



# Whitestone Community Volunteer Ambulance Service

(718) 767 1000 12-15 150 Street, Whitestone, NY 11357

Serving the community of Whitestone since 1947



October 13<sup>TH</sup>, 2020

OPERATIONS ORDER: 10132020a

## \* HISTORY

After nine months of serious evaluations to the operations of our Service as a whole and including implementing several significant changes along the way, we have found ourselves at an impasse. We have solved the issues of non-performing members and leaders, Covid-19, a reduced staff, poor ambulance duty staffing practices and the overburdened Officers all as a result of Mr. Mavroudes's data science study as it has shown us things that we could not otherwise see clearly. We have solved several problems with these changes, and on paper we are doing great. Crews are on duty for 6-8 hours now instead of 12 hours, there are no half crews, no one is burdened to run up to the station to go on a call, the Dispatchers are autonomous 95% of the time and 100% of all emergency calls receive an ambulance when they call us regardless of if it's ours or one of our partners. Yet we have a problem that is not solvable without this order and I accept the implications of enforcing this create an ultimatum.

## \* PROBLEM

We have found that crews while on duty, generally do very little, they are unproductive. Perhaps the ambulance is inspected, but otherwise not much else happens. Most crews will turn a radio on but absolutely pay so little attention that it may as well be off. We are less active than we have been in the past ten years, but not because of a reduced ambulance staff, as it is relatively the same in size regarding functional Drivers and EMTs dedicated to ambulance duty. But we are missing nearly every public emergency in our area regardless of if crews are or aren't on duty. I hear the fire engine leaving the fire house without the ladder company all the time to respond to EMS runs and I also hear ambulances, but we are not responding to these emergencies. I have seen the enthusiasm and excitement for responding to real emergencies fading for a few years, but I am certain now that it's nearly gone; but it will be forced to return.

## \* SOLUTION

While on duty for the entirety of the tour, each crew member is REQUIRED to listen to a radio frequency, either EMS Queens East or NYPD 109. Radio Scanning Log Sheets will be used to document every run dispatched on the frequency being monitored. All incidents with the need or potential need for EMS within the confines of Whitestone, will be responded to. Any public emergencies such as but not limited to: airplane crashes, motor vehicle accidents, pedestrian's struck, structural fires, etc. must have a Whitestone ambulance on scene if they occur during a scheduled tour of duty, not responding to such public incidents will lead to discipline/termination. Radios will not be left unattended, they will go with each crew member wherever he or she goes, and they will go with the crew when the crew goes on an ambulance call. The 6-8 hours on duty will become productive yet again.

## \* REFLECTION

I have heard for years from crews that I see sitting around doing nothing, that nothing happens in the area, but I couldn't believe that to be true. For 4 months I have monitored the radios, the FDNY EMS stats from Engine 295, The NYPD 109 stats and put the citizen app notifications on my phone on. I have observed a wealth of exciting incidents in our neighborhood and the stats concerning them do not lie. There has been a plane crash, dozens of legitimate car wrecks, violence, domestic violence, shootings, house fires, pedestrians hit by cars, water incidents and much more. Now that crew members must listen to the radio and write down everything that they hear and respond to everything in our area, crews will go to these exciting incidents and I am confident that the enthusiasm to be first responder will return quickly. It is a fact of life that the less one does, the less one wants to do, it is also a fact that the more one does, the more one wants to do... do more!

Thank You,

CHARLES J. SILVERSTEIN  
Captain & Chief Operating Officer



# Whitestone Community Volunteer Ambulance Service

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## Operations Order: (2020-005A) PRIVATE AMBULANCE PARTNERSHIP

**Effective:** Immediately.

**Purpose:** To augment the received phone demand of the Service when staffing restrictions do not enable us to directly fulfill it or when the demand is one that we cannot fulfill as it may not meet our criteria.

**Implementation:** This procedure was planned during the beginning stages of COVID-19 and was piloted in April of 2020 and its success has led it to become policy.

**Procedure:** Dispatchers will keep this procedure with them at all times during their tour of duty and follow it specially. Proceed as follows:

If you should receive an emergency ambulance call to respond to WITHIN the confines Whitestone, NY 11357, and ONLY when we have SCHEDULED AMBULANCE CREW will we send our own ambulance crew.

OTHERWISE... in the circumstance

- (1) when there is NO CREW scheduled.
- (2) when the caller is insisting on a faraway hospital that we cannot go to i.e.: St Francis.
- (3) when a call is for a non-emergency use of an ambulance in the future.
- (4) if the call is Out of Our Response Area

You will assist the caller and get them an ambulance, it will not be our ambulance.

-Inform the caller that we have formed partnerships with private ambulance services to aid us during the pandemic so that we can still provide service even though we have imposed limitations of operations.

-Inform the caller that the private ambulance services BILL for their services and they charge approximately half of what a city 911 ambulance does, as we have negotiated the best possible rates for our residents. The Whitestone Community Ambulance Service receives NOTHING for referring the call, but during these difficult times it's the best or only way we can serve the public.

An Ambulance Call Sheet should be used to gather the following information use the back if needed:

- 1) Caller name
- 2) Call back phone number
- 3) Patient full name
- 4) Patient age / date of birth

- 5) Patient weight, if over 350 pounds a bariatric ambulance will be required.
- 6) Why does the patient need an ambulance?
- 7) Where is the patient going?
  - If no preference as to destination or patient is in severe distress, the private ambulance service will bring the patient to nearest hospital, as per NYC protocols.
- 8) Inform the caller to have insurance information available at time of ambulance arrival. We don't need the numbers because we don't handle that, but what insurances do they have so we can relay that?
  - If they have primary and secondary insurance, the ambulance crew will need both and that will likely cover the entire call, but possibly less.
  - If they have Medicaid coverage, that will cover the entire trip and we need to relay that. If that is the case, that will need to be relayed.
  - If they only have primary coverage, they will be directly billed by the private ambulance service for the remaining 20% balance. That will need to be understood and relayed.
  - If they have no insurance they will be billed for the entire call which is roughly \$350-\$500 that will need to be understood and relayed.
- 9) If they are okay with this and you have gathered the information, proceed...

We are currently using only one of the partner services and we will continue to do so as long as the partnership continues do very well

## **SeniorCare EMS (718) 430-9700**

Identify that you are calling from Whitestone Ambulance in Queens and that we need them to do an ambulance call for us. They have dozens of Dispatchers and the Dispatcher you speak to may not be familiar with our partnership. Simply let them know that we have a partnership with them and that they handle our overflow call volume. If there is any issue as them to get a supervisor. If you have any further issues, call the scheduled Duty Officer.

- Provide all information that you have gathered to their Dispatcher.
- Tell them that you need a BLS ambulance unless it was determined that a bariatric unit was needed for a heavy patient.
- The Dispatcher will give you an estimated time of response and a TRIP Number (The TRIP Number is very important, record it clearly)

At the conclusion of call with SeniorCare, do the following:

1. Call back the caller who requested the ambulance and let them know that the ambulance is its way and will take approximately the amount of time you were told. Tell them the TRIP Number.
2. Advise the caller to always call Whitestone Ambulance whenever they need an ambulance for anything, going through us will always get them what they need if we can do it, its always free, if a partner service does it, it will be done well and at the absolute best rate possible.
3. Record TRIP Number on the Emergency call sheet very clearly.
4. Document the following in the Dispatchers Station Log Book following the time the call was received

**"Call Received; Mutual Aid by SeniorCare EMS. TRIP Number \_\_\_\_\_."**

5. Secure the Call Sheet in the PCR/Call Sheet mail box and proceed with your tour.

Thank you for your cooperation and ability to adapt to these rough times.

Also,

Please make any notes, positive or negative about this experience on the back of the call sheet and text the Duty Officer about anything eventful. While we are using the procedure you will have less communication with the Duty Officer so please let us know how it goes. We have arrangements with several private partner ambulance services, we are using SeniorCare as of now because they are the biggest and their base is very close by, they seem to be the best fit for now, but with your feedback, we can make a change when needed.

Thank you for your patience/ attention and cooperation,



**CHARLES J. SILVERSTEIN, NRP**  
Captain & Chief Operations Officer (C.O.O.)  
NREMT-P & NYS-DOH EMT-P  
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## **AMBULANCE CALL SHEET**

**TODAY'S DATE:** \_\_\_\_\_ **TIME CALL RECEIVED:** \_\_\_\_\_ **DISPATCHER:** \_\_\_\_\_

**CALLER'S NAME:** \_\_\_\_\_

**CALL BACK PHONE NUMBER:** \_\_\_\_\_

**FULL ADDRESS FOR AMBULANCE TO RESPOND TO:** \_\_\_\_\_

**APT:** \_\_\_\_\_

**PATIENT'S INFORMATION:**

**NAME:** \_\_\_\_\_ **GENDER:** M / F **AGE:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **WEIGHT:** \_\_\_\_\_ **DESTINATION:** \_\_\_\_\_

**DO THEY WANT AN EMERGENCY RESPONSE NOW? (DESCRIBE):** \_\_\_\_\_

**DO THEY WANT TO SCHEDULE AN AMBULANCE FOR LATER? (DESCRIBE):** \_\_\_\_\_ **ROUND TRIP REQUESTED: YES  NO**

**DOES THE PATIENT HAVE INSURANCE? (IF YES WHICH PROVIDER):** \_\_\_\_\_

\*We DO NOT bill our patients or their insurance, WE ARE A 100% FREE SERVICE. We ask which insurance provider the patient has if we need to have one of our private partner ambulance services complete the call if the call does not meet all criteria for us to complete directly.

**ANY ADDITIONAL INFORMATION CONCERNING THIS CALL THAT NEEDS NOTING:**

If the call is for an emergency in WHITESTONE, NY 11357 and they want to go to a local area hospital and a crew is scheduled  
\*Dispatch our ambulance and fill out below information when our crew returns from the call.

