

Disclosures

Paramedic Educator Mercy EMS Mercy Hospital Springfield

Mercy#

The Big Question

What will make this transition smoother for the patient?

The Big Answers

(In my humble opinion)

- A good rapport (understanding each other)
- A good report (communications)
- Good written reports (paperwork)

A Success

"Frank"

A Failure...or two...or....

- They all had a similar story
- No one to meet them, can't find pt
- No good report...vacation, not mine...
- Disheveled mess of papers

The Odd Couple

- Environment
- Medical Direction
- Perspectives



We Can Make Each

- Empathy
- · Brec'



Get to know us!

- Mercy EMS Operations Supervisor
 - On-duty 24/7/365
 - **-** 417-844-4422
 - -417-820-5454 ext. 4 (EMS Office)
- If you ever have questions or concerns, PLEASE CALL!
- Get to know other EMS providers, too

Let's Get on the Same Page

- A good patient report is one of the very best things we can do for our patients.
- The patient report starts with what you tell the communications center

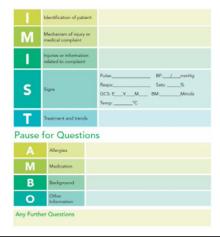
Communications

- Key questions asked by dispatch
 - Call back number
 - Address
 - Chief Complaint (what is the emergency right now that requires ambulance transport...)
- Other questions to expect
 - Age
 - Awake /Conscious (Change in mental status)
 - Breathing?
 - Has patient been evaluated by a doctor or nurse?

Communication

- Verbal Patient Report
 - Pick a good, concise format.
 - Have it prepared
 - Have a confident delivery
 - Make sure it's right!
 - IDDM, Preferred Hospital

IMIST-AMBO covers the standard way practitioners hand over information about patients to receiving ED staff:



Communication 60 seconds Identification of patient Emergent Mechanism of injury or medical complaint info Injuries or information related to complaint Grab their BP: / _mmHg attention GCS: E___V__M_ BM:_ Temp: ____°C Ask for Treatment and trends questions

Communication



- Help get pt moved
- Report other info

Depending on the patient, you may not get passed the IMIST portion!

Communication

Verbal Patient Report

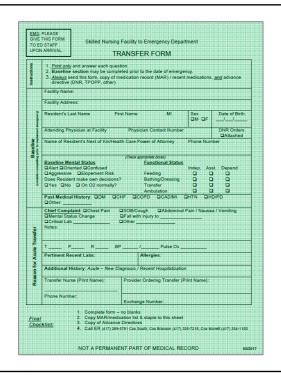
Demand they give you the same courtesy when a patient is returning.

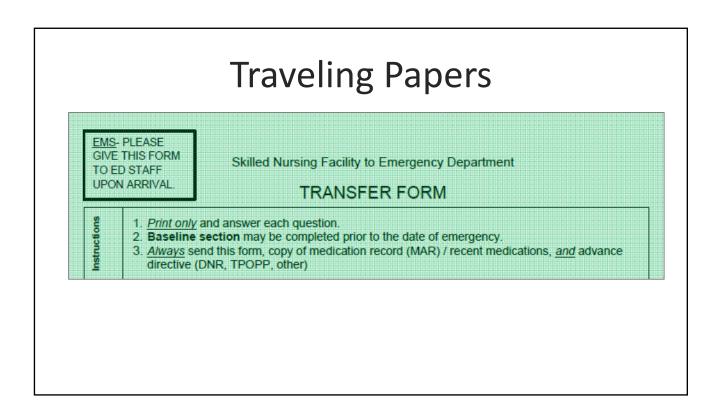
Traveling Papers

- Patient "face sheet"
 - Name, DOB, SSN, Physician
- OHDNR, TPOPP, or POLST orders
- Medication list including time last given! Allergies noted if any.
- Copy of Medical POA (legible with POA's contact info)
- PCS

Traveling Papers

- The new "Green Form"
- Initiative started by CoxHealth – included 19 facilities that have their attending physicians
- EMS, and ER physicians love it so far
- SWEMS desire to expand





Traveling Papers Facility Name: **Facility Address** Resident's Last Name First Name Date of Birth OM OF Attending Physician at Facility **DNR Orders** Physician Contact Number Name of Resident's Next of Kin/Health Care Power of Attorney **Phone Number** (Check appropriate boxes) **Baseline Mental Status Functional Status** □Alert □Oriented □Confused Asst. Depend Feeding □Aggressive □Elopement Risk Bathing/Dressing o a o Does Resident make own decisions? □Yes □No □ On O2 normally? Transfer Ambulation Past Medical History: DDM DCHF DCOPD DCAD/MI □HTN □HD/PD □Other:

Reason for Acute Transfer	Chief Complaint: □Chest Pain □Mental Status Change □Critical Lab Notes:	□Fall with injury to
	T P R	BP/Pulse Ox
	Pertinent Recent Labs:	Allergies:
	Additional History: Acute – New Diagnosis / Recent Hospitalization	
	Transfer Nurse (Print Name):	Provider Ordering Transfer (Print Name):
	Phone Number:	Exchange Number:

