

## Western Regional Emergency Medical Advisory Committee

<b>Title: Patient Information Reporting to Receiving Facility Staff</b>	<b>Effective Date: March 20, 2002 Revised: November 2021</b>
<b>Policy #. 2002-1</b>	<b>Supersedes June 2009 revision</b>

<b>Policy</b>	The purpose of this policy is to outline the means in which prehospital care providers report patient information to receiving facility staff.
<b>Procedure</b>	<p>Prehospital care providers are required to give a verbal report of patient care information to receiving provider (MD/DO/RN/PA/NP) staff along with a copy of the Prehospital Care Report (PCR). It is the responsibility of the receiving facility to promptly triage the patient and receive a verbal report from the EMS crew upon arrival to the Emergency Department.</p> <p>There are no New York State Department of Health requirements that receiving facility staff must sign the back of the PCR. In the event the receiving facility staff declines to sign the back of the PCR, the name of the party receiving the verbal report should be documented.</p> <p>If:</p> <ol style="list-style-type: none"> <li>1. The receiving facility has triaged the patient, <b>and</b></li> <li>2. Provider staff decline or are unavailable to take verbal report from the prehospital care providers, <b>and</b></li> <li>3. a suitable location (ED chair, cart/bed) is available, <b>and</b></li> <li>4. The patient is medically appropriate/hemodynamically stable, <b>then:</b></li> </ol> <p>the prehospital care provider may place the patient on the facility's chair/cart, leave a written report, and return to service. <u>Patients on mental health (9.41/9.45/9.57) status may <b>not</b> be left at an unattended.</u></p> <p>In the event this occurs, dispatch is to be immediately notified of the situation for referral to the prehospital care provider's Medical Director for follow up.</p>
<b>References</b>	<p>WREMAC November 2021 Minutes WREMAC March 2002 Minutes</p>