**PCR NUMBER:** \_\_\_\_\_ **DISPOSITION:** \_\_\_\_\_

1. If the call is for an emergency NOT in WHITESTONE, NY 11357
2. If they want to go to a DISTANT hospital or other location

3. If the call is not an emergency and they wish to schedule an ambulance in the future

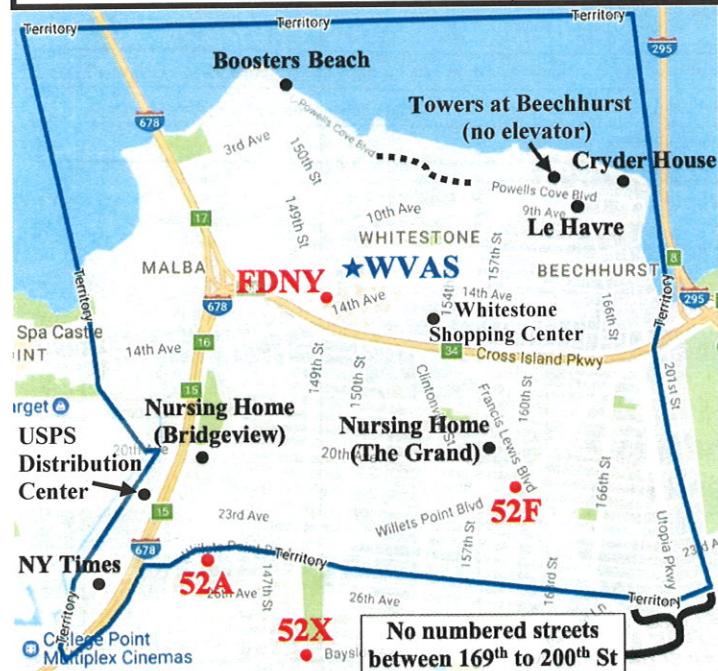
\*Inform the caller that one of our private partner ambulance services will be able to do their call

\*Follow the procedure for Private Partner Ambulance Service Mutual Aid and compete below

**TRIP NUMBER:** \_\_\_\_\_ **ETA:** \_\_\_\_\_

# Hospitals Available to Whitestone Ambulance

Hospital	Notification #	Information	Address	Disp. Code
North Shore University Hospital (Manhasset)	(516) 627-6798	Trauma (A), Peds, Hypothermia	300 Community Drive Manhasset, NY 11030	NYS (NYC) <b>705</b> (78)
New York Presbyterian - Queens (Booth Memorial)	(718) 670-2611	Trauma (A), Cardiac, Peds, STEMI, Closest	56-45 Main St, Queens, NY 11355	<b>762</b> (31)
Long Island Jewish Medical Center (LIJ)	(718) 975-0010	Peds (Best), Trauma (P), EDP, Replant Center	270-05 76th Avenue New Hyde Park, NY 11040	<b>763</b> (35)
Flushing Medical Center (Flushing)	(718) 670-3096	Hypothermia, Closest	4500 Parsons Blvd Flushing, NY 11355	<b>765</b> (33)
Queens Hospital Center (Queens General)	(718) 833-3090	EDP, Hypothermia	82-68 164th Street Jamaica, NY 11432	<b>775</b> (38)
Jacobi Medical Center	(718) 918-5822	Burn, Bite, Hyperbaric, Trauma (A&P)	1400 Pelham Pkwy S Bronx, NY 10461	<b>621</b> (25)



## Whitestone Ambulance Area of Operation (Rule of thumb: 138<sup>th</sup> Street to 200<sup>th</sup> Street, up to 25<sup>th</sup> Ave)

### Exits in Area

- Whitestone Expressway**  
**14** New York Times Building  
**15** 20<sup>th</sup> Ave  
**16** to Cross Island Parkway  
**17** 3<sup>rd</sup> Ave

- Cross Island Parkway**  
**33** to Clearview Expressway  
**34** 160<sup>th</sup> street  
**35** 14<sup>th</sup> Ave  
**36** N: Whitestone Bridge  
S: Whitestone Expwy

### Phone Numbers

WVAS Station: (718) 767-1000 SeniorCare EMS: (718) 430-9700  
NYPD (109 Pct): (718) 321-2250 FDNY (Whitestone): (718) 476-6295

### Closest EMS Units:

BLS: 52F, 52A, 52C, 52G 52B, 53B

ALS: 52X, 52W, 52V

- 10-01 Call your command  
10-02 Report to your command  
10-03 Call dispatcher by phone  
10-04 Message Acknowledged  
10-05 Repeat message  
10-06 Standby  
10-07 Verify Address  
10-10 Crime (specify type)  
10-11 Alarm (specify type)  
10-12 Police holding suspect  
10-13 Emergency Assistance  
10-14 Vehicle check (occupied)  
10-15 Vehicle check (verify if stolen)
- 10-16 Vehicle check (stolen)  
10-17 Vehicle check (not stolen)  
10-20 Robbery (specify type)  
10-21 Burglary  
10-22 Larceny  
10-24 Assault  
10-29 Criminal mischief  
10-30 Robbery in progress  
10-32 Larceny in progress  
10-33 Explosive device  
10-34 Assault in progress  
10-39 Criminal mischief in progress  
10-50 Disorderly

- 10-51 Disorderly group moving  
10-52 Dispute  
10-53 Vehicle Accident  
10-54 EMS request  
10-55 EMS call, no police needed  
10-56 Verify if EMS is needed  
10-57 Second call for EMS  
10-58 Assisting EMS  
10-59 Alarm of a fire  
10-60 Research  
10-61 At precinct  
10-62 Out of service  
10-63 Meal period
- 10-65 Utility trouble  
10-66 Unusual incident  
10-67 Parking or traffic condition  
10-68 Other non-crime  
10-80 Cancel service (specify)  
10-81 Enroute to station house  
10-82 Verify arrest  
10-83 Filing report at station  
10-84 At scene  
10-85 Need additional unit (no emergency)  
10-86 Female in vehicle  
10-87 Unit enroute to hospital  
10-89 Other
- 10-90 Incident Unfounded  
10-91 Situation corrected  
10-92 Subject in custody  
10-93 Report completed  
10-94 Handled by previous tour  
10-95 Referred to another agency  
10-96 Summons issued  
10-97 Patient enroute to hospital  
10-98 Available  
10-99 Vehicle towed

- 10-01 Call your station  
10-02 Return to your station  
10-03 Call dispatcher by phone  
10-04 Message acknowledged  
10-05 Repeat your last message  
10-06 Standby  
10-07 Verify address  
10-08 Available by radio  
10-09 Available by phone at \_\_\_\_\_  
10-11 On \_\_\_\_\_ frequency  
10-12 Progress/condition report  
10-13 Emergency assistance  
10-14 Verify unit status  
10-15 Request current location  
10-19 Cancel responding units
- 10-20 Continue at reduced speed  
10-21 to 25 1 to 5-alarm fire  
10-26 Occupied high rise incident  
10-27 Medical facility evacuation  
10-28 Correction facility incident  
10-29 Report of explosive device  
10-30 Explosion  
10-31 Rapid transit/Rail incident  
10-32 Ground transport incident  
10-33 Structural collapse  
10-34 Construction incident  
10-35 Confined space incident  
10-36 Toxic fumes incident  
10-37 Tunnel incident (non-rail)  
10-38 Marine/harbor incident
- 10-39 Air emergency standby response  
10-40 Aircraft incident/crash  
10-41 Bridge/elevated road collapse  
10-42 Civil disturbance  
10-43 Hostage/Barricade incident  
10-44 Power failure/blackout  
10-45 Chemical pipeline incident  
10-46 Oil/LNG facility incident  
10-47 Nuclear substance spill/incident  
10-49 Environmental incident  
10-57 Mutual Aid  
10-58 Planned MCI (drill)  
10-59 All other MCIs  
10-60 Major emergency response  
10-62 Out of service (state reason)
- 10-63 Unit responding  
10-66 Mayday/Missing member  
10-71 Backlog of priority calls  
10-72 Backlog of non-priority calls  
10-75 Working fire  
10-76 High-rise fire commercial building  
10-77 High-rise fire multiple dwelling  
10-80 Hazmat incident  
10-81 Unit at hospital  
10-82 Transport: A/B: ALS/BLS, M: Morgue  
10-83 Patient pronounced dead  
10-84 At scene  
10-85 Meet unit at (location). No emergency  
10-86 Request 3 BLS, 1 ALS, 2 supervisors  
10-87 Cancel assignment/response
- 10-88 On Scene  
10-89 At Cross Street Location  
10-90 Incident unfounded  
10-91 No need for EMS  
10-93 Refused medical aid  
10-94 Patient treated by \_\_\_\_\_, transported by \_\_\_\_\_  
10-95 Patient triaged out at scene  
10-96 Patient gone on arrival  
10-97 Available w/in battalion  
10-98 Available outside battalion  
10-99 Available by phone at \_\_\_\_\_  
10-100 Out of service (personal)

Updated: October 2020

# Radio Guide

## How to use the radios

Radio: Baofeng model UV-82

- **Turn on:** Turn the top nob (A) clockwise past the \*click\* sound. You will then hear “channel mode”
- **Turn off:** Turn the top nob (A) counterclockwise until you hear a \*click\* sound
- **Adjust volume:** Turn nob (A) clockwise to increase the volume, and turn it counterclockwise to decrease the volume
- **Activate/Remove lock function:** Hold down the “#” key (B) for 3 seconds. You will hear “lock” or “unlock” and see a small key icon appear or disappear from the top right of the screen
  - This function disables all the front-facing buttons so in case you accidentally push them
- **Switch between programed stations:**  
The radio has about 80 radio stations pre-programmed onto it and can “listen” to two radio stations at one time. Those two stations appear on the screen. To switch stations, first make sure that the radio is unlocked (previous bullet point) by verifying that there isn’t a small key on the top right of the screen. Then hit the ▲ ▼ keys (C) to toggle through the stations which will appear on the screen. To change the other station on the screen, hit the top left “EXIT/AB” button (D) and the ▲ ▼ keys (C).
- **Listen to only one station:** Switch both stations on the screen to the station you want.
  - This will ensure that you are continuously listening to only that station without interruption from any other stations
- **Listen to two stations simultaneously:** The radio can listen to two stations simultaneously by flipping back and forth between the two stations on the screen multiple times per second. If it detects a transmission on one station, it will remain on that station until the end of that transmission, at which point it will go back to switching back and forth between stations
  - Noteworthy downside: If the radio is relaying a transmission from frequencyA, it will not be able to listen to or relay any frequencyB transmission in that time. Therefore, you will miss radio transmissions if frequencyA and frequencyB have transmissions going at the same time. You will only hear the transmission that came through first.
    - A better alternative is using two radios.
- **Transmit over the radio:** Though the radio is able to transmit over short distances, **NEVER** transmit over it. The programmed frequencies are recorded, monitored, and enforced by the FCC which takes violations very seriously. Unauthorized radio operation is a felony and can carry fines and prison sentences.
- **Turn on/off flashlight:** Press side button (E)



**Radios can be borrowed for training purposes.**

If you would like to borrow a radio from the station, contact the duty officer.  
You can also buy a radio for personal use. If it is a Baofeng UV-82, we can program it for you.

