taken to avoid unacceptable abbreviations. Clinicians should verify all abbreviations are medically acceptable prior to using in patient care reports. See Attachment A for Medical Abbreviations.

IV. RECISION

This Standard Operating Procedure rescinds all directives regarding EMS Reporting and Documentation or similar content previously issued for personnel of the Carroll County Department of Fire and EMS.



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

ABD	Abdominal
AAA	Abdominal Aortic Aneurysm
AIDS	Acquired Immune Deficiency Syndrome
AMI	Acute Myocardial Infarction
ARDS	Adult Respiratory Distress Syndrome
ACLS	Advanced Cardiac Life Support
ALS	Advanced Life Support
AMA	Against Medical Advice
ABC	Airway, Breathing, Circulation
AMS	Altered Mental Status
ACE	Angiotensin-Converting Enzyme (ACE inhibitor)
AC	Antecubital Fossa
ACL	Anterior Cruciate Ligament
PRN	As needed
ASA	Aspirin
AFib	Atrial Fibrillation
AV	Atrioventricular
AED	Automated External Device
BVM	Bag Valve Mask
BLS	Basic Life Support
BPM	Beats Per Minute
HCO₃	Bicarbonate
BCP	Birth Control Pill
BAC	Blood Alcohol Content
BP	Blood Pressure
BSA	Body Surface Area
BM	Bowel Movement
BBB	Bundle Branch Block
PO	By mouth
Ca⁺⁺	Calcium
CA	Cancer
CO	Carbon Monoxide
CO₂	Carbon Dioxide
CPR	Cardiopulmonary Resuscitation
CV	Cardiovascular



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

cm	Centimeter
CNS	Central Nervous System
CVA	Cerebrovascular Accident (Stroke)

CSF	Cerebrospinal Fluid
Chemo	Chemotherapy
CXR	Chest X-Ray
c/c	Chief Complaint
Cl-	Chloride
COPD	Chronic Obstructive Pulmonary Disease
C/O	Complains of
CT	Computerized Tomography (CT)
CHF	Congestive Heart Failure
CPAP	Continuous Positive Airway Pressure
CABG	Coronary Artery Bypass Graft
CAD	Coronary Artery Disease
CCU	Critical Care Unit
cc	Cubic Centimeter (mL)
DOB	Date of Birth
DOA	Dead on Arrival
DVT	Deep Vein Thrombosis
DCAP-BTLS	Deformities, Contusions, Abrasions, Punctures, Burns
DT's	Delirium Tremens
D5W	Dextrose 5% Water
DM	Diabetes Mellitus
DKA	Diabetic Ketoacidosis
Dx	Diagnosis
D&C	Dilation & Curettage
DPT	Diphtheria, Pertussis, Tetanus (Vaccine)
D/C	Discharge or Discontinue
DNR	Do Not Resuscitation
Dr	Doctor
gtt(s)	Drop(s)
gtt(s)/min	Drop(s)/minute
ENT	Ear, Nose, & Throat
EENT	Ears, Eyes, Nose, & Throat



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

ECG/EKG	Electrocardiogram
EEG	Electroencephalogram
EMD	Emergency Medical Dispatch
EMS	Emergency Medical Services
EMT-B	Emergency Medical Technician-Basic
EMT-I	Emergency Medical Technician-Intermediate
EMT-P	Emergency Medical Technician-Paramedic
ETT	Endotracheal Tube

ETCO2	End-Tidal Carbon Dioxide
Epi	Epinephrine
ETA	Estimated Time of Arrival
ETOH	Ethyl Alcohol
exp.	Expiratory
EJ	External Jugular
FS	Fingerstick
FR	First Responder
FiO2	Fraction of Inspired Oxygen
Fx	Fracture
GI	Gastrointestinal
GU	Genitourinary
GCS	Glasgow Coma Scale
G/Gm	Gram
GSW	Gunshot Wound
GYN	Gynecologic
H/A	Headache
HR	Heart Rate
HBV	Hepatitis B Virus
HCV	Hepatitis C Virus
Hx	History
h/o	History of
hr	Hour
HIV	Human Immunodeficiency Virus
HCTZ	Hydrochlorothiazide
HTN	Hypertension
STAT	Immediately



