

lowa Department of Public Health Protecting and Improving the Health of Iowans

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MEMO: Guidance regarding Iowa Administrative Code requiring ambulance Services to provide a verbal Patient Care Report (PCR) upon delivery of a patient to a receiving facility and a completed PCR within 24 hours to the receiving facility.

REFERENCE: Iowa Administrative Code; 132.8(3) "Service program operational requirements. Ambulance and non-transport service programs shall:

a. Complete and maintain a patient care report concerning the care provided to each patient.

Ambulance services shall provide, at a minimum, a PCR verbal report upon delivery of a patient to a receiving facility and shall provide a complete PCR within 24 hours to the receiving facility."

TO: EMS Providers and Ambulance Services

FROM: Rebecca Curtiss, Chief, Bureau of Emergency and Trauma Services, Iowa Department of Public Health

The PCR contains valuable information needed during the emergency room stay and inpatient periods of care. The PCR is used to verify the patient physical assessment on scene, treatments during transport and vital health information. The prehospital care provided is essential information to assuring proper ongoing care is provided to every patient.

Since the introduction of electronic documentation availability, several emergency departments in the state have submitted complaints to the Bureau of Emergency and Trauma Services, (BETS) indicating that the practice of leaving a PCR, or providing the PCR within 24 hours at the hospital has significantly declined. The explanation for this decline has been that most EMS crews return to base as quickly as possible to complete the final electronic patient care report. The services then upload their run reports to a Cloud based server and expect that the hospital can retrieve the patient care report.

The administrative rule is clear; "Ambulance services shall provide, at a minimum, a PCR verbal report upon delivery of a patient to a receiving facility and shall provide a complete PCR within 24 hours to the receiving facility".

It is the obligation of the ambulance service to provide a completed patient care report to the receiving facility. The hospital is not required by Iowa law to search a web site, cloud based server or other mechanism to retrieve an electronic file.

BETS is encouraging ambulance services and hospitals to work together, problem solve and strategize to initiate realistic and reasonable mechanisms to deliver a patient care report to the hospital (paper, e-mail, secure link, system retrieval, fax, EMS access to printers) within the required time frames.

Examples of how ambulance services are complying with this rule:

- Service are sending ePCR via fax or secure email. Most are still sending by fax
- Hospitals have set up a wireless printer in the emergency departments.
- Some services have policies that require the PCR to be completed before leaving the facility.
- An entire county has devised a system that requires all services to enter the PCR into a web-based software system. The ePCR is faxed through a generated function in the system to the appropriate number at the receiving facility. This mechanism is monitored by the full time paid transport in the county to ensure all reports are received by the hospitals within 24 hours.

Should BETS continue to receive complaints from hospitals regarding the failure of ambulance services to provide completed patient care reports within the required time frames, investigations will be initiated for possible enforcement actions.