

MMDDYY

RUNNO

5-

AGENCY

VEHID

AGENCY NAME

DISPATCH INFORMATION

CALL LOCATION

LOCATION CODE

CODE

MILEAGE

END

BEGIN

TOTAL

CALL REC'D

ENROUTE

AT SCENE

FROM SCENE

AT DESTINATION

IN SERVICE

IN QUARTERS

PATIENT INFORMATION

FIRST NAME

LAST NAME

ADDRESS

APPT / UNIT NUMBER

(PHO) NE

CITY

ST

ZIP

AGE

D.O.B.

MM / DD / YYYY

F

M

SS #

Residence

Health

Farm

Industrial

Other Work

Recreational

Road

Other

Call Received as

EMERGENCY

NON EMERGENCY

STANDBY

Physician

CARE IN PROGRESS ON ARRIVAL:

None

Citizen

PD/FD/Other First Responder

Other EMS

PAD used

MECHANISM OF INJURY

MVA (✓ seat belt used →)

Struck by vehicle

Fall of feet

Unarmed assault

GSW

Knife

Machinery

Extrication required

minutes

Seat belt used?

Yes

No

Unknown

Seat Belt Use Reported By

Crew

Patient

Police

Other

CHIEF COMPLAINT

SUBJECTIVE ASSESSMENT

PRESENTING PROBLEM

Fill in circle

Airway Obstructions

Respiratory Arrest

Respiratory Distress

Cardiac Related (Potential)

Cardiac Arrest

Allergic Reaction

Syncope

Stroke/CVA

General Illness/Malaise

Gastro-Intestinal Distress

Diabetic Related (Potential)

Pain

Unconscious/Unresp.

Seizure

Behavioral Disorder

Substance Abuse (Potential)

Poisoning (Accidental)

Shock

Head Injury

Spinal Injury

Fracture/Dislocation

Amputation

Major Trauma

Trauma-Blunt

Trauma-Penetrating

Soft Tissue Injury

Bleeding/Hemorrhage

OB/GYN

Burns

Environmental

Heat

Cold

Hazardous Materials

Obvious Death

PAST MEDICAL HISTORY

None

Allergy to

Hypertension

Stroke

Seizures

Diabetes

COPD

Cardiac

Other (List)

Asthma

Current Medications (List)

VITAL SIGNS

TIME

RESP

PULSE

B.P.

LEVEL OF CONSCIOUSNESS

GCS

PUPILS

SKIN

STATUS

Alert

Voice

Pain

Unresp.

Normal

Dilated

Constricted

Sluggish

No-Reaction

Unremarkable

Cool

Warm

Moist

Dry

Pale

Cyanotic

Flushed

Jaundiced

C

U

P

S

OBJECTIVE PHYSICAL ASSESSMENT

COMMENTS

TREATMENT GIVEN

FILL IN CIRCLE

Moved to ambulance on stretcher/backboard

Moved to ambulance on stair chair

Walked to ambulance

Airway Cleared

Oral / Nasal Airway

Esophageal Obturator Airway / Esophageal Gastric Tube Airway (EOA/EGTA)

EndoTracheal Tube (E/T)

Oxygen Administered @ L.P.M., Method

Suction Used

Artificial Ventilation Method

C.P.R. in progress on arrival by: Citizen PD/FD/Other First Responder Other

C.P.R. Started @ Time Time from Arrest Until C.P.R. Minutes

EKG Monitored (Attach Tracing) [Rhythm(s)]

Defibrillation/Cardioversion No. Times Manual Semi-automatic

Medication Administered (Use Continuation Form)

IV Established Fluid Cath. Gauge

Mast Inflated @ Time

Bleeding / Hemorrhage Controlled (Method Used:)

Spinal Immobilization Neck and Back

Limb Immobilized by Fixation Traction

(Heat) or (Cold) Applied

Vomiting Induced @ Time Method

Restraints Applied, Type

Baby Delivered @ Time In County

Alive Stillborn Male Female

Transported in Trendelenburg position

Transported in left lateral recumbent position

Transported with head elevated

Other:

DISPOSITION (See List)

DISP. CODE

CONTINUATION FORM USED

YES

CREW

IN CHARGE

DRIVER'S NAME

NAME

NAME

EMT

AEMT #

CFR

EMT

AEMT #

CFR

EMT

AEMT #

CFR

EMT

AEMT #