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

inf.	Inferior
insp.	Inspiratory
IDDM	Insulin-Dependent Diabetes Mellitus
ICU	Intensive Care Unit
ICP	Intracranial Pressure
IM	Intramuscular
IO	Intraosseous
IUD	Intrauterine Device
IV	Intravenous
IVP	IV Push
j	Joules
JVD	Jugular Vein Distention
KVO	Keep Vein Open

KED	Kendrick Extrication Device
kg	Kilogram
lac	Laceration
LR	Lactated Ringers
LMP	Last Menstrual Period
LCL	Lateral Collateral Ligament
(L)	Left
LBBB	Left Bundle Branch Block
LLL	Left Lower Lobe
LLQ	Left Lower Quadrant
LUL	Left Upper Lobe
LUQ	Left Upper Quadrant
LV	Left Ventricle
LPN	Licensed Practical Nurse
L	Liter
LPM	Liters per Minute
LOC	Loss of Consciousness or Level of Consciousness
MRI	Magnetic Resonance Imaging
MD	Medical Doctor
meds	Medications
mcg or ug	Microgram
mEq	Milliequivalent



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

mg	Milligram
mL	Milliliter (cc)
mm	Millimeter
mmHg	Millimeters of Mercury
min.	Minute
mod.	Moderate
MSO4	Morphine
MVC	Motor Vehicle Crash
MS	Multiple Sclerosis
MCI	Multiple/Mass Casualty Incident
MI	Myocardial Infarction
NC	Nasal Cannula
NG	Nasogastric
NGT	Nasogastric Tube
NPA	Nasopharyngeal Airway
N/V	Nausea/Vomiting
Neb	Nebulizer
-	Negative

NTG	Nitroglycerin
NKDA	No Known Drug Allergies
NIDDM	Non-Insulin Dependent Diabetes Mellitus
NRB	Non-Rebreather Mask
NSAID	Non-Steroidal Anti-Inflammatory Drug
NS	Normal Saline
NSR	Normal Sinus Rhythm
n/a	Not Applicable
NPO	Nothing By Mouth
#	Number
OB	Obstetrical
OB/GYN	Obstetrics/Gynecology
occ.	Occasional
OR	Operating Room
OPA	Oropharyngeal Airway
DO	Osteopathic Doctor
OTC	Over The Counter



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

OD	Overdose
O2	Oxygen
PAT	Paroxysmal Atrial Tachycardia
PCP	Primary Care Provider or PCP (drug)
PSVT	Paroxysmal Supraventricular Tachycardia
PMH	Past Medical History
Pt	Patient
PID	Pelvic Inflammatory Disease
PCN	Penicillin
PUD	Peptic Ulcer Disease
PR	Per Rectum
pH	Percentage Hydrogen
PA	Physician Assistant
+	Positive
PEEP	Positive End-Expiratory Pressure
post.	Posterior
K+	Potassium
lb	Pound
PAC	Premature Atrial Contraction
PJC	Premature Junctional Contraction
PVC	Premature Ventricular Contraction
Rx	Prescription/Treatment
PDOA	Presumed Dead on Arrival

PTA	Prior to Arrival
PE	Pulmonary Embolism
P	Pulse
PEA	Pulseless Electrical Activity
PEARL	Pupils Equal and Reactive to Light
ROM	Range of Motion
RN	Registered Nurse
Resp.	Respiratory
RR	Respiratory Rate
RHD	Rheumatic Heart Disease
(R)	Right
RBBB	Right Bundle Branch Block



