

HEMS
System Protocols
EPCR/PCR AND TRANSFER OF CARE

Date: April 2013,
Last Revised Date: 1/3/ 2024

Section 7-15(S)

EPCR/PCR and Transfer of Care

A. Patient Care Record to facilitate transfer of patient care from EMS to ED:

1. Electronic PCR's for submission to the Michigan EMSIS and receiving hospital may be completed in real time through station based or mobile based software and submitted to the ED via: EMS unit printer, secure telephone line transmitted fax, secure e-mail encrypted through EMS agency server, or secure EMS agency/hospital established FTP (File Transmit Protocol). Other methods, approved by the MCA, may also be used. Each hospital shall provide EMS with a secure receiving fax number and e-mail address.
2. For services using mobile electronic patient care records and the record cannot be completed and turned over to ED staff ASAP, to facilitate the transfer of patient care, a standard MCA approved paper patient care record or a printed partial electronic patient care record (containing information required on the face sheet of the paper PCR) shall be turned over to ED staff. The e-Bridge report may also fulfill this requirement. This document should be labeled "Field Note" in compliance with State protocol.
3. For services not using mobile electronic patient records, or at times when the electronic reporting system is inoperative, a standard MCA approved paper MFR or EMS Patient Care Record will be completed. As indicated on the form, the original (and any other "Service" identified pages) will be retained by the ambulance service. Page(s) identified as "Hospital" will be given to ED staff at the time of transport/report.
4. For LALS and ALS, a copy of the Medication replacement form must be attached to the audit (pink) copy of the EMS Run Report form.
5. For ALS, a copy of the ECG strip must be attached to each (Hospital, Service, and Audit) copy of the EMS Run Report for all patients who are placed on a cardiac monitor.

B. MFR/BLS Non-Transporting Agencies: An MFR/BLS/ALS Non-Transporting Agency must provide the transporting agency with a complete oral report and their agency's incident number pertaining to the run and give an oral report and field notes to deliver to the hospital with the patient, if it does not delay or interfere with the transport.

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- C. Compliance: Late or lack of valid data submission to MI-EMSIS will generate of letter of notification as follows:
- One month: Written letter of notification.
 - Two months in a year: Required written corrective action plan to the HEMS Quality Review/PSRO Committee.
 - Three months in a year: Required in person, and in writing, presentation of a corrective action plan at the next regularly scheduled meeting of the HEMS Quality Review/PSRO Committee.
- D. Paper report forms
Contact HEMS for required MFR, BLS, LALS, and ALS paper forms.