

County of Monterey EMS System Policy



Policy Number: 6180
Effective Date: 7/1/2025
Review Date: 6/30/2028

ELECTRONIC PATIENT CARE RECORDS

I. PURPOSE

To establish standards for the completion, distribution, and retention of the EMS electronic Prehospital Care Report (ePCR).

II. POLICY

- A. EMS providers shall complete and submit all ePCRs to the County of Monterey EMS Agency through the countywide ePCR/Data System as required by this policy and/or by contract or agreement(s).
- B. An ePCR is a confidential medical record and a legal document. Hospital and EMS personnel shall comply with Health Insurance Portability and Accountability Act (HIPAA) standards for sharing and releasing ePCR information.
- C. The primary EMS provider or appropriate crew member from each responding EMS provider agency shall complete an ePCR for each EMS response. This includes every dispatched EMS call, patient contact (including non-transports), medical transfers, and emergency transports. An EMS response with more than one patient shall require an ePCR for each patient.
- D. Hospitals shall provide EMS transport provider personnel with a copy of the patient identifier number or other identifier used by the hospital to integrate the ePCR into the hospital's medical record for the patient.
- E. EMS providers shall ensure that each ePCR meets the standards outlined in County of Monterey EMS policy, California Emergency Medical Services Information System (CEMSIS), and the National Emergency Medical Services Information System (NEMSIS).
- F. EMS providers shall complete and submit the ePCR as follows:
 1. For any patient transported **Code 3** to a hospital emergency department:
 - a. The **primary transport provider** shall complete and submit an ePCR within 1 hour after arriving with the patient at the receiving hospital.
 - b. An appropriate crew member from each **non-transport unit** involved with the call shall complete and submit an ePCR within 2 hours from the time the non-transport unit is cleared from the incident.

Monterey County EMS System Policy 6180

2. For any patient transported **Code 2** to a hospital emergency department:
 - a. The **primary transport provider** shall complete and submit an ePCR within 2 hours after arriving with the patient at the receiving hospital.
 - b. An appropriate crew member from each **non-transport unit** involved with the call shall complete and submit an ePCR within 4 hours from the time the non-transport unit is cleared from the incident.
3. If a firefighter from a non-transport unit accompanies the ambulance to the hospital and maintains responsibility as the primary EMS provider for a patient being transported to the hospital, the firefighter shall complete and submit an ePCR in accordance with the time parameters listed above for the primary transport provider.
4. If a transport or non-transport unit is dispatched to the scene of a call and makes patient contact, but the **patient is not transported to the hospital**, the appropriate crew member for each unit involved in the call shall complete and submit an ePCR within 24 hours or prior to the end of the crew member's shift, whichever comes first.

G. Exceptions to the ePCR submission requirements:

1. If an ambulance crew transports a patient to the hospital and is subsequently dispatched to respond to another emergency call (requiring a Code 3 response) prior to completing and submitting the ePCR from the first call, the primary transport provider shall complete and submit the ePCRs for both calls within two hours after completing the second call. If the ambulance crew is dispatched to respond to any additional emergency calls (requiring a Code 3 response) prior to completing and submitting the ePCRs for the previous calls, the primary transport provider shall complete and submit the ePCRs for all calls as soon as possible but no later than 24 hours or the end of the primary transport provider's shift, whichever comes first.
2. If a non-transport unit is involved with an EMS call in which a patient is transported to the hospital, but the non-transport unit is dispatched to a second call prior to the crew member's completion of the ePCR from the first call, the non-transport unit's crew member shall complete and submit the ePCRs for any EMS calls involving transport of a patient to the hospital within 4 hours of completion of the second call. If the non-transport unit is dispatched to respond to any additional calls prior to completing and submitting the ePCRs from the previous calls, the non-transport unit crew member shall complete and submit the ePCRs for all calls as soon as possible but no later than 24 hours or the end of the crew member's shift, whichever comes first.
3. If a non-transport unit is involved with an EMS call between the hours of 2200 – 0600, during which a patient is transported to the hospital, the appropriate crew member from the non-transport unit shall complete the ePCR by 1000 (10 a.m.) that morning.
4. In the event of a mass casualty incident (MCI) or other system-wide emergency, completion of ePCRs can be delayed while EMS providers are involved in the MCI or system-wide emergency. Once the MCI or system-wide emergency has resolved, EMS

Monterey County EMS System Policy 6180

providers shall complete and submit all unfinished ePCRs as soon as possible but no later than 24 hours or the end of the EMS provider's shift, whichever comes first.