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

RLL	Right Lower Lobe
RLQ	Right Lower Quadrant
RML	Right Middle Lobe
RUL	Right Upper Lobe
RUQ	Right Upper Quadrant
r/o	Rule Out
STD	Sexually Transmitted Disease
SOB	Shortness of Breath
S/S	Signs/Symptoms
SA	Sinoatrial
NAHCO3	Sodium Bicarbonate
NaCl	Sodium Chloride
SQ/SC	Subcutaneous
SL	Sublingual
SIDS	Sudden Infant Death Syndrome
sup.	Superior
SVT	Supraventricular Tachycardia
T	Temperature
TMJ	Temporomandibular Joint
x	Times or Multiply
TKO	To Keep Open
TIA	Transient Ischemic Attack
TB	Tuberculosis
URI	Upper Respiratory Infection
UTI	Urinary Tract Infection
VD	Venereal Disease
VF/VFib	Ventricular Fibrillation
VT/VTach	Ventricular Tachycardia



Carroll County Department of Fire and EMS

Attachment A

Medically Approved Abbreviations

VS	Vital Signs
WAP	Wandering Atrial Pacemaker
W/D	Warm/Dry
Wt	Weight
w/	With
w/o	Without
WPW	Wolff Parkinson White Syndrome
y/o	Years old



Carroll County Department of Fire & EMS

Attachment B

Documenting Signatures

Patient: Adult and Transported

The patient is at least 18 years old, is transported to a hospital, and has the ability to sign.

Type of person Signing: Patient

Signature Reason: HIPAA Acknowledgement/ release and authorization/releasing for billing

Signature Status: Signed

Nurse Status: Required

Patient: Adult Refusal

The patient is at least 18 years old, refuses transport, and has the ability to sign.

Type of person Signing: Patient

Type of Person Signing: Witness

Signature Reason: Refusal of Services

Signature Reason: Witness

Signature Status: Signed

Signature Status: Signed

Nurse Status: Required

Nurse Signature: Not Required

Patient: Pediatric and Transported

The patient is 17 years old or younger and is transported to a hospital.

Type of person Signing: Patient Representative

Type of Patient Representative: Choose relationship to patient

Signature Reason: HIPAA Acknowledgement/ release and authorization/releasing for billing

Signature Status: Signed

Nurse Status: Required

Patient: Adult Too Sick or Injured to Sign

The patient is at least 18 years old, is transported to a hospital, but is too sick or injured to sign.

Type of person Signing: Patient

Signature Reason: HIPAA Acknowledgement/ release and authorization/releasing for billing

Signature Status: Not Signed- due to distress level, Mental status/impaired, Physical impairment of extremities, Unconsciousness

Nurse Status: Required

Patient: Adult Transported with Language Barrier or Visual Impairment

The patient is at least 18 years old, is transported to a hospital, but there is a language barrier.

Type of person Signing: Patient

Signature Reason: HIPAA Acknowledgement/ release and authorization/releasing for billing

Signature Status: Not Signed- Language Barrier or Visual Impairment

Nurse Status: Required



Carroll County Department of Fire & EMS

Attachment B

Documenting Signatures

Patient: Adult Transported While in Police Custody

The patient is at least 18 years old, is transported to a hospital, and is in Police Custody

Type of person Signing: Patient

Signature Reason: HIPAA Acknowledgement/ release and authorization/releasing for billing

Signature Status: Not Signed- In Law Enforcement Custody **Nurse**

Status: Required

Patient: Adult Transported with suspected Communicable Disease

The patient is at least 18 years old, and have suspected or confirmed communicable disease

Type of person Signing: Patient

Signature Reason: HIPAA Acknowledgement/ release, authorization/releasing for billing, verbal authorization

Signature Status: Not Signed- Patient contamination concern **Nurse**

Status: Required

Patient: A Combination of Circumstances

The patient may be an adult or pediatric with a combination of circumstances.

Type of person Signing: Patient or Patient Representative

Signature Reason: HIPAA Acknowledgement/ release and authorization/releasing for billing

Signature Status: List the most appropriate reason for not signing **Nurse**

Status: Required

Patient: Adult Transported but Refuses to Sign

The patient is at least 18 years old, is transported to a hospital, but refuses to sign electronically.

Type of person Signing: Patient

Signature Reason: HIPAA Acknowledgement/ release and authorization/releasing for billing

Signature Status: Not Signed – Refused, patient contamination concern, Attempt to get patient to sign a signature sheet and attach to eMeds report.

Nurse Status: Required