## Buffing Radio Calls - General Overview

- What is our designated area of operation? The zip code 11357. Here is the rule of thumb:
  - Streets: 138<sup>th</sup> street up to 200<sup>th</sup> street
  - Avenues/Roads: up to 25<sup>th</sup> Avenue
- Non-numbered streets of Whitestone:

Boulevard	Cryders Lant	Malba Drive	Powells Cove Blvd	Summit Place
Burton Street	Francis Lewis Blvd	Murray Street	Riverside Drive	Totten Street
Center Drive	Hill Court	North Drive	Ryan Court	Utopia Pkwy
Clintonville Street	Lee Street	Parsons Blvd	Samos Lane	Waterside Court
Cresthaven Lane	Leggett Place	Petracca Place	South Drive	Whitestone Expy
Cross Island Pkwy	Locke Ave	Point Crescent	Sullivan Drive	Willets Point Blvd
- To have the best odds of hearing calls in Whitestone, listen to the following two frequencies:
  - 1) Police - 109/111<sup>th</sup> Precinct: 477.06250 (PD 109)
  - 2) EMS - Queens East: 483.03125 (EMS Q/E)
- Every department (EMS, NYPD, FDNY) has their own set of standardized numbered codes which they use over the radio to relay information. These are known as "10-Codes" because they are numbered codes proceeded by the number 10. For example: "10-4."
- When someone calls 911, the first person they will talk to is a Police dispatcher. If the Fire department is needed, the Police dispatcher will then transfer the call over to a Fire Department dispatcher. Finally, if it is determined that EMS is needed, the call will be transferred over to an EMS dispatcher, who will dispatch an ambulance.
  - For this reason, if all three departments are dispatched to a call, the police and fire engines tend to roll out first and arrive first on scene. This is also why calls tend to come over the police radio before EMS radio. So, if you think you heard a potential EMS call on PD but didn't quite make out the address (for example: 10-53 = MVA, = a car accident), listen closely to the EMS radio because you might hear that same call come over.
- Even if not explicitly stated that EMS is needed, respond to calls that have the potential to be EMS calls. For example: car accidents, domestic disputes, calls for help, fires, assaults, etc. Calls where it is explicitly said that "EMS is not needed" can be ignored. Use common sense when responding to certain police calls: Police units might purposefully respond to certain calls without lights or sirens so be mindful of being first on scene with lights and sirens and blowing their cover. A better approach is to wait quietly down the block until they arrive. Once they've gotten a hold of the situation, roll up and ask if EMS is needed.
- Your safety is of the upmost importance. If you respond to a fight, assault, violent EDP (Emotionally Disturbed Patient), explosive device, or anything of that sort, wait for NYPD or FDNY to declare that the scene safe before performing your duties. For example, if you arrive first to the home address of a fight, wait for PD to enter the house, secure the scene, and then come out and get you.
  - If you feel unsafe transporting a patient solo for whatever reason (patient is an EDP, acting aggressive, etc.), you can have a police officer ride with you.
- Our area of operation covers the entirety Whitestone Bridge. If you hear a call on the bridge, it might be useful to grab an extra radio and tune into to the Triborough Bridge and Tunnel Authority police radio, which has its own frequency: 453.55000 (PD Bridge)
- If you hear a fire in area, it might be useful to grab an extra radio and tune into to the appropriate Fire Ground frequency to hear up-to-date developments. On our radios, the Fire Ground radio channels will begin with "FG."

## Street Names in Whitestone (Zip code: 11357)

Boulevard	Cryders Lant	Malba Drive	Powells Cove Blvd	Summit Place
Burton Street	Francis Lewis Blvd	Murray Street	Riverside Drive	Totten Street
Center Drive	Hill Court	North Drive	Ryan Court	Utopia Pkwy
Clintonville Street	Lee Street	Parsons Blvd	Samos Lane	Waterside Court
Cresthaven Lane	Leggett Place	Petracca Place	South Drive	Whitestone Expy
Cross Island Pkwy	Locke Ave	Point Crescent	Sullivan Drive	Willets Point Blvd

## Police Radio 10-Codes

<b>10-01</b>	Call your command	<b>10-32</b>	Larceny in progress	<b>10-68</b>	Other non-crime
<b>10-02</b>	Report to your command	<b>10-33</b>	Explosive device	<b>10-80</b>	Cancel service (specify)
<b>10-03</b>	Call dispatcher by phone	<b>10-34</b>	Assault in progress	<b>10-81</b>	Enroute to station house
<b>10-04</b>	Message acknowledged	<b>10-39</b>	Criminal mischief in progress	<b>10-82</b>	Verify arrest
<b>10-05</b>	Repeat message	<b>10-50</b>	Disorderly	<b>10-83</b>	Filing report at station
<b>10-06</b>	Standby	<b>10-51</b>	Disorderly group moving	<b>10-84</b>	At scene
<b>10-07</b>	Verify Address	<b>10-52</b>	Dispute	<b>10-85</b>	Need additional unit (no emergency)
<b>10-10</b>	Crime (specify type)	<b>10-53</b>	Vehicle Accident	<b>10-86</b>	Female in vehicle
<b>10-11</b>	Alarm (specify type)	<b>10-54</b>	EMS request	<b>10-87</b>	Unit enroute to hospital
<b>10-12</b>	Police holding suspect	<b>10-55</b>	EMS call, no police needed	<b>10-89</b>	Other
<b>10-13</b>	Emergency Assistance	<b>10-56</b>	Verify if EMS is needed	<b>10-90</b>	Incident Unfounded
<b>10-14</b>	Vehicle check (occupied)	<b>10-57</b>	Second call for EMS	<b>10-91</b>	Situation corrected
<b>10-15</b>	Vehicle check (verify if stolen)	<b>10-58</b>	Assisting EMS	<b>10-92</b>	Subject in custody
<b>10-16</b>	Vehicle check (reported stolen)	<b>10-59</b>	Alarm of a fire	<b>10-93</b>	Report completed
<b>10-17</b>	Vehicle check (not reported stolen)	<b>10-60</b>	Research	<b>10-94</b>	Handled by previous tour
<b>10-20</b>	Robbery (specify type)	<b>10-61</b>	At precinct	<b>10-95</b>	Referred to another agency
<b>10-21</b>	Burglary	<b>10-62</b>	Out of service	<b>10-96</b>	Summons issued
<b>10-22</b>	Larceny	<b>10-63</b>	Meal period	<b>10-97</b>	Patient enroute to hospital
<b>10-24</b>	Assault	<b>10-65</b>	Utility trouble	<b>10-98</b>	Available
<b>10-29</b>	Criminal mischief	<b>10-66</b>	Unusual incident	<b>10-99</b>	Vehicle towed
<b>10-30</b>	Robbery in progress	<b>10-67</b>	Parking or traffic condition		

## EMS Radio 10-Codes

<b>10-01</b>	Call your station	<b>10-33</b>	Structural collapse	<b>10-72</b>	Backlog of non-priority calls
<b>10-02</b>	Return to your station	<b>10-34</b>	Construction incident	<b>10-75</b>	Working fire
<b>10-03</b>	Call dispatcher by phone	<b>10-35</b>	Confined space incident	<b>10-76</b>	High-rise fire commercial building
<b>10-04</b>	Message acknowledged	<b>10-36</b>	Toxic fumes incident	<b>10-77</b>	High-rise fire multiple dwelling
<b>10-05</b>	Repeat your last message	<b>10-37</b>	Tunnel incident (non-rail)	<b>10-80</b>	Hazmat incident
<b>10-06</b>	Standby	<b>10-38</b>	Marine/harbor incident	<b>10-81</b>	Unit at hospital
<b>10-07</b>	Verify address	<b>10-39</b>	Air emergency standby response	<b>10-82</b>	Transport: A: ALS, B: BLS, M: Morgue
<b>10-08</b>	Available by radio	<b>10-40</b>	Aircraft incident/crash	<b>10-83</b>	Patient pronounced dead
<b>10-09</b>	Available by phone at _____	<b>10-41</b>	Bridge/elevated roadway collapse	<b>10-84</b>	At scene
<b>10-11</b>	On _____ frequency	<b>10-42</b>	Civil disturbance	<b>10-85</b>	Meet unit at (location). No emergency
<b>10-12</b>	Progress/condition report	<b>10-43</b>	Hostage/Barricade incident	<b>10-86</b>	Request 3 BLS, 1 ALS, 2 supervisors
<b>10-13</b>	Emergency assistance	<b>10-44</b>	Power failure/blackout	<b>10-87</b>	Cancel assignment/response
<b>10-14</b>	Verify unit status	<b>10-45</b>	Chemical pipeline incident	<b>10-88</b>	On Scene
<b>10-15</b>	Request current location	<b>10-46</b>	Oil/LNG facility incident	<b>10-89</b>	At Cross Street Location
<b>10-19</b>	Cancel all responding units	<b>10-47</b>	Nuclear substance spill/incident	<b>10-90</b>	Incident unfounded
<b>10-20</b>	Continue at reduced speed	<b>10-49</b>	Environmental incident	<b>10-91</b>	No need for EMS
<b>10-21 to 25</b>	1 to 5-alarm Fire	<b>10-57</b>	Mutual Aid	<b>10-93</b>	Refused medical aid
<b>10-26</b>	Occupied high rise incident	<b>10-58</b>	Planned MCI (drill)	<b>10-94</b>	Patient treated by _____, transported by _____
<b>10-27</b>	Medical facility evacuation	<b>10-59</b>	All other MCIs	<b>10-95</b>	Patient triaged out at scene
<b>10-28</b>	Correction facility incident	<b>10-60</b>	Major emergency response	<b>10-96</b>	Patient gone on arrival
<b>10-29</b>	Report of explosive device	<b>10-62</b>	Out of service (state reason)	<b>10-97</b>	Available within battalion
<b>10-30</b>	Explosion	<b>10-63</b>	Unit responding	<b>10-98</b>	Available outside battalion
<b>10-31</b>	Rapid transit/Rail incident	<b>10-66</b>	Mayday/Missing member	<b>10-99</b>	Available by phone at _____
<b>10-32</b>	Ground transport incident	<b>10-71</b>	Backlog of priority calls	<b>10-100</b>	Out of service (personal)

