

Procedure Documentation

Properly documenting procedures is key to improving patient outcomes. When procedures performed are properly documented, better informed decisions can be made on which aspects of patient care need to be improved upon. Furthermore, the legal protection for an agency is improved if procedures are properly documented. If you have questions about specific documentation scenarios or if you would like clarification on particular data elements, please reach out to your organization's leadership, [Regional Program Agencies](#), or the [DI Unit](#).

Q: How should procedures performed be documented?

- Date/Time Procedure Performed (eProcedures.01) must be filled out – Not Values are not accepted
- Procedure Performed Prior to this Unit's EMS Care (eProcedures.02) is a recommended field, however it should be filled out for all procedures performed – Not Values are not accepted for this field
- **Procedure (eProcedures.03) is a required field and its values must correspond to SNOMED codes**
 - For example, Insertion of endotracheal tube (procedure) must have a corresponding code of 112798008
 - SNOMED codes can be found [here](#)
- Number of Procedure Attempts (eProcedures.05) may be left blank, however quality documentation strongly recommends that the number of procedure attempts should be documented on all procedures. The provider filling out the patient care report must populate this field with a value between (one) 1 and (ten) 10
- Procedure Successful (eProcedures.06) may be left blank where appropriate; however, quality documentation strongly recommends that this field be populated accurately and effectively for procedures directly impacting patient care or interventions (e.g. an IV start attempt, insertion of a nasal pharyngeal airway adjunct, application of a cervically immobilizing collar, splint or dressing a wound). The documenting provider should strongly consider the applicability of this field when documenting patient care interventions.
- Procedure Complication (eProcedures.07) may be left blank where appropriate; however, procedure complication should be recorded on all procedure attempts. A quality documentation driven provider will want to populate this field accurately and effectively for procedures directly impacting patient care or interventions (e.g. an IV start attempt, insertion of a nasal pharyngeal airway adjunct, application of a cervically immobilizing collar, splint or dressing a wound). However, there may be a benefit when attempts at some non-direct intervention patient care have been made (e.g. medical consult, hospital notify which may have been complicated by technological failure [no mobile phone capabilities, radio failure, etc.]).
- Response to Procedure (eProcedures.08) may be left blank; however, it *should* be documented on all procedures performed. There are three options, 'Improved,' 'Unchanged,' and 'Worse.' Quality documentation dictates that this field be populated with the appropriate value when a procedure is performed

- Role/Type of Person Performing the Procedure (eProcedures.10) is a required field when a procedure is performed. The options for this field are listed below:
 - NYS Certified First Responder (CFR) - 9905003
 - NYS Certified Emergency Medical Technician (EMT) - 9905005
 - NYS Certified Advanced EMT (AEMT) - 9905001
 - NYS Certified EMT – Critical Care (EMT-CC) – it9925.134
 - NYS Certified Paramedic - 9905007
 - Other Healthcare Professional - 9905019***
 - Student - 9905029**
 - Perfusionist – it9925.101
 - Licensed Practical Nurse (LPN) - 9905039
 - Nurse Practitioner - 9905035
 - Other Non-Healthcare Professional - 9905021****
 - Physician - 9905025
 - Physician Assistant - 9905037
 - Registered Nurse - 9905041
 - Respiratory Therapist - 9905027
 - CT Technologist – it9925.189
 - Fire Personnel (non-EMS) - 9905051
 - Crisis Intervention Specialist – it9925.196
 - Family Member - 9905049
 - Law Enforcement - 9905047
 - Lay Person - 9905045
 - Patient - 9905043
 - Driver – it9925.111

*** Student ~ an individual in any educational program serving on this crew as a student serving on a crew for clinical experience***

**** Other Healthcare Professional ~ a professional healthcare provider not listed elsewhere on this definition list (may include a driver/pilot/emergency vehicle operator, assistant on a crew)****

***** Other Non-Healthcare Professional ~ a professional from any other profession outside healthcare serving on a crew. *****

Additional Information:

Properly documenting all fields when filling out an ePCR is crucial for measuring the effectiveness of providers, the efficiency of the EMS system in New York State, and patient outcomes. Furthermore, proper documentation allows EMS and government leadership to make better informed decisions and allows researchers to have higher quality data so they can better understand any disparities in healthcare quality.

EMS agencies credentialed by the Department of Health submit ePCRs that adhere to the National Emergency Medical Services Information System (NEMSIS) 3.5 documentation standard. NEMSIS establishes a minimum documentation standard that requires fields that must be completed on an ePCR and the Department further defines these requirements to meet minimal additional requirements. Standardized documentation improves quality documentation. Measuring provider effectiveness, system efficiency, and patient outcomes is paramount to the success of EMS organizations across New York State.

The DI Unit is holding regular EMS ePCR briefings via Webex. In these briefings, issues that EMS agencies and EMS providers commonly face regarding patient care documentation will be addressed. EMS providers will have the opportunity to ask any questions or raise any concerns about 3.5 submission criteria they wish. Feedback from these briefings is vital for their ongoing success and surveys will be provided at the end of each briefing. Additionally, If you are an EMS provider, an EMS leader, or an EMS Medical Director and are having submission or validation issues please fill out a survey [through this link](#).