Falmouth Fire-EMS Operating Guideline

Report Writing

Objective: To provide a guideline which regulates the writing of reports within the department.

Scope & Background: Report writing is essential to the department and its function. Numerous state and federal laws require that reports be written and documented properly. This SOG will ensure the department stays compliant with these laws and provides accurate documentation for all events and incidents.

Procedure:

A. Standard Report Writing
   1. IMC software system will be the electronic system for Incident reports to be written in.
   2. IMC will be utilized for all employee/personnel record-keeping; documentation of incident responses/NFIRS reporting and special incident reports for unprotected exposures, injuries, etc.
   3. Reports must be entered into the IMC system immediately after each call by the senior officer or employee on the call (whoever was command). This is important as that person ultimately holds responsibility on the call and should be imputing/reviewing the data.
   4. There may be some incidents where the employee may not be able to enter a report into the computer (IMC) system immediately after a call. In these cases, reports may be immediately written out on paper, which will include all necessary information for the IMC fields. The report should then be transcribed into IMC as soon as possible after the incident.
   5. In these cases, the report will be written on paper and then supplied as soon as possible to a member who can input the data.
   6. Data should be entered as accurately as possible based on the appearance of the written report. However, there may be allowances for correcting and editing for grammar and spelling or other errors and omissions. These should be noted at the bottom of the computer report narrative.
   7. Only the written standard incident response form will be used. There will be no individual company report forms used.
   8. If the senior member responsible for the call is not able to enter this information, it should be checked by that person within 48 hours after being entered to the system.
B. Report contents

1. Reports will vary on the type. However, in general all reports in the department should include:
   i. The report writer’s name
   ii. Date
   iii. Time
   iv. Incident number if a response incident
   v. The staff members on the call
   vi. The hours of attendance by each member who attends the call
   vii. The call times
   viii. The narrative of the call, which shall include a brief but accurate detailed description of the incident. Applying the EMS style “CHART” method would be the framework.
      1. Chief complaint – fire or EMS: the principles are the same, both have a primary reason we were called, that should be first in the narrative.
      2. History: what happened prior to our arrival to cause the incident (smoke caused by burning food on the stove, etc)
      3. Assessment: What you found when you got there and when you went to work: (fire alarm sounding at annunciator panel, smoke in hallways, people evacuating the building, no fire but smoke in a pan of burning fish on the stove, etc)
      4. Rx (Treatment): what did you do to mitigate or correct the problem (ventilated the building, shut off the stove, removed the pan from the stove top, etc)
      5. Transport (Completion of the call) Whatever transpired prior to sounding the recall on the box/completing the call. (you spoke to the homeowner and warned of fire dangers, replaced equipment on the trucks, accounted for personnel and then left the scene.

   ix. Electronic signature

2. Obviously, these may vary based on the kind of call, but in general should remain the same in the needs of the components.

3. Every effort should be made to ensure accuracy of these reports as members will be paid through these methods and payroll must be correct.

4. It is the staff member’s responsibility to ensure that they get on payroll for a particular call. They should confirm with the member making the final run report if they have any concern about showing up on payroll. (i.e. - in cases where the member does not make the truck for a call and goes direct but the call cancels prior to their arrival on scene.)
5. An EMS Run Report shall be filled out whenever an ambulance is dispatched for a reported injury or illness. An EMS licensed person who responded on the call must complete this form. A separate EMS run report shall be completed for each patient involved in the incident. For the purpose of this section a patient is defined as:

i. Someone who appears to have been involved in an accident of any type, which could be expected to cause injury, no matter how slight, i.e. vehicle accident, trip or fall etc.

ii. Someone for whom EMS has been called due to medical problems, whether they have a complaint or not.

iii. ALL CONTACTS MUST BE DOCUMENTED EVEN IF NO TREATMENT OR TRANSPORT OCCURRED

6. Minimum EMS Run Report documentation includes:
   i. Patient’s name, address, date of birth
   ii. Patient history (as appropriate)
   iii. Vital Signs (as appropriate)
   iv. Physical exam appropriate to the patient’s complaint
   v. Mental Status
   vi. Refused Transports – patient signature
   vii. No Transports- description of patient disposition, especially with juveniles
   viii. * If these criteria cannot be met, document patient refusal and why criteria are not met.
   ix. Patients under the age of 18 who wish to refuse treatment or transportation must produce a parent at the scene. In certain circumstances it would be permissible to have a conversation with the parent or guardian over the phone. If a parent cannot be produced in a timely manner, then the EMS crew shall transport the patient.
   x. EMS personnel are reminded that parents cannot refuse lifesaving emergency treatment for their minor children.
   xi. For the purposes of the above paragraphs, parent is defined as a parent or surrogate parent such as guardian or adult family member.

7. No Patient Contact Situations

   i. If no patient is found or the EMS crew is returned prior to arrival on scene, then a MEMS Run Report shall be completed with Cancelled En Route box filled in, as well as a brief narrative of the event.
ii. This would also include instances of Good Intent Calls when someone called for what turned out to be a non-accident or medical problem.

iii. Only one of these reports is necessary per call.

8. Confidentiality:

i. All personnel are reminded that the Maine EMS Run Report is a legal document and part of confidential patient information.

ii. Upon completion reports are to be posted to the Maine EMS Run Report web site. Once the report is posted the provider shall log off the computer. Personnel should make every effort to keep reports out of sight of non-involved people.

iii. Any request for copies of EMS Run Reports will be sent to the Administration office. All EMS Run Reports shall be completed before the EMS provider for that call leaves work for that shift.

9. All Fire-EMS Department members will follow Falmouth Fire-EMS HIPAA SOG (SOG G40).

C. Definitions

1. The following definitions shall apply to reports.

i. Run Report: A fire call report used for any fire related emergency or routine call.

ii. EMS Run Report: An EMS call report, for purposes of IMC

iii. EMS PCR: An EMS patient care report, (the MEMS run form and/or electronic reporting system report).

iv. Standard Run Response Form: this is the department standard paper run form for use if the call cannot be immediately entered to IMC or the system is unavailable. This is the only such document to be used to report calls when not entered to IMC and supersedes all prior “company call reports”.

v. Incident Report: A report to the Chief/Deputy Chiefs regarding an incident which was out of the ordinary. This can be used for motor vehicle accidents involving town vehicles, a violation or deviation from standard of care in EMS or policy for fire calls, a job-related injury, etc.

vi. First Report of Injury form: this is the town worker’s compensation documentation which must be filled out and turned in to Administrative Office no later than 72 hours after an injury.
vii. Unprotected Exposure Form: this is the form to be filed when an ABP/BBP exposure has occurred.

These guidelines may be changed or altered by the Fire Chief at any time.