## Buffing Radio Calls - Police Radio

- Whitestone is located completely within the 109 Police precinct. Therefore, any call assigned to or picked up by a 109 unit might be in Whitestone, while any call for another precinct's unit will definitely be out of area.
- Generally, NYPD dispatchers will announce a call and a police unit will self-assign themselves to respond. You may also hear dispatchers assign specific units to calls.
- Each police unit has a name. The 109<sup>th</sup> precinct is separated into sectors, each with a unit designated by a letter using the NYPD phonetic alphabet (109-Adam, 109-Boy, 109-Charlie, 109-David...). There are also "response units" (109-Response-1, 109-Response-2, etc.). Finally, there are rank-designated units (109-Sergeant, 109-Lieutenant, etc.)
- When Police units are assigned a call, the full address is usually given over the radio, in contrast to EMS radio, where only the cross streets are broadcasted
- Examples of NYPD transmissions:

Central Dispatch:	"109 David" ( <i>pronounced "one - o - nine"</i> )
109 David:	"9-David"
Central Dispatch:	"109 David, respond to the 10-10 ( <i>pronounced "ten ten"</i> ) call for help at 12-15 150 <sup>th</sup> Street."
109 David:	"10-4 ( <i>pronounced "ten-four"</i> ) central."

Central Dispatch:	"In the 109 receiving a 10-53 with injuries on the Whitestone Expressway and 20th Ave."
109 Adam:	"9-Adam. Show me going."
Central Dispatch:	"10-5"
109 Adam:	"109-Adam. Show me responding to the 53 with injuries."
Central Dispatch:	"10-4 Adam"

## NYPD Radio 10-Codes

10-01	Call your command	10-32	Larceny in progress	10-68	Other non-crime
10-02	Report to your command	10-33	Explosive device	10-80	Cancel service (specify)
10-03	Call dispatcher by phone	10-34	Assault in progress	10-81	Enroute to station house
10-04	Message acknowledged	10-39	Criminal mischief in progress	10-82	Verify arrest
10-05	Repeat message	10-50	Disorderly	10-83	Filing report at station
10-06	Standby	10-51	Disorderly group moving	10-84	At scene
10-07	Verify Address	10-52	Dispute	10-85	Need additional unit (no emergency)
10-10	Crime (specify type)	10-53	Motor Vehicle Accident	10-86	Female in vehicle
10-11	Alarm (specify type)	10-54	EMS request	10-87	Unit enroute to hospital
10-12	Police holding suspect	10-55	EMS call, no police needed	10-89	Other
10-13	Emergency Assistance	10-56	Verify if EMS is needed	10-90	Incident Unfounded
10-14	Vehicle check (occupied)	10-57	Second call for EMS	10-91	Situation corrected
10-15	Vehicle check (verify if stolen)	10-58	Assisting EMS	10-92	Subject in custody
10-16	Vehicle check (reported stolen)	10-59	Alarm of a fire	10-93	Report completed
10-17	Vehicle check (not reported stolen)	10-60	Research	10-94	Handled by previous tour
10-20	Robbery (specify type)	10-61	At precinct	10-95	Referred to another agency
10-21	Burglary	10-62	Out of service	10-96	Summons issued
10-22	Larceny	10-63	Meal period	10-97	Patient enroute to hospital
10-24	Assault	10-65	Utility trouble	10-98	Available
10-29	Criminal mischief	10-66	Unusual incident	10-99	Vehicle towed
10-30	Robbery in progress	10-67	Parking or traffic condition		

## Buffing Radio Calls - EMS Radio

- Instead of precincts, NYC is broken down into battalions for EMS and the Fire Department. Whitestone is located within the 52<sup>nd</sup> battalion.
- EMS units are named according to the battalion they're stationed in, followed by a letter.  
For example: 52-F(<sub>rank</sub>), 52-X(<sub>ray</sub>), 52-H(<sub>entry</sub>)
  - A-Q is BLS (H is Haztac), R-Z is ALS (Z is Haztac), R is Rescue Medics
  - Conditions units are EMS supervisors (rank: FDNY Lieutenants)
  - Whitestone Ambulance is special because we are volunteers: 94-Z(<sub>ebra</sub>)
  - Additional units to know: 64-\_ units: extra Queens units, and 60-\_ units: units taken from FDNY's EMS academy in Fort Totten to address high call demand
- On EMS radios, the dispatcher will assign calls to the closest available unit(s). Therefore, 911 units are assigned to out of battalions calls if they are closest.
- Examples of EMS transmissions:

Central Dispatch:	"52 Frank"
52-F:	"52 Frank"
Central Dispatch:	"52 Frank, respond to the injury major on 12 <sup>th</sup> Ave and 150 <sup>th</sup> street."
52-F:	"Verbal 63 (= 10-63)"

52-A:	"52-Adam"
Central Dispatch:	"52-Adam, go with your message"
52-A:	"52-Adam, we're taking the 10-87 from 94-Zebra. They're transporting one to hospital 78 (= North Shore University Hospital)"
Central Dispatch:	"10-4"

## EMS Radio 10-Codes

<b>10-01</b> Call your station	<b>10-33</b> Structural collapse	<b>10-72</b> Backlog of non-priority calls
<b>10-02</b> Return to your station	<b>10-34</b> Construction incident	<b>10-75</b> Working fire
<b>10-03</b> Call dispatcher by phone	<b>10-35</b> Confined space incident	<b>10-76</b> High-rise fire commercial building
<b>10-04</b> Message acknowledged	<b>10-36</b> Toxic fumes incident	<b>10-77</b> High-rise fire multiple dwelling
<b>10-05</b> Repeat your last message	<b>10-37</b> Tunnel incident (non-rail)	<b>10-80</b> Hazmat incident
<b>10-06</b> Standby	<b>10-38</b> Marine/harbor incident	<b>10-81</b> Unit at hospital
<b>10-07</b> Verify address	<b>10-39</b> Air emergency standby response	<b>10-82</b> Transport: A: ALS, B: BLS, M: Morgue
<b>10-08</b> Available by radio	<b>10-40</b> Aircraft incident/crash	<b>10-83</b> Patient pronounced dead
<b>10-09</b> Available by phone at _____	<b>10-41</b> Bridge/elevated roadway collapse	<b>10-84</b> At scene
<b>10-11</b> On _____ frequency	<b>10-42</b> Civil disturbance	<b>10-85</b> Meet unit at (location). No emergency
<b>10-12</b> Progress/condition report	<b>10-43</b> Hostage/Barricade incident	<b>10-86</b> Request 3 BLS, 1 ALS, 2 supervisors
<b>10-13</b> Emergency assistance	<b>10-44</b> Power failure/blackout	<b>10-87</b> Cancel assignment/response
<b>10-14</b> Verify unit status	<b>10-45</b> Chemical pipeline incident	<b>10-88</b> On Scene
<b>10-15</b> Request current location	<b>10-46</b> Oil/LNG facility incident	<b>10-89</b> At Cross Street Location
<b>10-19</b> Cancel all responding units	<b>10-47</b> Nuclear substance spill/incident	<b>10-90</b> Incident unfounded
<b>10-20</b> Continue at reduced speed	<b>10-49</b> Environmental incident	<b>10-91</b> No need for EMS
<b>10-21 to 25</b> 1 to 5-alarm Fire	<b>10-57</b> Mutual Aid	<b>10-93</b> Refused medical aid
<b>10-26</b> Occupied high rise incident	<b>10-58</b> Planned MCI (drill)	<b>10-94</b> Patient treated by ___, transported by ____
<b>10-27</b> Medical facility evacuation	<b>10-59</b> All other MCIs	<b>10-95</b> Patient triaged out at scene
<b>10-28</b> Correction facility incident	<b>10-60</b> Major emergency response	<b>10-96</b> Patient gone on arrival
<b>10-29</b> Report of explosive device	<b>10-62</b> Out of service (state reason)	<b>10-97</b> Available within battalion
<b>10-30</b> Explosion	<b>10-63</b> Unit responding	<b>10-98</b> Available outside battalion
<b>10-31</b> Rapid transit/Rail incident	<b>10-66</b> Mayday/Missing member	<b>10-99</b> Available by phone at _____
<b>10-32</b> Ground transport incident	<b>10-71</b> Backlog of priority calls	<b>10-100</b> Out of service (personal)



# *Whitestone Community Volunteer Ambulance Service*

(718) 767-1000 12-15 150 Street, Whitestone, NY 11357

*Serving the community of Whitestone since 1947*



# **Radio Scanning Log Sheet**

**Date:** \_\_\_\_\_ **Member Name:** \_\_\_\_\_ **Frequency:** \_\_\_\_\_

Month Day Year

Example: 1 2 3 1 99

Leave Blank

5-

PCR # (aka ACR #)

# on side of ambulance (e.g. 22, 23...)

0 0 7 3 7 3 0 0 0 0 x x

**Whitestone VAS**

What the emergency came over as, regardless of what it turned out to be (eg. MVA, Stroke, Sick, Unknown...)