- H. If the base hospital and receiving hospital are different, the base hospital shall receive a copy of the ePCR within 24 hours from completion of the call.
- I. Only County of Monterey EMS Agency-approved abbreviations shall be used on the ePCR. A list of those abbreviations can be found in EMS Policy # 6130 Patient Care Records – Approved Abbreviations.
- J. Only County of Monterey EMS Agency-approved ePCR forms may be used.

III. PROCEDURE

A. Initiation of the ePCR

- 1. EMS providers shall initiate an ePCR for all EMS responses, regardless of whether treatment or transport is provided.
- 2. An abbreviated ePCR may be completed when there is no patient contact. Examples include being canceled enroute, being canceled by another agency upon arrival at the scene, or a patient leaving the scene. The following information shall be documented on the abbreviated ePCR:
 - a. Times for dispatch, enroute, on scene, and cancelled
 - b. Date
 - c. Unit identifier
 - d. Reason for cancellation (*e.g.*, canceled by another agency, patient left prior to arrival, public assist, or lift assist)
- 3. If patient contact is made, EMS providers shall document in the ePCR all care provided. Patient care provided prior to the arrival of the primary EMS provider's unit shall be noted in the narrative section of the ePCR. Patient care provided by the primary EMS provider and their crew shall be included in the appropriate corresponding sections of the ePCR.

B. Completion of the ePCR.

- 1. EMS providers shall complete all ePCRs clearly, concisely, and accurately. Falsification of and/or tampering with data on any ePCR may subject the offender to licensure or certification action.
- 2. At minimum, EMS providers shall document the following information on the ePCR when patient care is provided:
 - a. All relevant call times and response modes
 - b. Scene and destination locations
 - c. Patient demographics
 - d. Patient number / chart number
 - e. Patient's chief complaint and medical history

Monterey County EMS System Policy 6180

- f. Provider initial and ongoing assessments
 - g. A minimum of two (2) complete sets of vitals for transported patients and a minimum of one (1) complete set of vitals for non-transported patients
 - h. All treatments rendered by the provider(s)
 - i. Detailed narrative
 - j. Any medical direction given by the base hospital
 - k. A list of all other involved agencies
 - l. All pertinent data from medical devices such as an EKG or cardiac monitor
 - m. Any relevant patient, authorized representative, EMS personnel, and facility signatures
3. In the event a patient refuses care, EMS providers shall document all required items outlined in EMS Policy #4030 Pre-Hospital Consent and Refusal of Service/Care. The Prehospital Consent – AMA shall be documented on the ePCR.
- C. Confidentiality and ePCR Release and Retention
1. Each base hospital and provider agency shall have policies on:
 - a. Ensuring the confidentiality of ePCRs
 - b. Releasing ePCRs as a medical record
 2. Each provider agency shall retain ePCRs as mandated by state and federal laws. All ePCRs shall be retained in the system for a minimum of seven years.

IV. NOTES

- A. The triage tag may take the place of the ePCR in a Level 2 or Level 3 MCI as allowed under the Monterey County MCI Plan. (See Sections 3.2.2.6 and 3.3.2.6)
- B. Paramedic preceptors are responsible for ePCRs completed by their students.
- C. Do not document unusual occurrences on an ePCR. An Unusual Occurrence Report shall be filed to document unusual occurrences. ePCRs shall not include references to an Unusual Occurrence Report.
- D. If the Medical Liability Release section of the ePCR form is signed, document on the ePCR that the patient was advised of and understood the possible consequences of not being transported to the hospital for a complete medical evaluation.

END OF POLICY