



EMS DATA DICTIONARY

May, 2008



Arkansas Department of Health

EMS Data Dictionary

Data collection efforts by the Section of EMS and Trauma Systems, Arkansas Department of Health began in 1996. Over the years millions of paper and then electronic forms were submitted to the database to help keep track of patient care in Arkansas. This data dictionary was created by the EMS Advisory Council, Data Subcommittee to help everyone using the system to enter data in a uniform fashion.

What is the Data Used For?

Over the years several government entities have utilized information obtained by the database to apply for grants to benefit the residents of Arkansas. Physicians from Arkansas Children's Hospital request the data on a regular basis to help with injury prevention efforts. The Traffic Safety Section of the Arkansas State Police adds information obtained from the EMS Database to crash statistics to better understand occupant protection issues in the state.

Rules and Regulations Requirement

Section III.,B.,3. Reports to the Department requires that "Each licensee shall report, in a format approved by the Department of Health, every request that results in the dispatch of a vehicle with the exception of calls cancelled enroute or responses made where no patient contact was made."

Submitting Data

This data dictionary may be used to clarify questions before entering patient care reports into the system. Once reports are prepared in the EMSscan system they should be exported and the document should be attached to an e-mail and sent to the Section by using the ems.data@arkansas.gov address. Please remember that an e-mail is returned by a member of the section to acknowledge receipt. If you are not receiving an e-mail message, please contact a member of the staff at (501) 661-2262 to see if your data is going through properly.

Explanation of Data Elements in the Dictionary

Each element in the dictionary has a Definition, Length, and Possible Values field. The definition is provided to help users of the state EMS data collection to look up a description of each data element in the collection program.

Each element has a length box which indicates the number of characters that can be typed into the system for that data element. An empty Possible Values box means the user has to type a value into the system. Boxes with several choices indicate that the system has drop down menu choices to select from.

PLEASE NOTE: Definitions in this data dictionary should be used in conjunction with the EMScan Keydata Manual. This instruction booklet for utilizing the state data collection system may be found at:

http://www.healthyarkansas.com/ems/pdf/keydata_manual2006.pdf

Data Elements	Definition	Length	Possible Values
Lithocode	Number assigned in the program to identify each ambulance service's documented run.	9	
Combined Unit ID	Number assigned by the Section of EMS and Trauma Systems to identify each ambulance unit.	8	
Agency	Agency Four Digit License Number Assigned by the Section of EMS and Trauma Systems	4	
Vehicle	The Four Digit Number Assigned by the Section of EMS & Trauma Systems to Each Vehicle	4	
Date	The month, day, and year of the ambulance service run.	8	
Scan Date	Date the run form was scanned into the data collection system.	8	
Call Received	Time the call was received by the ambulance service.	5	
Dispatched	Time when the dispatcher assigned the call.	5	
Enroute Time	Time the ambulance left the station to travel toward the patient.	5	

Data Elements	Definition	Length	Possible Values
Arrived Scene	Time the ambulance arrived at the scene to assist the patient.	5	
Departed Scene	Time the ambulance left the scene of the accident to transport the patient.	5	
Arrived Destination	Time the ambulance finished transport by arriving at the chosen destination.	5	
Departed Destination	Time the ambulance left the destination to drive back to base.	5	
Returned to Service	Time recorded when the ambulance was placed/ called back into service.	5	
Received to Dispatch	Time recorded when the call was received in dispatch.	5	
Dispatch to Enroute	Time between the call being received by dispatch and the ambulance leaving the service.	5	
Time to Scene	Amount of time between departure from service base to arrival at the incident.	5	

Data Elements	Definitions	Length	Possible Values
Time at Scene	The amount of time spent at the scene.	5	
Time to Destination	The amount of time spent traveling from the scene to the destination.	5	
Time at Destination	The amount of time spent by the crew at the chosen destination.	5	
Total Call Time	The total amount of time spent taking care of the call.	5	
Response Time	The amount of time between the time the call was received to the time the crew arrived to administer assistance.	5	
County	Geographic location of the patient.	13	Arkansas Ashley Baxter Benton Boone Bradley Calhoun Carroll

		Chicot
		Clark
		Clay
		Cleburne
		Cleveland
		Columbia
		Conway
		Craighead
		Crawford
		Crittenden
		Cross
		Dallas
		Desha
		Drew
		Faulkner
		Franklin
		Fulton
		Garland
		Grant
		Greene

		Hempstead
		Hot Spring
		Howard
		Independence
		Izard
		Jackson
		Jefferson
		Johnson
		Lafayette
		Lawrence
		Lee
		Lincoln
		Little River
		Logan
		Lonoke
		Madison
		Marion
		Miller
		Mississippi
		Monroe

		Montgomery
		Nevada
		Newton
		Ouachita
		Perry
		Phillips
		Pike
		Poinsett
		Polk
		Pope
		Prairie
		Pulaski
		Randolph
		Saint Francis
		Saline
		Scott
		Searcy
		Sebastian
		Sevier
		Sharp

			Stone
			Union
			Van Buren
			Washington
			White
			Woodruff
			Yell
			Out of State

Data Elements	Definitions	Length	Possible Values
Community Code	Codes used to identify the area closest to the patient's location. http://www.healthylarkansas.com/ems/	5	
Incident Number	Five digit number assigned by the service to identify the call	5	
Mode to Scene	Indication of they type of transport performed by the service.	13	Emergency Non-Emergency Upgrade Downgrade

Data Elements	Definitions	Length	Possible Values													
Delayed from Scene	Simple check mark indicating if the service experienced a delay leaving the scene.	1														
Outcome	Result that occurred due to the ambulance being called.	39	<table border="1"> <tr><td>Treated/No Transport</td></tr> <tr><td>Treated/Transport by Other EMS (Ground)</td></tr> <tr><td>Treated/Transport by Other EMS (Air)</td></tr> <tr><td>Treated/Transport by Law Enforcement</td></tr> <tr><td>Cancelled</td></tr> <tr><td>Refused</td></tr> <tr><td>False Call</td></tr> <tr><td>P.O.V.</td></tr> <tr><td>No Patient Found</td></tr> <tr><td>Standby</td></tr> <tr><td>DOA</td></tr> <tr><td>EMS Rendezvous (Ground)</td></tr> <tr><td>EMS Rendezvous (Air)</td></tr> </table>	Treated/No Transport	Treated/Transport by Other EMS (Ground)	Treated/Transport by Other EMS (Air)	Treated/Transport by Law Enforcement	Cancelled	Refused	False Call	P.O.V.	No Patient Found	Standby	DOA	EMS Rendezvous (Ground)	EMS Rendezvous (Air)
Treated/No Transport																
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DOA																
EMS Rendezvous (Ground)																
EMS Rendezvous (Air)																

Data Elements	Definitions	Length	Possible Values									
Outcome (Cont.)			<table border="1"> <tr><td data-bbox="1081 289 1380 401">Emergency Department</td></tr> <tr><td data-bbox="1081 401 1380 485">Trauma Center</td></tr> <tr><td data-bbox="1081 485 1380 604">Direct Admit to Hospital</td></tr> <tr><td data-bbox="1081 604 1380 724">Extended Care Facility</td></tr> <tr><td data-bbox="1081 724 1380 808">Dr.'s Office/Clinic</td></tr> <tr><td data-bbox="1081 808 1380 892">Home</td></tr> <tr><td data-bbox="1081 892 1380 976">Morgue</td></tr> <tr><td data-bbox="1081 976 1380 1060">Police/Jail</td></tr> <tr><td data-bbox="1081 1060 1380 1157">Other</td></tr> </table>	Emergency Department	Trauma Center	Direct Admit to Hospital	Extended Care Facility	Dr.'s Office/Clinic	Home	Morgue	Police/Jail	Other
Emergency Department												
Trauma Center												
Direct Admit to Hospital												
Extended Care Facility												
Dr.'s Office/Clinic												
Home												
Morgue												
Police/Jail												
Other												
Chosen by	Person or entity that chose the outcome point.	25	<table border="1"> <tr><td data-bbox="1081 1180 1380 1255">Patient</td></tr> <tr><td data-bbox="1081 1255 1380 1339">Family</td></tr> <tr><td data-bbox="1081 1339 1380 1423">Protocol</td></tr> <tr><td data-bbox="1081 1423 1380 1507">Closest</td></tr> <tr><td data-bbox="1081 1507 1380 1591">Insurance Status</td></tr> <tr><td data-bbox="1081 1591 1380 1675">Law Enforcement</td></tr> <tr><td data-bbox="1081 1675 1380 1808">On-Line Medical Direction</td></tr> </table>	Patient	Family	Protocol	Closest	Insurance Status	Law Enforcement	On-Line Medical Direction		
Patient												
Family												
Protocol												
Closest												
Insurance Status												
Law Enforcement												
On-Line Medical Direction												

Data Elements	Definitions	Length	Possible Values										
Chosen by (Cont.)			<table border="1"> <tr><td data-bbox="1084 369 1386 411">Patient Physician</td></tr> <tr><td data-bbox="1084 453 1386 529">Specialty Resource Center</td></tr> <tr><td data-bbox="1084 571 1386 613">Other</td></tr> </table>	Patient Physician	Specialty Resource Center	Other							
Patient Physician													
Specialty Resource Center													
Other													
Work Related	Is the patient complaint related to their job?	11	<table border="1"> <tr><td data-bbox="1084 688 1386 730">Yes</td></tr> <tr><td data-bbox="1084 772 1386 814">No</td></tr> <tr><td data-bbox="1084 856 1386 898">Unknown</td></tr> </table>	Yes	No	Unknown							
Yes													
No													
Unknown													
Incident Location	Location where ambulance responds to or location of the patient.	24	<table border="1"> <tr><td data-bbox="1084 978 1386 1020">Patient Residence</td></tr> <tr><td data-bbox="1084 1062 1386 1104">Residence</td></tr> <tr><td data-bbox="1084 1146 1386 1188">Highway 55+ MPH</td></tr> <tr><td data-bbox="1084 1230 1386 1272">Other Traffic Way</td></tr> <tr><td data-bbox="1084 1314 1386 1356">Office/Business</td></tr> <tr><td data-bbox="1084 1398 1386 1440">Bar/Restaurant</td></tr> <tr><td data-bbox="1084 1482 1386 1524">Hotel/Motel</td></tr> <tr><td data-bbox="1084 1566 1386 1608">Farm/Ranch</td></tr> <tr><td data-bbox="1084 1650 1386 1726">Industrial/ Manufacturing</td></tr> <tr><td data-bbox="1084 1768 1386 1810">Construction</td></tr> </table>	Patient Residence	Residence	Highway 55+ MPH	Other Traffic Way	Office/Business	Bar/Restaurant	Hotel/Motel	Farm/Ranch	Industrial/ Manufacturing	Construction
Patient Residence													
Residence													
Highway 55+ MPH													
Other Traffic Way													
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Bar/Restaurant													
Hotel/Motel													
Farm/Ranch													
Industrial/ Manufacturing													
Construction													

Data Elements	Definitions	Length	Possible Values											
Incident Location (Cont.)		24	<table border="1"> <tr><td data-bbox="1079 331 1398 411">Jail</td></tr> <tr><td data-bbox="1079 411 1398 491">Religious Facility</td></tr> <tr><td data-bbox="1079 491 1398 571">Educational Facility</td></tr> <tr><td data-bbox="1079 571 1398 651">Leisure Facility</td></tr> <tr><td data-bbox="1079 651 1398 730">Swimming Pool</td></tr> <tr><td data-bbox="1079 730 1398 810">Water</td></tr> <tr><td data-bbox="1079 810 1398 890">Hospital</td></tr> <tr><td data-bbox="1079 890 1398 970">Clinic/Dr. Office</td></tr> <tr><td data-bbox="1079 970 1398 1050">Extended Care</td></tr> <tr><td data-bbox="1079 1050 1398 1129">Other</td></tr> <tr><td data-bbox="1079 1129 1398 1209">Mine/Quarry</td></tr> </table>	Jail	Religious Facility	Educational Facility	Leisure Facility	Swimming Pool	Water	Hospital	Clinic/Dr. Office	Extended Care	Other	Mine/Quarry
Jail														
Religious Facility														
Educational Facility														
Leisure Facility														
Swimming Pool														
Water														
Hospital														
Clinic/Dr. Office														
Extended Care														
Other														
Mine/Quarry														
Incident Setting	Whether or not the location of the incident was rural or urban.	11	<table border="1"> <tr><td data-bbox="1079 1276 1398 1356">Rural</td></tr> <tr><td data-bbox="1079 1356 1398 1436">Urban</td></tr> </table>	Rural	Urban									
Rural														
Urban														
Type of Call	Nature of the call to the ambulance service.	22	<table border="1"> <tr><td data-bbox="1079 1444 1398 1524">MVC</td></tr> <tr><td data-bbox="1079 1524 1398 1604">Motorcycle</td></tr> <tr><td data-bbox="1079 1604 1398 1684">Pedestrian</td></tr> <tr><td data-bbox="1079 1684 1398 1764">Aircraft</td></tr> <tr><td data-bbox="1079 1764 1398 1875">Assault</td></tr> </table>	MVC	Motorcycle	Pedestrian	Aircraft	Assault						
MVC														
Motorcycle														
Pedestrian														
Aircraft														
Assault														