**Address of the call**

PATIENT INFORMATION	UNKNOWN	UNKNOWN	LOCATION CODE 7 0 9 6 (for Queens)
			Strike through if no patient transported
			AT DESTINATION
			FROM SCENE
			IN SERVICE
			IN QUARTERS
			Time call came in
			Left station
			At call location
			Left to hospital
			Arrived at hosp.
			Finished at hosp.
			Back at station

**This is the minimum information needed**  
Use if patient information is unknown or for non-hospital dispositions

D.O.B. [ ] / [ ] / 0000 M [ ] - [ ] - 0000

**MILEAGE**

At Hospital  
Departing Scene  
= Top - Bottom

Strike through if no patient transported

Health  
Farm  
Industrial  
Other Work  
Recreational  
Road  
Other

Where the call took place

CALL RECD  
ENROUTE  
AT SCENE  
FROM SCENE  
IN QUARTERS

Time call came in  
Left station  
At call location  
Left to hospital  
Arrived at hosp.  
Finished at hosp.  
Back at station

Always Call Received as  
EMERGENCY  
NON EMERGENCY  
STANDBY

**Military time**

Physician Doesn't count if they haven't handled the patient CARE IN PROGRESS ON ARRIVAL

Name of primary Physician

MECHANISM OF INJURY Zero if from standing position

MVA (✓ seat belt used →) Fall of feet GSW Machinery Extinction required Seat belt used? minutes

Struck by vehicle Unarmed assault Knife Reported By Police Other

CHIEF COMPLAINT Direct quote w/ author SUBJECTIVE ASSESSMENT Description from the point of view of a regular bystander with no medical background. Keep it simple and clear.

Examples: "I can't breathe" as per pt. Example: UAF (Upon Arrival Found) 36 y/o male pt. ambulatory IFO (In Front Of) location holding right hand wrapped in blood soaked towel.

pt. son sts "she fell and broke her leg" Pt Sts he was cutting bagels when his hand slipped cutting his palm.

PRESENTING PROBLEM	Allergic Reaction	Hypotensive/Hypertensive	Shock	Major Trauma	OB/GYN
	Syncope			Trauma-Blunt	Burns
	Stroke/CV			Trauma-Penetrating	Environmental
	General Ill			Soft Tissue Injury	Heat
	Gastro-Intestinal Distress	Poisoning (Accidental)		Bleeding/Hemorrhage	Cold
	Diabetic Related (Potential)				Hazardous Materials
	Pain				Obvious Death

Fill out the bubble that best encompasses your patient.  
Eg. Chest pain is: •cardiac related NOT •pain: chest pain

PAST MEDICAL HISTORY	VITALS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS
None If no allergy, write: Denies" or "None"	At most 5 min after "At Scene" Time	Rate: [ ]	Rate: [ ]			○ Alert ○ Voice ○ Unresp.	○ Normal ○ Dilated ○ Constricted ○ Sluggish ○ No-Response	○ Cool ○ Warm ○ Moist ○ Dry	○ Unremarkable ○ Pale ○ Cyanotic ○ Flushed ○ Jaundiced	○ C ○ U ○ P ○ S
○ Hypertension ○ Stroke ○ Seizures ○ Diabetes ○ COPD ○ Cardiac ○ Other (List) ○ Asthma	Max 5m (critical) Max 15m (stable)	Rate: [ ]	Rate: [ ]			○ Regular ○ Shallow ○ Labored	○ Alert ○ Voice ○ Pain ○ Unresp.	○ Cool ○ Warm ○ Moist ○ Dry	○ Unremarkable ○ Pale ○ Cyanotic ○ Flushed ○ Jaundiced	○ C ○ U ○ P ○ S
Current Medications (List)	GNS	Max 5m (critical) Max 15m (stable)	Rate: [ ]	Rate: [ ]		○ Regular ○ Shallow ○ Labored	○ Alert ○ Voice ○ Pain ○ Unresp.	○ Cool ○ Warm ○ Moist ○ Dry	○ Unremarkable ○ Pale ○ Cyanotic ○ Flushed ○ Jaundiced	○ C ○ U ○ P ○ S

**OBJECTIVE PHYSICAL ASSESSMENT** Your medical findings. There should only be facts stated with certainty.

Avoid redundancy and restatement of your subjective. Start off with "PE finds" and follow protocol.

**\*Other useful information\***

COMMENTS Once at hospital, you MUST get a nurse's signature and submit the 3rd (red) copy of the PCR

Critical = Dead or about to die  
Unstable = Will die later if not fixed soon  
Potentially Unstable = Will not die soon but might cause issues down the road  
Stable = Fine (95% of calls)

For RMAs, you need: 2 sets of vitals, a stable pt., and 2 signatures on back of page 1 (one by pt -or family member if too elderly-, and one by witness -partner is last resort-)

If you make a mistake, cross it out and initial nearby: —mistake— JFK Document accordingly: "Pt signed RMA witnessed by \_\_\_\_\_"

**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) [ ] L.P.M. Method NRB (10-15) Nasal Cannula (2-6)

**Include the dispatcher's name here**

Example: Disp: George Clooney

If bubbled, write out medication and dosage where this box is

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

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

Time from Arrest Until C.P.R. Minutes

C.P.R. Started @ Time [ ] Minutes

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

Defibrillation/Cardioversion No. Times Manual Semi-automatic

**DISPOSITION** (See List) Hospital name or Non-Hospital Disposition Description (found on back of first PCR page)

DISP. CODE Corresponding 3 digit code

CONTINUATION FORM USED YES ←

IN CHARGE	Washington G.	DRIVER'S NAME	Edison T.	NAME	Sinatra F.	NAME
CREW	EMT EMT #	EMT numbers	CFR EMT AEMT #	M V O	CFR EMT AEMT #	T H I R D

NY STATE DEPARTMENT OF HEALTH

If no numbers If no numbers

1 2 3 1 2 0

5-

0 0 7 3 7 3 0 0 0 0 2 2

AGENCY AREA

Whitestone VAS

DISPATCH INFORMATION

Cardiac Arrest

CALL NUMBER

12-15 150th St IFO

MILEAGE

0 3 0 8 5 8  
0 3 0 8 5 4  
7 0 9 6 0 0 0 0 0 4CALL REC'D 2 0 0 0  
ENROUTE 2 0 0 2  
AT SCENE 2 0 0 4  
FROM SCENE 2 0 3 0  
AT DESTINATION 2 0 3 8  
IN SERVICE 2 1 0 1  
IN QUARTERS 2 1 2 1

PATIENT

JOHN M DOE

INFORMATION

12 - 15 150 St

2 (718) 767 - 1000

WHITESTONE NY 11357 -

076 D.O.B. 09 / 20 / 1944 F M 123 - 45 - 6789

- Residence
- Health
- Farm
- Industrial
- Other Work
- Recreational
- Road
- Other

Call Received as  
 EMERGENCY  
 NON EMERGENCY  
 STANDBY

Physician

CARE IN PROGRESS ON ARRIVAL

<input checked="" type="radio"/> None	<input type="radio"/> Citizen	<input type="radio"/> PD/FD/Other First Responder	<input type="radio"/> Other EMS	<input type="radio"/> PAD used
<input type="radio"/> Extrication required	Seat belt used?	minutes	<input type="radio"/> Yes	<input type="radio"/> No
			<input type="radio"/> Unknown	Reported By
			<input type="radio"/> Police	<input type="radio"/> Other

CHIEF COMPLAINT "He grabbed his chest and collapsed" - bystander sts

SUBJECTIVE ASSESSMENT UAF 76 y/o ♂ pt lying supine IFO home in cardiac arrest x3 minutes as per bystander/witness. Bystander states that pt remained lifeless after collapse and seems to be turning blue.

## PRESENTING PROBLEM

FILL IN CIRCLE

- None
- Allergic Reaction
- Syncope
- Stroke/CVA
- General Illness/Malaise
- Gastro-Intestinal Distress
- Diabetic Related (Potential)
- Cardiac Arrest
- Pain

- Fall of feet
- Struck by vehicle
- Unarmed assault
- GSW
- Knife
- Machinery
- Extrication required
- Shock
- Head Injury
- Spinal Injury
- Fracture/Dislocation
- Poisoning (Accidental)
- 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

FILL IN CIRCLE

- None
- PCN
- Allergy to
- Hypertension
- Seizures
- COPD
- Other (List)
- Stroke
- Diabetes
- Cardiac
- Asthma

Current Medications (List)

Info found on medical alert tag

OBJECTIVE PHYSICAL ASSESSMENT PE finds pt is unresponsive, not breathing, w/ absent carotid pulses, no pupillary response. CPR initiated by 94Z @ 2005 hrs w/ FDNY E295 on scene assisting. No signs of trauma or injury. Two cycles of BLS CPR w/ shockless defib analysis prior to arrival/assumption of pt care by

COMMENTS FHM ALS unit 52X3. On scene and during transport pt remains lifeless w/ central cyanosis. ALS interventions unsuccessful, pt remains asystole. FMHC notified en route. Pt pronounced in ER at 2047 hrs. [ALS unit 52X3 PCR# 7603431]

## 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 @ 1 5 L.P.M., Method Bag Valve Mask
- Suction Used
- Artificial Ventilation Method
- C.P.R. in progress on arrival by:  Citizen  PD/FD/Other First Responder  Other

Disp: Hamilton A.

