NYS DOH ePCR
Educational Snip #2025-003: ePCR Documentation

ePCR Documentation
Filling out an ePCR is a necessary component in the duties of EMS personnel. Patient care reports help protect the agency in the case of a lawsuit and for billing and reimbursement purposes. The data provided in these reports also assist in quality improvement initiatives for patient care and agency efficiency. 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: When is an ePCR required?

- An ePCR is required for every dispatch regardless of whether patient contact was made including scenarios where:
    - A patient refuses treatment
    - A patient was transported to any location
    - A patient was treated by one agency and transported by another
    - Incidents where the call was cancelled before reaching the scene
    - Incidents where no patient is located
    - Personnel are dispatched for a stand-by
        - If an agency is dispatched to a stand-by and, while there, treat a patient, two ePCR's should be completed
- All ePCR's must (be) submitted to the state within 4 hours of the completion of the call for **at least 90% of charts**
- **For more information follow this link and read through policies 12-02, 12-03, and 21-04**

Important 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.