Data Elements	Definitions	Length	Possible Values
Type of Call (Cont.)			Sexual Assault
			ATV
			Bicycle
			Bite
			Sting
			Child Battering
			Drown/Near Drown
			Electrical
			Fall
			Fire/Burn
			Inhalation Injury
			Lightning
			Machinery
			Mechanical Suffocation
			Radiation
Shooting			

Data Elements	Definitions	Length	Possible Values
Type of Call (Cont.)			Shooting Stabbing Toxic Exposure Watercraft Other Trauma Medical/Illness Intercept Inter-Facility Standby Other
Type of Dispatch	Nature of the call as described by dispatch.	22	MVC Motorcycle Pedestrian Aircraft Assault Sexual Assault ATV

Data Elements	Definitions	Length	Possible Values
Type of Dispatch (Cont.)			Bicycle
			Bite
			Sting
			Child Battering
			Drown/Near Drown
			Electrical
			Fall
			Fire/Burn
			Inhalation Injury
			Lightning
			Machinery
			Mechanical Suffocation
			Radiation
			Shooting
			Stabbing
Toxic Exposure			
Watercraft			

Data Elements	Definitions	Length	Possible Values						
Type of Dispatch (Cont.)			<table border="1"> <tr><td>Other Trauma</td></tr> <tr><td>Medical/Illness</td></tr> <tr><td>Intercept</td></tr> <tr><td>Inter-Facility</td></tr> <tr><td>Standby</td></tr> <tr><td>Other</td></tr> </table>	Other Trauma	Medical/Illness	Intercept	Inter-Facility	Standby	Other
Other Trauma									
Medical/Illness									
Intercept									
Inter-Facility									
Standby									
Other									
Scheduled	Whether the call was a scheduled patient transport.	1							
Mutual Aid	Whether the call was made as part of a mutual aid agreement.	1							
No Assistance	Simple check mark indicating that no assistance was needed.	1							
Rescue RS10	Check mark if RS10 is used in extrication of the patient	1							
Rescue Come Along	Check mark if a Come Along is used in extrication of the patient.	1							
Rescue Hydraulic	Check mark if hydraulic instruments are used in extrication of the patient.	1							

Data Elements	Definitions	Length	Possible Values
Rescue Air Chisel	Check mark if an Air Chisel is used in extrication of the patient.	1	
Rescue Air Bags	Check mark if air bags were used in the extrication of the patient.	1	
Rescue Jaws	Check mark if the jaws of life were used in extrication of the patient.	1	
Rescue Other	Check mark if other means of extrication were used to help the patient.	1	
Called By	Indication of who made the call for assistance.	22	Patient/Family
			Bystander
			Fire
			Police
			Extended Care Facility
			Acute Care Facility
Used 911	Indication of whether or not the 911 system was used to call for assistance.	11	Yes
			No

Data Elements	Definitions	Length	Possible Values
Primary Suspected Illness	Assessed primary cause of the patient's condition.	27	<p>Abdominal Pain</p> <p>Airway Obstruction</p> <p>Allergic Reaction</p> <p>Altered LOC</p> <p>Back Pain (Non-Traumatic)</p> <p>Behavioral</p> <p>Bleeding / Hemorrhage</p> <p>Breathing Difficulty</p> <p>Cardiac Arrest</p> <p>Cardiac Symptoms</p> <p>Chest Pain</p> <p>CVA</p> <p>Dehydration</p> <p>Device Failure</p> <p>Diarrhea</p> <p>Dizziness</p> <p>Drainage / Discharge</p>

Data Elements	Definitions	Length	Possible Values
Primary Suspected Illness (Cont.)			Eye Problem (Non-Traumatic)
			Gynecological
			Hyperglycemia
			Hypertension
			Hyperthermia
			Hypoglycemia
			Hypothermia
			Infectious Disease
			Malaise
			Mass / Lesion
			Nausea
			Obstetrical
			Obvious Death
			Overdose
			Palpitations
Paralysis			
Poisoning / Ingestion			

Data Elements	Definitions	Length	Possible Values
Primary Suspected Illness (Cont.)			Procedure Complication Rash / Itching Respiratory Arrest Seizure Shock Sick Person / Fever Swelling Unconscious Vomiting Weakness Other
No Injury	Check mark indicating that there was no injury found.	1	
Protect 3 Point	Check mark indicating that a 3 Point protection system (Combination Shoulder and Lap Belt) was being used to help protect a pediatric patient prior to an accident.	1	

Data Elements	Definitions	Length	Possible Values
Protect Shoulder Belt	Check mark indicating that a shoulder belt was being used to help protect a patient prior to an accident.	1	
Protect Lap Belt	Check mark indicating that a lap belt was being used to help protect a patient prior to an accident.	1	
Protect Air Bag	Check mark indicating that an Air Bag deployed to help protect the patient.	1	
Protect Safety Seat	Check mark indicating that a Safety Seat was being used to help protect a pediatric patient prior to an accident.	1	
Protect Helmet	Check mark indicating that a helmet was being used to help protect the patient prior to an accident.	1	
Protect PFD	Check mark indicating that a personal flotation device was used to help protect the patient.	1	
Protect None Used	Check mark indicating that no types of protection were used to help protect the patient prior to an accident.	1	

Data Elements	Definitions	Length	Possible Values
Protect Unavailable	Check mark indicating that no types of protection were available to protect the patient prior to an accident.	1	
Protect Unknown	Check mark indicating that protection use by the patient prior to the accident is unknown.	1	
Patient Location	Portion of the vehicle the patient was removed from for treatment.	11	Driver Front Rear Truck Bed Other Unknown
Glasgow Coma Scale	The patient's total Glasgow Coma Score.	2	
Revised Trauma Score	Combination of the Glasgow Coma Score, Systolic Blood Pressure, and Respiratory Rate of the Patient. The software allows scoring up to two decimal places for this score.	7.2	

Data Elements	Definitions	Length	Possible Values
Gender	Apparent gender of the patient.	11	Male
			Female
Age	Actual or estimated age of the patient.	3	
Age is In	Range used for indicating the patient's age.		Years Months Days
Age Approximate	Check mark indicating that the age of the patient has been estimated.	1	
Ethnic Origin	The apparent or state ethnic background of the patient.	16	Asian
			Black
			Native American
			White
			Hispanic
			Pacific Islander
			Other
			Unknown

Data Elements	Definitions	Length	Possible Values
Reason for No Vitals	Explanation of why no vitals are entered into the record.	14	Unable To Take
			Not Taken
Skin Moisture	Basic description of the hydration level of the patient's skin.	11	Wet
			Dry
			Normal
			Moist
Skin Color	Basic description of the visual appearance of the patient's skin.	11	Pink
			Cyanotic
			Flushed
			Jaundiced
			Mottled
			Normal
			Pale
			Other
Ped Capillary Refill	Time frame of noted return of blood flow back into extremity such as nail beds in fingernails, toe nails, or ear lobes.		Normal
			Delayed

Data Elements	Definitions	Length	Possible Values
Left Pupil Constriction	Description of the state of constriction of the patient's left pupil.	12	Normal
			Constricted
			Dilated
			Unobtainable
Left Pupil Nonreactive	Check mark indicating that the patient's left pupil was nonreactive.	1	
Left Pupil prosthetic	Check mark indicating that the patient's left pupil is prosthetic.	1	
Right Pupil Constriction	Description of the state of constriction of the patient's right pupil.	12	Normal
			Constricted
			Dilated
			Unobtainable
Right Pupil Nonreactive	Check mark indicating that the patient's right pupil was nonreactive.	1	
Right Pupil Prosthetic	Check mark indicating that the patient's right pupil is prosthetic.	1	

Data Elements	Definitions	Length	Possible Values
Pediatric Weight	Apparent weight of the pediatric patient.	11	>20 kg
			10-20kg
			<10 kg
Defibrillation Attempts	The number of times that a defibrillation attempt was made on the patient.	6	One
			Two
			Three+
Defibrillation Unable	Check mark indicating that a defibrillation attempt could not be made.	1	
Intubation Attempts	Number of times that intubation of the patient was attempted. Attempt considered when blade of laryngoscope or endotracheal tube is placed past the patient's lips.	6	One
			Two
			Three+
Intubation Unable	Check mark indicting that intubation of the patient was not possible.	1	
IO Attempts	Number of attempts made to insert an IO needle into the patient	6	One Two Three+

Data Elements	Definitions	Length	Possible Values
IO Unable	Check mark indicating that it was not possible to insert an IO needle into the patient's body.	1	
IV Attempts	Number of times that the insertion of an IV was attempted on the patient.	6	One
			Two
			Three+
IV Unable	Check mark indicating that it was not possible to insert an IV into the patient.	1	
Arrest to CPR	Amount of time between Cardiac Arrest and the start of Cardio Pulmonary Resuscitation.	13	< 4 Minutes
			4 - 8 Minutes
			> 9 Minutes
			Unknown
Arrest to Defibrillation	Amount of time between Cardiac Arrest and the attempt to defibrillate the patient.	13	< 4 Minutes
			4 - 8 Minutes
			> 9 Minutes
			Unknown

Data Elements	Definitions	Length	Possible Values
Arrest to ALS	Amount of time between Cardiac Arrest and the application of Advanced Level Services.	13	< 4 Minutes
			4 - 8 Minutes
			> 9 Minutes
			Unknown
Arrest Witnessed	Record of whether or not the Cardiac Arrest was witnessed by another person.	11	Yes
			No
			Unknown
Pulse Restored	Record of whether or not the pulse of the patient was restored during treatment.	11	Yes
			No
			Unknown
IV 1 Type	First type of intravenous fluid given to the patient.	5	D5W NS LR Other
IV 1 Rate	Rate of flow for the first intravenous fluid given to the patient.	11	TKO
			Wide
			Bolus

Data Elements	Definitions	Length	Possible Values
IV 1 Rate (Cont.)			Other
IV 2 Type	Second type of intravenous fluid given to the patient.	5	D5W NS LR Other
IV 2 Rate	Rate of flow for the second intravenous fluid given to the patient.	11	TKO Wide Bolus Other
IV 3 Type	Third type of intravenous fluid given to the patient.	5	D5W NS LR Other
IV 3 Rate	Rate of flow for the third intravenous fluid given to the patient.	11	TKO Wide

Data Elements	Definitions	Length	Possible Values
IV 4 Type	Fourth type of intravenous fluid given to the patient.	5	D5W
			NS
			LR
			Other
IV 4 Rate	Rate of flow for the fourth intravenous fluid given to the patient.	11	TKO
			Wide
			Bolus
			Other
IV Lines	Number of total intravenous lines started for the patient.	1	
Individual Protocol	Off line medical directions in a written reference/document.	1	
On or Off Line	Whether help was obtained by direct communication with another medical professional or if a written reference (Off Line) was used.	11	Off Line
			On Line
Blood CM1	Check mark indicating that Crew Member One (1) administered blood to the patient.	1	
Blood CM2	Check mark indicating that Crew Member Two (2) administered blood to the patient.	1	

Data Elements	Definitions	Length	Possible Values
Blood CM3	Check mark indicating that Crew Member Three administered blood to the patient.	1	
Masks CM1	Check mark indicating that Crew Member One (1) utilized a protective face mask during treatment of the patient.	1	
Mask CM2	Check mark indicating that Crew Member Two (2) utilized a protective face mask during treatment of the patient.	1	
Mask CM3	Check mark indicating that Crew Member Three (3) utilized a protective face mask during treatment of the patient.	1	
Gloves CM1	Check mark indicating that Crew Member One (1) utilized protective gloves during the treatment of the patient.	1	
Gloves CM2	Check mark indicating that Crew Member Two (2) utilized protective gloves during the treatment of the patient.	1	

Data Elements	Definitions	Length	Possible Values
Gloves CM3	Check mark indicating that Crew Member Three (3) utilized protective gloves during the treatment of the patient.	1	
Eye Protection CM1	Check mark indicating that Crew Member One (1) utilized protective goggles during the treatment of the patient.	1	
Eye Protection CM2	Check mark indicating that Crew Member Two (2) utilized protective goggles during the treatment of the patient.	1	
Eye Protection CM3	Check mark indicating that Crew Member Three (3) utilized protective goggles during the treatment of the patient.	1	
Gown CM1	Check mark indicating that Crew Member One (1) utilized a protective body covering during the treatment of the patient.	1	
Gown CM2	Check mark indicating that Crew Member Two (2) utilized a protective body covering during the treatment of the patient.	1	

Data Elements	Definitions	Length	Possible Values
Gown CM3	Check mark indicating that Crew Member Three (3) utilized a protective body covering during the treatment of the patient.	1	
Biohazard Report Filed	Question of whether a biohazard report was filed as a result of the ambulance run.	11	Yes
			No
Received By Type	Type of entity receiving the transferred patient.	11	Hospital
			Ambulance
			Other
Receiving Facility	Name of the facility receiving the patient.	50	Look Up
Miles to Scene	Number of map miles driven to reach the scene.	3	
Miles to Destination	Number of map miles driven to take the patient from the scene to the destination	3	
Total Miles	The total number of miles driven during the ambulance service call.	3	

Data Elements	Definitions	Length	Possible Values								
Research Code	A special number assigned by the Section of EMS and Trauma to a service wanting to do research.	3									
Crew Member 1 Type	Crew member one's professional certification level.	12	<table border="1"> <tr><td data-bbox="1081 520 1390 600">Basic</td></tr> <tr><td data-bbox="1081 600 1390 680">A</td></tr> <tr><td data-bbox="1081 680 1390 760">Intermediate</td></tr> <tr><td data-bbox="1081 760 1390 840">Paramedic</td></tr> <tr><td data-bbox="1081 840 1390 919">LPN</td></tr> <tr><td data-bbox="1081 919 1390 999">RN</td></tr> <tr><td data-bbox="1081 999 1390 1079">MD</td></tr> <tr><td data-bbox="1081 1079 1390 1220">Other</td></tr> </table>	Basic	A	Intermediate	Paramedic	LPN	RN	MD	Other
Basic											
A											
Intermediate											
Paramedic											
LPN											
RN											
MD											
Other											
Crew Member 1 ID	Arkansas EMT Identification number assigned to crew member one.	5									
Crew Member 2 Type	Arkansas EMT Crew member two's professional certification level.	12	<table border="1"> <tr><td data-bbox="1081 1486 1390 1566">Basic</td></tr> <tr><td data-bbox="1081 1566 1390 1646">A</td></tr> <tr><td data-bbox="1081 1646 1390 1818">Intermediate</td></tr> </table>	Basic	A	Intermediate					
Basic											
A											
Intermediate											

Data Elements	Definitions	Length	Possible Values
Crew Member 2 Type (Cont.)			Paramedic LPN RN MD Other
Crew Member 2 ID	Arkansas EMT Identification number assigned to crew member two.	5	
Reported By	Check mark indicating which crew member filled out the report.	1	1
			2
Patient Name	Name of the patient if known	30	
Patient Social Security Number	Social Security Number of the patient if known.	11	
Patient Birthdate	Day, Month, and Year of the patient's birth if known.	8	

Data Elements	Definitions	Length	Possible Values
Patient Address	Complete street address of the patient if known	30	
Patient City	City in which the patient lives if known	15	
Patient State	State in which the patient lives if known.	2	AK
			AL
			AR
			AZ
			CA
			CO
			CT
			DC
			DE
			FL
			GA
			HI
IA			

Data Elements	Definitions	Length	Possible Values
Patient State (Cont.)			ID
			IL
			IN
			KS
			KY
			LA
			MA
			MD
			ME
			MI
			MN
			MO
			MS
			MT
			NC
			ND
NE			
NH			

Data Elements	Definitions	Length	Possible Values
Patient State (Cont.)			NJ
			NM
			NV
			NY
			OH
			OK
			OR
			PA
			RI
			SC
			SD
			TN
			TX
			UT
			VA
VT			
WA			

Data Elements	Definitions	Length	Possible Values
Patient State (Cont.)			WI
			WV
			WY
Patient Zip	Zip code of the patient's residence if known.	10	
Patient Home Phone	The home phone number including the area code of the patient if known.	14	(NNN) NNN-NNNN
Chief Complaint	A short description of the patient's medical problem.	45	
Current Medications	List of the pharmaceuticals being taken by the patient.	45	
Allergies	List of agents that cause an allergic reaction for the patient.	45	
Glasgow Eyes	Type of response from the patient's eyes with or without stimulus.	13	Spontaneous
			To Speech
			To Pain
			None

Data Elements	Definitions	Length	Possible Values						
Glasgow Verbal	Type of verbal response from the patient.	13	<table border="1"> <tr><td data-bbox="1078 365 1398 447">Oriented</td></tr> <tr><td data-bbox="1078 453 1398 535">Confused</td></tr> <tr><td data-bbox="1078 541 1398 623">Inappropriate</td></tr> <tr><td data-bbox="1078 630 1398 711">Garbled</td></tr> <tr><td data-bbox="1078 718 1398 800">None</td></tr> </table>	Oriented	Confused	Inappropriate	Garbled	None	
Oriented									
Confused									
Inappropriate									
Garbled									
None									
Glasgow Motor	Type of physical response from the patient.		<table border="1"> <tr><td data-bbox="1078 821 1398 903">Obeys</td></tr> <tr><td data-bbox="1078 909 1398 991">Localizes</td></tr> <tr><td data-bbox="1078 997 1398 1079">Withdraws</td></tr> <tr><td data-bbox="1078 1085 1398 1167">Flexion</td></tr> <tr><td data-bbox="1078 1173 1398 1255">Extension</td></tr> <tr><td data-bbox="1078 1262 1398 1344">None</td></tr> </table>	Obeys	Localizes	Withdraws	Flexion	Extension	None
Obeys									
Localizes									
Withdraws									
Flexion									
Extension									
None									
Personal Physician	The name of the patient's regular doctor if known.	30							
Bill to Name	Name of the person the service intends to bill for the call.	30							

Data Elements	Definitions	Length	Possible Values
Bill to Address	Address where the service intends to send the bill for the call.	30	
Bill to City	City portion of the address where the service intends to send the bill for the call.	15	
Bill to State	State portion of the address where the service intends to send the bill for the call.	2	AK
			AL
			AR
			AZ
			CA
			CO
			CT
			DC
			DE
			FL
			GA
			HI
IA			

Data Elements	Definitions	Length	Possible Values
Bill to State (Cont.)			ID
			IL
			IN
			KS
			KY
			LA
			MA
			MD
			ME
			MI
			MN
			MO
			MS
			MT
			NC
			ND
NE			
NH			

Data Elements	Definitions	Length	Possible Values
Bill to State (Cont.)			NJ
			NM
			NV
			NY
			OH
			OK
			OR
			PA
			RI
			SC
			SD
			TN
			TX
			UT
			VA
			VT
WA			

Data Elements	Definitions	Length	Possible Values
Bill to State (Cont.)			WI
			WV
			WY
Bill to Zip	Postal Zip Code portion of the address where the service intends to send the bill for the call.	10	NNNNN-NNNN
Bill to Phone	Phone Number associated with the address where the service intends to send the bill for the call.	14	(NNN) NNN-NNNN
Employer	Name of the entity or person the patient works for.	30	
Employer Phone	Phone Number associated with the entity or person the patient works for.	14	(NNN) NNN-NNNN
Insurance	Policy number of the patient's insurance if known.	20	
Medicaid	Policy number of the patient's Medicaid account if known.	20	
Medicare	Policy number of the patient's Medicare account if known.	20	

Data Elements	Definitions	Length	Possible Values
Person Receiving Patient	Name of the individual accepting responsibility for the patient.	30	
Narrative	Free Text Memo Field	4	
Exported	Check mark indicating if data has been exported or not.	1	Y
			N
Export Date	Typed date indicating when the data was exported.	8	
Insurance Detail	Information about the patient's insurance if known.	4	
Incident Zip	Zip code where the incident took place if known.	5	
Vehicle Insurance	Information about insurance for the vehicle related to the incident	4	
Skin Temperature	Apparent temperature of the patient's skin.	10	Normal
			Warm
			Hot
			Cold

Data Elements	Definitions	Length	Possible Values
Research 1	A special code assigned when a service wants to do research.	4	
Research 2	A special code assigned when a service wants to do research.	4	
Research 3	A special code assigned when a service wants to do research.	4	
Research 4	A special code assigned when a service wants to do research.	4	
Research 5	A special code assigned when a service wants to do research.	4	
Incomplete	Check mark indicating that the information for the call is incomplete.	1	
User Name	Identification name used to access the program.	30	
DNR	Check mark indicating that a “Do Not Resuscitate order was in place for the patient.	1	

Data Elements	Definitions	Length	Possible Values
LA Age	Portion of the Los Angeles (LA) Stroke Scale: Patient's age may indicate that a stroke is occurring.	1	
LA No Seizure	Portion of the LA Stroke Scale: Indicating that the patient shows no sign of seizure with the event.	1	
LA Onset	Portion of the LA Stroke Scale: Indicating the onset of a stroke	1	
LA Ambulatory	Portion of the LA Stroke Scale: If the patient is having trouble moving properly they may be having a stroke.	1	
LA Glucose	Portion of the LA Stroke Scale: Blood glucose between 60 and 400 may indicate that they patient is having a stroke.	1	
LA Facial	Portion of the LA Stroke Scale: Facial drop or other sudden changes in the patient's facial features may indicate that they are having a stroke.	1	

Data Elements	Definitions	Length	Possible Values
LA Grip	Portion of the LA Stroke Scale: Patient's failure to grip someone's hands firmly may indicate that they are having a stroke.	1	
LA Weakness	Portion of the LA Stroke Scale: Patient's physical weakness may indicate that they are having a stroke.	1	
LA None	Indication that none of the signs from the stroke scale are present.	1	
Onset Date	Day, Month, and Year that the symptoms started.	8	
Onset Time	Time of day that they symptoms started.	5	HH:MM
Arrived Patient	Time of day when the crew members reached the patient.		HH:MM
Destination Zip	Zip Code where the patient was transported.	5	

Data Elements	Definitions	Length	Possible Values									
CMS Service Level	Level of service delivery.	24	<table border="1"> <tr><td data-bbox="1079 331 1398 411">BLS</td></tr> <tr><td data-bbox="1079 411 1398 491">BLS Emergency</td></tr> <tr><td data-bbox="1079 491 1398 571">ALS Level 1</td></tr> <tr><td data-bbox="1079 571 1398 701">ALS Level 1 Emergency</td></tr> <tr><td data-bbox="1079 701 1398 781">ALS Level 2</td></tr> <tr><td data-bbox="1079 781 1398 861">Paramedic Intercept</td></tr> <tr><td data-bbox="1079 861 1398 991">Specialty Care Transport</td></tr> <tr><td data-bbox="1079 991 1398 1121">Fixed Wing (Airplane)</td></tr> <tr><td data-bbox="1079 1121 1398 1289">Rotary Wing (Helicopter)</td></tr> </table>	BLS	BLS Emergency	ALS Level 1	ALS Level 1 Emergency	ALS Level 2	Paramedic Intercept	Specialty Care Transport	Fixed Wing (Airplane)	Rotary Wing (Helicopter)
BLS												
BLS Emergency												
ALS Level 1												
ALS Level 1 Emergency												
ALS Level 2												
Paramedic Intercept												
Specialty Care Transport												
Fixed Wing (Airplane)												
Rotary Wing (Helicopter)												
Num Pts	Number of patients transported	3										
MCI	Mass Casualty Incident	3	<table border="1"> <tr><td data-bbox="1079 1495 1398 1575">Yes</td></tr> <tr><td data-bbox="1079 1575 1398 1654">No</td></tr> <tr><td data-bbox="1079 1654 1398 1766">Unk</td></tr> </table>	Yes	No	Unk						
Yes												
No												
Unk												

Data Elements	Definitions	Length	Possible Values				
ETOH Smell	Check mark indicating the smell of ethanol on the patient.	1					
ETOH Admit	Check mark indicating that the patient was admitted for ethanol.	1					
Drug Admit	Check mark indicating that the patient was admitted for drug related issues.	1					
Paraphernalia	Check mark indicating that drug paraphernalia was present on the patient.	1					
ETOH Drugna	Check mark indicating that ETOH and Drug signs were not applicable.	1					
ETOH Drugun	Check mark indicating that ETOH and Drug signs were unknown.	1					
Pay Method	Method of payment for the patient transport.	27	<table border="1"> <tr> <td>Insurance</td> </tr> <tr> <td>Medicaid</td> </tr> <tr> <td>Medicare</td> </tr> <tr> <td>Not Billed (for any reason)</td> </tr> </table>	Insurance	Medicaid	Medicare	Not Billed (for any reason)
Insurance							
Medicaid							
Medicare							
Not Billed (for any reason)							

Data Elements	Definitions	Length	Possible Values
Pay Method (Cont.)			Other Government
			Self Pay
			Workers Compensation
ED Disposition	Discharge from the emergency department to another part of the hospital or out of the facility.	38	Admitted to Hospital Floor
			Admitted to Hospital ICU
			Death
			Not Applicable (Not Transported to ED)
			Released
			Transferred
Hospital Disposition	Type of discharge from the hospital.	35	Death
			Discharged
			Transfer to Hospital
			Transfer to Nursing Home

Data Elements	Definitions	Length	Possible Values
Hospital Disposition (Cont.)			Transfer to Other
			Transfer to Rehabilitation Facility
Assist Outcome	Patient condition result based on the assistance provided.	9	Improved
			Worsened
			Unchanged
HCP Witness Arrest	Health Care Provider witnesses arrest.	7	Yes
			No
			Unknown
Cardiac Etiology	Basic assessment of the cardiac event.	16	Presumed Cardiac
			Trauma
			Drowning
			Respiratory
			Electrocution
			Other

Data Elements	Definitions	Length	Possible Values
ALS Table			
Lithocode	Number assigned to the run in the data collection system.	9	
Procedure	Type of procedure(s) performed.	25	<ul style="list-style-type: none"> Blood Draw Cardiac monitor Cardiac Pacing Cardioversion Defib. – Manual Cryothyrotomy EOA/EGTA Glucometer Intubation – Nasal Intubation – Oral IV - External Jugular IV – Intraosseous IV – Peripheral

Data Elements	Definitions	Length	Possible Values
Procedure (Cont.)		25	Medication Administered
			Needle Thoracostomy
			Other ALS
Crew Member	Indication of which crew member performed the procedure.	3	C1
			C2
			Oth
Assist Table			
Lithocode	Number assigned to the run in the data collection system.	9	
Procedure	Type of procedure performed to assist the patient.	16	Extricate/Move
			CPR
			Wound Management
			Airway
			Defibrillation

Data Elements	Definitions	Length	Possible Values						
By	Procedure to assist the patient was performed by:	15	<table border="1"> <tr><td data-bbox="1081 323 1390 411">Bystander</td></tr> <tr><td data-bbox="1081 411 1390 499">First Responder</td></tr> <tr><td data-bbox="1081 499 1390 588">Fire</td></tr> <tr><td data-bbox="1081 588 1390 676">Police</td></tr> <tr><td data-bbox="1081 676 1390 764">Other HCP</td></tr> <tr><td data-bbox="1081 764 1390 884">Patient</td></tr> </table>	Bystander	First Responder	Fire	Police	Other HCP	Patient
Bystander									
First Responder									
Fire									
Police									
Other HCP									
Patient									
BLS Table									
Lithocode	Number assigned to the run in the data collection system.	9							
Procedure	Type of procedure performed to assist the patient.	21	<table border="1"> <tr><td data-bbox="1081 1274 1390 1362">Assessment</td></tr> <tr><td data-bbox="1081 1362 1390 1451">Airway Clear</td></tr> <tr><td data-bbox="1081 1451 1390 1539">Abdominal Thrust</td></tr> <tr><td data-bbox="1081 1539 1390 1627">Back Blows</td></tr> <tr><td data-bbox="1081 1627 1390 1715">Bleeding Control</td></tr> <tr><td data-bbox="1081 1715 1390 1808">CPR</td></tr> </table>	Assessment	Airway Clear	Abdominal Thrust	Back Blows	Bleeding Control	CPR
Assessment									
Airway Clear									
Abdominal Thrust									
Back Blows									
Bleeding Control									
CPR									

Data Elements	Definitions	Length	Possible Values
Procedure (Cont.)		21	Defib. – Auto
			Extrication
			MAST
			OB Delivery
			Oxygen
			Pulse Oximeter
			Restraints
			Spinal Immobilization
			Splint Extremity
			Suction
			Ventilation
			Other BLS
Crew Member	Indication of which crew member performed the procedure.	3	C1
			C2
			Oth
Chart Table			

Data Elements	Definitions	Length	Possible Values
Lithocode	Number assigned by the data collection system.	9	
Time	Indication of the time associated with the record in the chart.	5	
Systolic	Indication of the patient's systolic blood pressure.	3	
Diastolic	Indication of the patient's diastolic blood pressure.	3	
Diastolic Palpable	Check mark indicating if the diastolic rate is palpable.	1	
Respiration	Indication of the respiratory rate of the patient.	2	
Respiration Irregular	Check mark indicating that the respiratory rate of the patient is irregular.	1	
Pulse	Indication of the pulse rate of the patient.	3	
Pulse Irregular	Check mark indicating that the pulse rate of the patient is irregular.	1	

Data Elements	Definitions	Length	Possible Values
EKG	Electrocardiogram	19	NSR Sinus Tach Sinus Brady Asystole AV Block Atrial Fib Atrial Flutter Vent Tach Vent Fib SV Tach Idioventricular Other
PEA	Pulse Electrical Activity	1	
PVCS	Premature Ventricular Complexes	1	

Data Elements	Definitions	Length	Possible Values
Treatment	Indication of the treatment provided.	18	
Crew Member	Indication of which crew member provided the treatment.	3	CM1 CM2 Oth
Comment	Free text space to comment on the treatment given.	25	
Oximeter Reading	Indication given by the oximeter.	6	
Contrib. Table			
Lithocode	Number given by the data collection system to the contributing factors.	9	
Contributing Factors	Conditions outside the patient that may have caused additional problems.	40	Resp Delay-Crowds
			Resp Delay-Directions
			Resp Delay-Distance
			Resp Delay-Diversion

Data Elements	Definitions	Length	Possible Values
Contributing Factors (Cont.)		40	Resp Delay-HAZMAT
			Resp Delay-Safety
			Resp Delay-Staff Delay
			Resp Delay-Traffic
			Resp Delay-Vehicle Crash
			Resp Delay-Vehicle Failure
			Resp Delay-Weather
			Other Reponse Delay
			No Response Delays
			Scene Delay-Crowd
			Scene Delay-Directions
			Scene Delay-Distance
			Scene Delay-Diversion
			Scene Delay-Extrication >20 min.

Data Elements	Definitions	Length	Possible Values
Contributing Factors (Cont.)		40	Scene Delay-HAZMAT
			Scene Delay-Language Barrier
			Scene Delay-Safety
			Scene Delay-Staff Delay
			Scene Delay-Traffic
			Scene Delay-Vehicle Crash
			Scene Delay-Vehicle Failure
			Scene Delay-Weather
			Other Scene Delay
			No Scene Delays
			Developmentally Impaired
			Hearing Impaired
			Language
Physically Impaired			

Data Elements	Definitions	Length	Possible Values
Contributing Factors (Cont.)		40	Speech Impaired
			Unattended/ Unsupervised
			No Barriers to Pt Care
			Delay in Detection
			Patient Abused
			Self-Infliction
			Sports
			Terrain
			Tran Delay-Crowd
			Tran Delay-Directions
			Tran Delay-Distance
			Tran Delay-Diversion
			Tran Delay-Extrication >20 min.
			Tran Delay-HAZMAT
Tran Delay-Language Barrier			

Data Elements	Definitions	Length	Possible Values
Contributing Factors (Cont.)		40	Tran Delay-Safety
			Tran Delay-Staff Delay
			Tran Delay-Traffic
			Tran Delay-Vehicle Crash
			Tran Delay-Vehicle Failure
			Tran Delay-Weather
			Other Transport Delay
			No Transport Delays
			Substance(s)
			Alcohol
			Caller (Uncooperative)
			High Call Volume
			Disp Delay-Language Barrier
			Location (Inability to Obtain)
No Units Available			

Data Elements	Definitions	Length	Possible Values
Contributing Factors (Cont.)		40	Scene Safety (Not Secure for EMS)
			Technical Failure (Computer, Phone etc.)
			Other Dispatch Delay
			No Dispatch Delay
			Cleanup
			Decontamination
			Documentation
			ED Overcrowding
			Equipment Failure
			Equipment Replenishment
			Turnaround Delay-Staff Delay
			Turnaround Delay-Vehicle Failure
			Other Turnaround Delay
			No Turnaround Delay

Data Elements	Definitions	Length	Possible Values
Criteria Table			
Lithocode	Number given by the data collection system to the injury.	9	
Injury Criteria	Type of injury condition experienced by the patient	25	<ul style="list-style-type: none"> <li data-bbox="1073 709 1398 793">Flail Chest <li data-bbox="1073 793 1398 877">Burns > 20% / Face <li data-bbox="1073 877 1398 961">Fall > 20 Feet <li data-bbox="1073 961 1398 1045">Paralysis <li data-bbox="1073 1045 1398 1129">Speed of 40+ MPH <li data-bbox="1073 1129 1398 1255">Deformity of 20+ Inches <li data-bbox="1073 1255 1398 1381">Intrusion of 12+ Inches <li data-bbox="1073 1381 1398 1465">Rollover <li data-bbox="1073 1465 1398 1549">Ejection <li data-bbox="1073 1549 1398 1633">Death Same MV <li data-bbox="1073 1633 1398 1717">Motorcycle 20+ MPH <li data-bbox="1073 1717 1398 1808">Pedestrian vs MV > 5 MPH

Data Elements	Definitions	Length	Possible Values
Illness Table			
Lithocode	Number given by the data collection system to the illness.	9	
Illness	Suspected illness or signs of distress of the patient.	27	Abdominal Pain
			Airway Obstruction
			Allergic Reaction
			Altered LOC
			Back Pain (non-Traumatic)
			Behavioral
			Bleeding / Hemorrhage
			Breathing Difficulty
			Cardiac Arrest
			Cardiac Symptoms
			Chest Pain
CVA			

Data Elements	Definitions	Length	Possible Values
Illness (Cont.)		27	Dehydration
			Device Failure
			Diarrhea
			Dizziness
			Drainage / Discharge
			Eye Problem (non-Traumatic)
			Gynecological
			Hyperglycemia
			Hypertension
			Hyperthermia
			Hypoglycemia
			Hypothermia
			Infectious Disease
			Malaise
			Mass / Lesion
Nausea			

Data Elements	Definitions	Length	Possible Values
Illness (Cont.)		27	Obvious Death
			Overdose
			Palpitations
			Paralysis
			Poison
			Procedure Complication
			Rash / Itching
			Respiratory Arrest
			Seizure
			Sick Person / Fever
			Shock
			Swelling
			Unconscious
			Vomiting
			Weakness
Other			

Data Elements	Definitions	Length	Possible Values
Injury Table			
Lithocode	Number given by the data collection system to the injury.	9	
Site	Portion of the body that shows signs of injury.	17	Head
			Face
			Eye
			Neck
			Chest
			Back
			Abdomen
			Pelvis/Genitals
			Upper Extremities
			Lower Extremities
Type	Type of injury experienced by the patient	12	Amputate
			Burn/Elect.
			Blunt

Data Elements	Definitions	Length	Possible Values
Type (Cont.)		12	Fract/Disloc
			Pain
			Paralysis
			Penetrate
			Soft-Open
			Soft-Closed
Medicate Table			
Lithocode	Number given by the data collection system to the medication.	9	
Medication	Pharmaceuticals given to the patient.	21	Adenosine
			Albuterol
			ASA
			Atropine
			Bicarbonate
			Bretylium
			Calcium

Data Elements	Definitions	Length	Possible Values
Medication (Cont.)		21	Dextrose 50%
			Diazepam
			Diphenhydramine
			Dobutamine
			Dopamine
			Epinephrine (1:1000)
			Epinephrine (1:10000)
			Heparin
			Isoproterenol
			Lidocaine
			Magnesium Sulfate
			Meperidine
			Metaproterenol
			Morphine
			Naloxone
Nitroglycerine			
Nitrous Oxide			

Data Elements	Definitions	Length	Possible Values
Medication (Cont.)		21	Oxytocin
			Procainamide
			Terbutaline
			Verapamil
			Other
Medical History Table			
Lithocode	Number given by the data collection system to the patient's medical history.	9	
Medical History	List of previous conditions or issues the patient has experienced.	20	Patient States None
			Unknown
			Allergies
			Asthma
			Behavioral
			Cancer
			Cardiac

Data Elements	Definitions	Length	Possible Values
Medical History (Cont.)		20	COPD
			CVA
			Diabetes
			Drug/ETOH
			Hypertension
			Seizure
			Other
Complications Table			
Lithocode	Number given by the data collection system to complications the patient might experience.	9	
Procedures Medical	Steps taken to address the medical complications.	25	Assessment
			Airway Clear
			Abdominal Thrust
			Back Blows
			Bleeding Control
			CPR

Data Elements	Definitions	Length	Possible Values
Procedures Medical (Cont.)		25	Defib. – Auto
			Extrication
			MAST
			OB Delivery
			Oxygen
			Pulse Oximeter
			Restraints
			Spinal Immobilization
			Splint Extremity
			Suction
			Ventilation
			Other BLS
			Blood Draw
			Cardiac monitor
			Cardiac Pacing
Cardioversion			
Defib. - Manual			

Data Elements	Definitions	Length	Possible Values
Procedures Medical (Cont.)		25	Cryothyrotomy
			EOA/EGTA
			Glucometer
			Intubation - Nasal
			Intubation – Oral
			IV - External Jugular
			IV – Intraosseous
			IV – Peripheral
			Medication Administered
			Needle Thoracostomy
			Other ALS
			Adenosine
			Albuterol
			ASA
			Atropine
			Bicarbonate
Bretylium			

Data Elements	Definitions	Length	Possible Values
Procedures Medical (Cont.)		25	Calcium
			Dextrose 50%
			Diazepam
			Diphenhydramine
			Dobutamine
			Dopamine
			Epinephrine (1:1000)
			Epinephrine (1:10000)
			Heparin
			Isoproterenol
			Lidocaine
			Magnesium Sulfate
			Meperidine
			Metaproterenol
			Morphine
Naloxone			
Nitroglycerine			
Nitrous Oxide			

Data Elements	Definitions	Length	Possible Values
Procedures Medical (Cont.)		25	Oxytocin
			Procainamide
			Terbutaline
			Verapamil
			Other
Complication	Type of complication experienced by the patient.	33	Altered Mental Status
			Apnea
			Bleeding
			Bradycardia
			Diarrhea
			Esophageal Intubation-immediately
			Esophageal Intubation-other
			Extravasation
			Hypertension
			Hyperthermia

Data Elements	Definitions	Length	Possible Values
Complication (Cont.)		33	Hypotension
			Hypoxia
			Injury
			Itching/Urticaria
			Nausea
			Other
			Respiratory Distress
			Tachycardia
			Vomiting
			None