



SPECIAL ORDER



Series	Number	Originating Bureau	Effective Date	Expiration Date
2005	21	Operations	3/17/05	N/A

Subject:

Documenting the Advanced Life Support Assessment

1. With the initiation of Special Order #10, Series 2005, **Dynamic Deployment of Paramedics**, and the anticipated integration of Emergency Medical Technician-Intermediates (EMT-I), a method for advanced life support (ALS) providers to document their assessment of a patient has arisen.
2. This order will define the method by which ALS providers can document their assessment when they do not accompany the patient to the hospital. Examples of when this documentation may be necessary, include the following:
 - a. An Emergency Medical Technician-Paramedic (EMT-P) assesses the patient, determines the incident is basic life support (BLS) in nature, allows an Emergency Medical Technician-Basic (EMT-B) to assume patient care.
 - b. An EMT-I assesses the patient, determines the incident is BLS in nature, allows an EMT-B to assume patient care.
 - c. An EMT-P assesses the patient, determines the incident is ALS in nature, intervention at the paramedic level is not necessary, allows an EMT-I to assume patient care.
3. The provider who assumes responsibility for the patient will complete the Medical Incident Report (MIR). This will usually be the person who is responsible for transport of the patient to the hospital. If patient care is assumed by a BLS crew after assessment by an EMT-P or EMT-I, circle #1 in the bottom right corner of page 2 of the MIR will be blackened. If patient care is assumed by an EMT-I after assessment by an EMT-P, circle #2 will be blackened. This will alert the Medical Duty Officer (MDO) that the level of care was reduced for a specific incident. A copy of a MIR is attached, with the circled area indicating where this should be accomplished.
4. The provider who assesses a patient and delegates responsibility to an EMT-B or EMT-I must complete the Maryland Institute for Emergency Medical Services Systems (MIEMSS) Additional Narrative. The report should be completed in the following manner:



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- a. The information at the top of the narrative should be as complete as possible. An incident number is mandatory. This is necessary to insure the narrative is matched with the appropriate MIR.
 - b. The chief complaint and comment section should be completed as appropriate, using a S.O.A.P. Note.
 - c. For call number, the piece of equipment on which the individual returned to the station will be entered. Example:
 - i. EMT-P rides P95 to the scene, performs an assessment, determines the patient is BLS and can be handled by EMT-Bs. The EMT-P returns to the station on E91P. The EMT-P would enter E91P for call number.
 - d. The individual completing the report provides their signature and emergency identification (EID) number and then places it where completed MIRs are stored.
5. Compliance with this order will provide accurate statistics as to the changes in the level of patient care and will insure the quality of care is being met.

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