C.P.R. Started @ Time ► 2 0 0 5 Time from Arrest Until C.P.R. ► 0 0 4 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: supine

DISPOSITION (See List) Flushing Hospital Medical Center

DISP. CODE 7 6 5

CONTINUATION FORM USED YES ←

CREW	IN CHARGE	Washington G.	DRIVER'S NAME	Jefferson T.	NAME	NAME	NAME	NAME
		1 2 3 4 5 6	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	M V O	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #			

1 2 3 1 2 0

RUN NO 5-

0 0 7 3 7 3 0 0 0 0 2 2

## AGENCY NAME

Whitestone VAS

## DISPATCH INFORMATION

MVA w/ injuries

## CALL LOCATION

150th St / 12 Ave

LOCATION CODE  
7 0 9 6

## MILEAGE

0 3 0 8 5 8  
0 3 0 8 5 8  
0 0 0 0 0 0

CALL REC'D	2 0 0 0
ENROUTE	2 0 0 2
AT SCENE	2 0 0 4
FROM SCENE	
AT DESTINATION	
IN SERVICE	2 0 3 0
IN QUARTERS	2 0 3 4

PATIENT  
12-15 S 150 St  
INFORMATION  
WHITESTONE  
036 D.O.B. 09/20/1984 F M 123-45-6789

- Residence
- Health
- Farm
- Industrial
- Other Work
- Recreational
- Road
- Other

Call Received as  
 EMERGENCY  
 NON EMERGENCY  
 STANDBY

Physician	CARE IN PROGRESS ON ARRIVAL:
MECHANISM OF INJURY	<input checked="" type="radio"/> None <input type="radio"/> Citizen <input type="radio"/> PD/FD/Other First Responder <input type="radio"/> Other EMS <input type="radio"/> PAD used <input checked="" type="radio"/> MVA (✓ seat belt used) <input type="radio"/> Fall of feet <input type="radio"/> GSW <input type="radio"/> Machinery <input type="radio"/> Struck by vehicle <input type="radio"/> Unarmed assault <input type="radio"/> Knife <input type="radio"/> Extrication required <input type="radio"/> Vehicle <input type="radio"/> Pedestrian <input type="radio"/> Pedestrian <input type="radio"/> Seat belt used? <input type="radio"/> Pedestrian <input type="radio"/> Vehicle <input type="radio"/> Pedestrian <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown <input type="radio"/> Seat Belt Use <input type="radio"/> Vehicle <input type="radio"/> Pedestrian <input type="radio"/> Pedestrian <input type="radio"/> Police <input type="radio"/> Crew <input checked="" type="radio"/> Patient <input type="radio"/> Pedestrian <input type="radio"/> Vehicle <input type="radio"/> Pedestrian <input type="radio"/> Other Reported By
CHIEF COMPLAINT	"I am fine. I am not going to a hospital," as per pt
SUBJECTIVE ASSESSMENT	UAF 36 y/o ♂ pt ambulatory on scene 5 min s/p car vs. garbage truck MVA. Pt is restrained driver/lone occupant of sedan. Pt sts he was driving at 20mph when garbage truck blew stop sign. Pt hit brakes but hit

PRESENTING PROBLEM	<input type="radio"/> Allergic Reaction <input type="radio"/> Syncope <input type="radio"/> Stroke/CVA <input type="radio"/> General Illness/Malaise <input type="radio"/> Gastro-Intestinal Distress <input type="radio"/> Diabetic Related (Potential) <input type="radio"/> Cardiac Related (Potential) <input type="radio"/> Airway Obstructions <input type="radio"/> Respiratory Arrest <input type="radio"/> Respiratory Distress <input type="radio"/> Cardiac Arrest <input checked="" type="radio"/> Pain <input type="radio"/> R Shoulder	<input type="radio"/> Unconscious/Unresp. <input type="radio"/> Seizure <input type="radio"/> Behavioral Disorder <input type="radio"/> Substance Abuse (Potential) <input type="radio"/> Poisoning (Accidental) <input type="radio"/> Shock <input type="radio"/> Head Injury <input type="radio"/> Spinal Injury <input type="radio"/> Fracture/Dislocation <input type="radio"/> Amputation <input type="radio"/> Major Trauma <input type="radio"/> Trauma-Blunt <input type="radio"/> Trauma-Penetrating <input type="radio"/> Soft Tissue Injury <input type="radio"/> Bleeding/Hemorrhage <input type="radio"/> OB/GYN <input type="radio"/> Burns <input type="radio"/> Environmental <input type="radio"/> Heat <input type="radio"/> Cold <input type="radio"/> Hazardous Materials <input type="radio"/> Obvious Death																																									
PAST MEDICAL HISTORY	<table border="1"> <tr> <td>VITAL SIGNS</td> <td>TIME</td> <td>RESP</td> <td>PULSE</td> <td>B.P.</td> <td>LEVEL OF CONSCIOUSNESS</td> <td>GCS</td> <td>PUPILS</td> <td>SKIN</td> <td>STATUS</td> </tr> <tr> <td>2008</td> <td>Rate: 16</td> <td>Rate: 84</td> <td>120</td> <td>70</td> <td><input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.</td> <td>15</td> <td><input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction</td> <td><input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced</td> <td><input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S</td> </tr> <tr> <td>2014</td> <td>Rate: 16</td> <td>Rate: 78</td> <td>120</td> <td>72</td> <td><input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.</td> <td>15</td> <td><input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction</td> <td><input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced</td> <td><input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S</td> </tr> <tr> <td></td> <td>Rate: 16</td> <td>Rate: 78</td> <td>120</td> <td>70</td> <td><input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.</td> <td>15</td> <td><input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction</td> <td><input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced</td> <td><input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S</td> </tr> </table>			VITAL SIGNS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS	2008	Rate: 16	Rate: 84	120	70	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S	2014	Rate: 16	Rate: 78	120	72	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S		Rate: 16	Rate: 78	120	70	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S
VITAL SIGNS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS																																		
2008	Rate: 16	Rate: 84	120	70	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S																																		
2014	Rate: 16	Rate: 78	120	72	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S																																		
	Rate: 16	Rate: 78	120	70	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S																																		
Current Medications (List)	Denies																																										

OBJECTIVE PHYSICAL ASSESSMENT rear of garbage truck. Vehicle sustained moderate front end damage. -cabin intrusion. + driver's airbag deployment. No extrication required. No damage to garbage truck or sanitation workers. Pt c/o minor R shoulder pain from airbag. PE finds pt is A&Ox4, breathing norm/adequate w/

COMMENTS clear lung fields =/bilat, norm skin CTC, reg radial pulses, +PERRL, +ambulatory, + PMS x4, full range of motion to R arm, shoulder pain of 3/10. No obvious signs of injury noted upon full body inspection. RMA not AMA s/w.

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

Disp: Hamilton A.

- 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) RMA not AMA s/w

DISP. CODE 0 0 5

CONTINUATION FORM USED YES ←

CREW	IN CHARGE Washington G.	DRIVER'S NAME Jefferson T.	NAME _____	NAME _____
	<input checked="" type="radio"/> EMT <input type="radio"/> AEMT # 1 2 3 4 5 6	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	M V O	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #

1 2 3 1 2 0

RUN N 5-

0 0 7 3 7 3 0 0 0 0 2 2

## AGENCY NAME

Whitestone VAS

## DISPATCH INFORMATION

Injury Non-Critical

## CALL LOCATION

12-15 150 St - Kitchen

## MILEAGE

## LOCATION CODE

7 0 9 6

0 3 0 8 5 8

0 3 0 8 5 0

0 0 0 0 0 8

CALL RECD

2 0 0 0

ENROUTE

2 0 0 2

AT SCENE

2 0 0 4

FROM SCENE

2 0 2 5

AT DESTINATION

2 0 3 4

IN SERVICE

2 1 0 2

IN QUARTERS

2 1 2 1

PATIENT INFORMATION

JOHN T NAME

DOE

12-15 150 St

(718) 767-1000

NY 11357

036

D.O.B. 09/20/1984

F

M

123-45-6789

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  
 Extrication required    Seat belt used?    Seat Belt Use    Crew    Patient  
 minutes    Yes    No    Unknown    Reported By    Police    Other

CHIEF COMPLAINT "I cut my hand badly" pt sts

SUBJECTIVE ASSESSMENT UAF 36 y/o ♂ pt ambulatory, in front of location, holding right hand wrapped in blood soaked towel. Pt sts he was cutting a bagel and his hand slipped cutting his palm.

## PRESENTING PROBLEM

Fill in circle

- Airway Obstructions    Allergic Reaction  
 Respiratory Arrest    Syncope  
 Respiratory Distress    Stroke/CVA  
 Cardiac Related (Potential)    General Illness/Malaise  
 Cardiac Arrest    Gastro-Intestinal Distress  
 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    Seafood  
 Allergy to Seafood  
 Hypertension    Stroke  
 Seizures    Diabetes  
 COPD    Cardiac  
 Other (List)    Asthma

Current Medications (List)

Diavan

VITAL SIGNS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS
	2007	Rate: 18	Rate: 90	136 / 84	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input checked="" type="radio"/> S
	2017	Rate: 18	Rate: 88	132 / 82	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input checked="" type="radio"/> S
	2027	Rate: 16	Rate: 86	130 / 82	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input checked="" type="radio"/> S

## OBJECTIVE PHYSICAL ASSESSMENT

PE finds pt is A&amp;Ox4, breathing normal/adequate w/ clear lung fields, ECG/bilat. Normal skin CTC, reg radial pulses. +PERRL, +Ambulatory. Pt has a 2" laceration to palm, of right hand, bleeding in venous and controlled by pt w/ direct pressure. Wound dressed by EMS with pressure dressing. Pt has

COMMENTS has no other complaints. No other obvious signs of injury noted upon inspection. Pt maintains right hand elevated, and wound is monitored by EMS. Pt transported to NSUH w/o incident.

## 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 ► [ ] Minutes EKG Monitored (Attach Tracing) [Rhythm(s)] Defibrillation/Cardioversion No. Times [ ]

Disp: Hamilton A.

- Medication Administered (Use Continuation Form)  
 IV Established Fluid \_\_\_\_\_ Cath. Gauge [ ]  
 Mast Inflated @ Time \_\_\_\_\_  
 Bleeding / Hemorrhage Controlled (Method Used: pressure dressing)  
 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: Sitting

## DISPOSITION (See List) North Shore University Hospital

DISP. CODE 7 0 5

CONTINUATION FORM USED YES ←

CREW	IN CHARGE	DRIVER'S NAME	JEFFERSON T.	NAME	NAME
	EMT AEMT # 1 2 3 4 5 6	CFR EMT AEMT # 1 2 3 4 5 7		CFR EMT AEMT #	

1 2 3 1 2 0

R J N I N G

5-

0 0 7 3 7 3

0 0 0 0 2 2

AGENCY NAME

Whitestone VAS

DISPATCH INFORMATION

Stab

CALL LOCATION

12-15 150 St IFO location

MILEAGE

0 3 0 8 5 8  
0 3 0 8 5 4  
7 0 9 6 0 0 0 0 4

CALL REC'D	2 0 0 0
ENROUTE	2 0 0 2
AT SCENE	2 0 0 4
FROM SCENE	2 0 1 4
AT DESTINATION	2 0 2 5
IN SERVICE	2 1 0 2
IN QUARTERS	2 1 2 1

PATIENT INFORMATION

JOHN J. NAME  
12-15 150 St

DOE

2 PFT UNIT NUMBER (718) 767-1000  
WHitestone NY 11357-  
026 D.O.B. 09/20/1994 F M

123-45-6789

Physician

Dr. Benjamin Cohen

MECHANISM OF INJURY

 MVA ( seat belt used)  Fall of  feet  
 Struck by vehicle  Unarmed assault  GSW  Machinery  
 Knife

**CHIEF COMPLAINT** "I got into a fight, got stabbed, and collapsed here" - pt sts

**SUBJECTIVE ASSESSMENT** UAF 26 y/o ♂ pt supine in front of location, laying in pool of blood clutching abdomen. Pt states he was drinking at the bar up the street and was stabbed a few times in the stomach during a fight w/ a short knife.

PRESENTING PROBLEM

<input type="radio"/> Allergic Reaction	<input type="radio"/> Unconscious/Unresp.	<input type="radio"/> Shock	<input type="radio"/> Major Trauma
<input type="radio"/> Syncope	<input type="radio"/> Seizure	<input type="radio"/> Head Injury	<input type="radio"/> Trauma-Blunt
<input type="radio"/> Stroke/CVA	<input type="radio"/> Behavioral Disorder	<input type="radio"/> Spinal Injury	<input type="radio"/> Trauma-Penetrating
<input type="radio"/> General Illness/Malaise	<input type="radio"/> Substance Abuse (Potential)	<input type="radio"/> Fracture/Dislocation	<input type="radio"/> Soft Tissue Injury
<input type="radio"/> Respiratory Arrest	<input type="radio"/> Poisoning (Accidental)	<input type="radio"/> Amputation	<input type="radio"/> Bleeding/Hemorrhage
<input type="radio"/> Respiratory Distress			
<input type="radio"/> Cardiac Related (Potential)			
<input type="radio"/> Diabetic Related (Potential)			
<input checked="" type="radio"/> Pain	<input type="radio"/> Stomach	<input type="radio"/> Other	<input type="radio"/> OB/GYN

<input type="radio"/> Airway Obstructions	<input type="radio"/> General Illness/Malaise	<input type="radio"/> Diabetic Related (Potential)	<input type="radio"/> Burns
<input type="radio"/> Respiratory Arrest	<input type="radio"/> Gastro-Intestinal Distress	<input type="radio"/> Environmental	<input type="radio"/> Heat
<input type="radio"/> Respiratory Distress	<input type="radio"/> Cardiac Related (Potential)	<input type="radio"/> Cold	<input type="radio"/> Cold
<input type="radio"/> Cardiac Related (Potential)	<input type="radio"/> Cardiac Arrest	<input type="radio"/> Hazardous Materials	<input type="radio"/> Hazardous Materials
<input checked="" type="radio"/> Cardiac Arrest		<input type="radio"/> Obvious Death	<input type="radio"/> Obvious Death

PAST MEDICAL HISTORY

<input type="radio"/> None	<input type="radio"/> Aspirin
<input checked="" type="radio"/> Allergy to	
<input type="radio"/> Hypertension	<input type="radio"/> Stroke
<input type="radio"/> Seizures	<input type="radio"/> Diabetes
<input type="radio"/> COPD	<input type="radio"/> Cardiac
<input checked="" type="radio"/> Other (List)	<input type="radio"/> Asthma
PMH: Psoriasis	

Current Medications (List)

VITAL SIGNS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS
	2005	Rate: 20	Rate: 116	80 / 46	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	14	<input type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input checked="" type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> Unremarkable <input type="radio"/> Pale <input type="radio"/> Cyanotic <input type="radio"/> Flushed <input type="radio"/> Jaundiced
	2010	Rate: 20	Rate: 116	94 / 50	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input checked="" type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> Unremarkable <input type="radio"/> Pale <input type="radio"/> Cyanotic <input type="radio"/> Flushed <input type="radio"/> Jaundiced
	2015	Rate: 20	Rate: 112	96 / 54	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input checked="" type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> Unremarkable <input type="radio"/> Pale <input type="radio"/> Cyanotic <input type="radio"/> Flushed <input type="radio"/> Jaundiced

OBJECTIVE PHYSICAL ASSESSMENT

PE finds pt is A&amp;Ox4, breathing normal/adequate w/ clear lung fields, E/bilat. Skin cool/pale/moist w/ central cyanosis revealing shock. ALS requested. Pt sts punched in face twice, denies LOC, denies head/neck/back pain. Pt stripped, revealing 3 1/2" stab wounds right side of umbilicus w/

**COMMENTS** uncontrolled bleeding as well as blood pouring out of rectum. No additional obvious signs of injury noted upon inspection. Pt placed in shock position, administered O2, dressed wounds and maintained w/ direct pressure. ALS extended. Transport w/o incident and w/ notification.

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 (ET) Oxygen Administered @ 1 5 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 ► [ ] Minutes EKG Monitored (Attach Tracing) [Rhythm(s)] Defibrillation/Cardioversion No. Times [ ]

Disp: Hamilton A.

Medication Administered (Use Continuation Form)  
 IV Established Fluid \_\_\_\_\_ Cath. Gauge [ ]  
 Mast Inflated @ Time \_\_\_\_\_  
 Bleeding / Hemorrhage Controlled (Method Used: direct pressure)  
 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) NYP - Queens

DISP. CODE 7 6 2

CONTINUATION FORM USED YES ←

CREW	IN CHARGE	Washington G.	DRIVER'S NAME	Jefferson T.	NAME	NAME	NAME
		1 2 3 4 5 6	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	M V O	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #		<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #

1 2 3 1 2 0

RUN N 5-

0 0 7 3 7 3 0 0 0 0 2 2

AGENCY NAME

Whitestone VAS

DISPATCH INFORMATION

Chest Pain

CALL LOCATION

12-15 150 St Basement

MILEAGE

0 3 0 8 5 8  
0 3 0 8 5 4  
7 0 9 6 0 0 0 0 4

CALL REC'D

2 0 0 2

ENROUTE

2 0 0 2

AT SCENE

2 0 0 4

FROM SCENE

2 0 2 5

AT DESTINATION

2 0 3 4

IN SERVICE

2 1 0 2

IN QUARTERS

2 1 2 1

PATIENT  
NAME

JANE DOE

12 - 15 150 St

INFORMATION  
ADDRESS/UNIT NUMBER

(718) 767 - 1000

WHITESTONE

NY

11357 -

087

D.O.B. 09 / 20 / 1933

F

M

123 - 45 - 6789

- Residence
- Health
- Farm
- Industrial
- Other Work
- Recreational
- Road
- Other

Call Received as  
 EMERGENCY  
 NON EMERGENCY  
 STANDBY

Physician

CARE IN PROGRESS ON ARRIVAL

<input checked="" type="radio"/> None	<input type="radio"/> Citizen	<input type="radio"/> PD/FD/Other First Responder	<input type="radio"/> Other EMS	<input type="radio"/> PAD used	
<input type="radio"/> Extrication required	Seat belt used?		Seat Belt Use	<input type="radio"/> Crew	
	minutes	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Unknown	Reported By
		<input type="radio"/> Police	<input type="radio"/> Other		

## MECHANISM OF INJURY

- MVA (✓ seat belt used)
  - Fall of feet
  - GSW
  - Machinery
- Struck by vehicle
  - Unarmed assault
  - Knife
  - Other

CHIEF COMPLAINT "My chest  
hurts" pt states

SUBJECTIVE ASSESSMENT UAF 87 y/o ♀ pt sitting complaining of substantial chest pain radiating to jaw and left arm, not relieved by rest x30 min. Pt also complaining of mild dyspnea. Pt states onset of symptoms presenting while doing laundry.

## 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)
- Chest 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 Denies
- Hypertension
- Stroke
- Seizures
- Diabetes
- COPD
- Cardiac
- Other (List) High Cholesterol
- Asthma

## Current Medications (List)

- Metoprolol, Nitroglycerin,
- Lipitor, Aspirin, Atenolol
- PMH: Trip Bypass, MI '04

OBJECTIVE PHYSICAL ASSESSMENT PE finds pt is A&amp;Ox4, breathing shallow/inadequate w/ clear lung fields ⊖ / bilat. Skin CTC pale/cool/moist, irregular/tachy radial pulses, + PERRL. Crew did not allow pt to ambulate. Pt rates chest pain at 8 , and states difficulty breathing with tightness on inspiration. ALS requested. -JVD -Pedal

COMMENTS carpal edema. -ascites -clubbed fingers. Administered 162 mg ASA PO and assisted pt w/ 1 sublingual nitro tablet@ 2006 hrs. ALS on scene, diagnosed STEMI, assumed pt care on board Whitestone BLS for transport to NYP-Q w/ notification. ALS unit 52X3 PCR#7264

## 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 (ET)
- Oxygen Administered @ 15 L.P.M., Method Non-Rebreather
- 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 ►  Minutes Until C.P.R. ►  Minutes
- EKG Monitored (Attach Tracing) [Rhythm(s)]
- Defibrillation/Cardioversion No. Times  Manual  Semi-automatic

162 mg of Aspirin (2x 81 mg tablets)

- 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) NewYork Presbyterian - Queens Hospital

DISP. CODE 7 6 2

CONTINUATION FORM USED YES ←

CREW	IN CHARGE	DRIVER'S NAME	Jefferson T.	NAME	Madison J.	NAME						
							CFR	EMT	AEMT #	CFR	EMT	AEMT #
		Washington G.					1	2	3	4	5	6

1 2 3 1 2 0

P I N N 5-

0 0 7 3 7 3

0 0 0 0 2 2

AGENCY NAME

Whitestone VAS

DISPATCH INFORMATION

Asthma

CALL LOCATION

12-15 150 St

MILEAGE

0 3 0 8 5 8  
0 3 0 8 5 4  
7 0 9 6 0 0 0 0 4CALL REC'D 2 0 0 2  
ENROUTE 2 0 0 2  
AT SCENE 2 0 0 4  
FROM SCENE 2 0 2 5  
AT DESTINATION 2 0 3 4  
IN SERVICE 2 1 0 2  
IN QUARTERS 2 1 2 1

PATIENT INFORMATION	JANE	NAME	DOE						
	12-15 150	St							
	APPRT UNIT NUMBER		(718) 767-1000						
	WHITESTONE		NY	11357	+4				
	036	D.O.B. 09/20/1984	F	M	123-45-6789				

Physician

CARE IN PROGRESS ON ARRIVAL:  
 None    Citizen    PD/FD/Other First Responder    Other EMS    PAD used  
 Extrication required    Seat belt used?    Seat Belt Use    Crew    Patient  
 minutes    Yes    No    Unknown    Reported By    Police    Other
MECHANISM OF INJURY  
 MVA (✓ seat belt used)    Fall of feet    GSW    Machinery  
 Struck by vehicle    Unarmed assault    Knife    Machinery
CHIEF COMPLAINT "I'm having subjective assessment UAF 36 y/o ♀ pt sitting, complaining of an asthma attack.  
an asthma attack" pt sts Pt sts she was being chased by a dog, made it home but lost her inhaler and and now can't stop wheezing.

PRESENTING PROBLEM	<input type="radio"/> Allergic Reaction	<input type="radio"/> Unconscious/Unresp.	<input type="radio"/> Shock	<input type="radio"/> Major Trauma	<input type="radio"/> OB/GYN
Fill in circle	<input type="radio"/> Syncope	<input type="radio"/> Seizure	<input type="radio"/> Head Injury	<input type="radio"/> Trauma-Blunt	<input type="radio"/> Burns
	<input type="radio"/> Stroke/CVA	<input type="radio"/> Behavioral Disorder	<input type="radio"/> Spinal Injury	<input type="radio"/> Trauma-Penetrating	<input type="radio"/> Environmental
	<input type="radio"/> General Illness/Malaise	<input type="radio"/> Substance Abuse (Potential)	<input type="radio"/> Fracture/Dislocation	<input type="radio"/> Soft Tissue Injury	<input type="radio"/> Heat
	<input type="radio"/> Gastro-Intestinal Distress	<input type="radio"/> Diabetic (Accidental)	<input type="radio"/> Amputation	<input type="radio"/> Bleeding/Hemorrhage	<input type="radio"/> Cold
	<input type="radio"/> Cardiac Related (Potential)				<input type="radio"/> Hazardous Materials
	<input type="radio"/> Cardiac Arrest				<input type="radio"/> Obvious Death
	<input type="radio"/> Pain				

PAST MEDICAL HISTORY	VITAL SIGNS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS
<input type="radio"/> None	VITAL	2006	Rate: 24	Rate: 90	126 / 80	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S
<input checked="" type="radio"/> Allergy to peanuts	SIGNS	2011	Rate: 22	Rate: 94	120 / 80	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S
<input type="radio"/> Hypertension		2016	Rate: 20	Rate: 88	120 / 80	<input checked="" type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S
<input type="radio"/> Seizures										
<input type="radio"/> COPD										
<input type="radio"/> Other (List)										

Current Medications (List)  
Albuterol, Advair

OBJECTIVE PHYSICAL ASSESSMENT PE finds pt is A&amp;Ox4, breathing slightly labored w/ bilat wheezing in upper lung fields. Skin CTC is warm/moist/normal, w/ regular radial pulses, + PERRL, + Ambulatory. Pt denies any injuries from chase. Pt denies any prior intubations and states this is her worst asthma attack ever. Pt can speak in

COMMENTS full sentences and has minor accessory muscle use. Administered 2 albuterol treatments via nebulizer coupled w/ O2 therapy via NRB 15 LPM. Upon reassessment, pt reports feeling significant relief. Vitals remain stable. No accessory muscle use noted at this time. Transport w/o incident.

## 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/EGT)
- Endotracheal Tube (ET)
- Oxygen Administered @ 15 L.P.M., Method NRB
- 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

2x Albuterol (2.5 mg each)

- 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) NewYork Presbyterian - Queens Hospital

DISP. CODE 7 6 2

CONTINUATION FORM USED YES ←

CREW IN CHARGE	Washington G.	DRIVER'S NAME	Jefferson T.	NAME	Madison J.	NAME
<input checked="" type="radio"/> EMT	1 2 3 4 5 6	<input type="radio"/> CFR	1 2 3 4 5 7	<input type="radio"/> CFR	- T H I R D	<input type="radio"/> CFR
<input type="radio"/> AEMT #		<input checked="" type="radio"/> EMT		<input type="radio"/> EMT		<input type="radio"/> EMT
		<input type="radio"/> AEMT #				<input type="radio"/> AEMT #

1 2 3 1 2 0

RUN 5-

0 0 7 3 7 3 0 0 0 0 2 2

AGENCY NAME

Whitestone VAS

DISPATCH INFORMATION

Abdominal Pain

CALL LOCATION

12-15 150th St - Living Room

MILEAGE

LOCATION CODE  
7 0 9 6  
0 3 0 8 5 8  
0 3 0 8 5 4  
0 0 0 0 0 4CALL REC'D 2 0 0 0  
ENROUTE 2 0 0 2  
AT SCENE 2 0 0 4  
FROM SCENE 2 0 3 0  
AT DESTINATION 2 0 3 8  
IN SERVICE 2 1 0 1  
IN QUARTERS 2 1 2 1

PATIENT INFORMATION	JANE	NAME	DOE
	12-15 150 St		
	2	EMT NUMBER	(718) 767-1000
	WHITESTONE	NY	11357
	036	D.O.B.	09/20/1984 F M 123-45-6789

- Residence
- Health
- Farm
- Industrial
- Other Work
- Recreational
- Road
- Other

Call Received as  
 EMERGENCY  
 NON EMERGENCY  
 STANDBY

Physician	Dr. Bill Park	CARE IN PROGRESS ON ARRIVAL:
MECHANISM OF INJURY	<input type="radio"/> MVA (✓ seat belt used) <input type="radio"/> Fall of feet <input type="radio"/> GSW <input type="radio"/> Machinery <input type="radio"/> Struck by vehicle <input type="radio"/> Unarmed assault <input type="radio"/> Knife <input type="radio"/> Other	<input checked="" type="radio"/> None <input type="radio"/> Citizen <input type="radio"/> PD/FD/Other First Responder <input type="radio"/> Other EMS <input type="radio"/> PAD used <input type="radio"/> Extrication required <input type="radio"/> Seat belt used? minutes <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown <input type="radio"/> Report by Police <input type="radio"/> Other

CHIEF COMPLAINT "My stomach hurts" - patient states

SUBJECTIVE ASSESSMENT UAF 36 y/o ♀ sitting in living room c/o abdominal pain x6 hours. Pt also complains of nausea, vomiting, diarrhea, and possible fever. Pt states she has not been feeling well all day, but abdominal pain is too severe.

PRESENTING PROBLEM		<input type="radio"/> Allergic Reaction <input type="radio"/> Syncpe <input type="radio"/> Stroke/CVA <input type="radio"/> General Illness/Malaise <input type="radio"/> Respiratory Distress <input type="radio"/> Cardiac Related (Potential) <input type="radio"/> Cardiac Arrest <input type="radio"/> Pain	<input type="radio"/> Unconscious/Unresp. <input type="radio"/> Seizure <input type="radio"/> Behavioral Disorder <input type="radio"/> Substance Abuse (Potential) <input type="radio"/> Poisoning (Accidental)	<input type="radio"/> Shock <input type="radio"/> Head Injury <input type="radio"/> Spinal Injury <input type="radio"/> Fracture/Dislocation <input type="radio"/> Amputation	<input type="radio"/> Major Trauma <input type="radio"/> Trauma-Blunt <input type="radio"/> Trauma-Penetrating <input type="radio"/> Soft Tissue Injury <input type="radio"/> Bleeding/Hemorrhage	<input type="radio"/> OB/GYN <input type="radio"/> Burns <input type="radio"/> Environmental <input type="radio"/> Heat <input type="radio"/> Cold <input type="radio"/> Hazardous Materials <input type="radio"/> Obvious Death					
Fill in circle		Other									
<input type="radio"/> Airway Obstructions <input type="radio"/> Respiratory Arrest <input type="radio"/> Respiratory Distress <input type="radio"/> Cardiac Related (Potential) <input type="radio"/> Cardiac Arrest		<input type="radio"/> Airway Cleared <input type="radio"/> Oral / Nasal Airway <input type="radio"/> Esophageal Obturator Airway / Esophageal Gastric Tube Airway (EOA/EGTA) <input type="radio"/> EndoTracheal Tube (ET) <input checked="" type="radio"/> Oxygen Administered @ 1 5 L.P.M., Method NRB <input type="radio"/> Suction Used <input type="radio"/> Artificial Ventilation Method <input type="radio"/> C.P.R. in progress on arrival by: <input type="radio"/> Citizen <input type="radio"/> PD/FD/Other First Responder <input type="radio"/> Other <input type="radio"/> C.P.R. Started @ Time ► <input type="radio"/> <input type="radio"/> <input type="radio"/> Minutes from Arrest Until C.P.R. ► <input type="radio"/> <input type="radio"/> <input type="radio"/> Minutes <input type="radio"/> EKG Monitored (Attach Tracing) [Rhythm(s)] <input type="radio"/> Defibrillation/Cardioversion No. Times <input type="radio"/> Manual <input type="radio"/> Semi-automatic									
PAST MEDICAL HISTORY		VITAL SIGNS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS
<input type="radio"/> None <input checked="" type="radio"/> Allergy to PCN <input type="radio"/> Hypertension <input type="radio"/> Seizures <input type="radio"/> COPD <input type="radio"/> Other (List) Albuterol		PCN	2006	Rate: 16 <input type="radio"/> Regular <input type="radio"/> Shallow <input type="radio"/> Labored	Rate: 86 <input type="radio"/> Regular <input type="radio"/> Shallow <input type="radio"/> Labored	126 80	<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input checked="" type="radio"/> S
			2020	Rate: 16 <input type="radio"/> Regular <input type="radio"/> Shallow <input type="radio"/> Labored	Rate: 84 <input type="radio"/> Regular <input type="radio"/> Shallow <input type="radio"/> