July 01, 2009

Integrating the Healthcare Enterprise (IHE)
Patient Care Coordination Committee
Radiological Society of North America, Inc.
820 Jorie Boulevard
Oak Brook, IL 60523-2251

Attention: 'EMS Transfer of Care' (ETC) Public Comment

PeaceHealth, Whatcom Region is pleased to offer comments on the IHE PCC 'EMS Transfer of Care' Technical Framework Supplement. This letter addresses the pre-hospital emergency responder component of patient care. In order to meet the goals laid out by HITSP's Emergency Responder – Electronic Health Record (ER-EHR) Use Case and IHE's ITI ID/ECON White Paper, it is vital that the EMS Transfer of Care Technical Framework support emergency responder access and exchange of current and historical patient-specific health information from a Personal Health Record (PHR), Emergency Contact Registry (ECON) and/or Electronic Health Record (EHR), via a health information exchange (HIE) or regional health information organization (RHIO).

In the way of background, my medical practice is Emergency Medicine. I have worked with and trained EMTs and paramedics for most of my career. My community is one of the three Washington State Health Record Bank pilots, as well as, a national leader in connecting health care providers (likely the most connected RHIO in the US). We are a leader in community-based Personal Health Records (Health Record Banks) and on behalf of this community's RHIO (Whatcom Health Information Network) have obtained the unanimous support of the regional EMS council, the county commissioners, and the county council of fire chiefs and the hospitals. We have previously obtained the state government's endorsement and funding for a four county demonstration project (funding lost in budget restructuring) and subsequently have obtained a small grant to pilot community PHR connectivity to EMS emergency responders in King County.

The Governor of Washington, Chris Gregoire, views our work with emergency responders important enough to have submitted my name as a candidate for the ONC Health IT Policy Committee. There is broad interest and early action at the Washington State legislative level for this essential linkage—critical patient information to EMS emergency responders closer to the point and time of a medical emergency, such as a motor vehicle crash which represents the leading cause for admittance to an emergency

room in an unconscious and unaccompanied state. The technology and politics have been worked out locally.

In order for the nation to benefit from this early work and the work of others, we respectfully request that the EMS Transfer of Care Technical Framework address the work in HITSP's IS04 and IHE ITI ID/ECON White Paper to ensure pre-hospital emergency responders can access and exchange current and historical patient-specific health information from a PHR, ECON, and/or EHR, via a health information exchange (HIE) or regional health information organization (RHIO). Each time we can get further upstream in the health care flow the better our chance of improving patient outcomes and reducing overall costs.

In closing, it is important to note the aforementioned comments and recommendations have the support of the Washington State Health Care Authority, Premier Health Care Alliance, and Qualis Health (the northwest QIO).

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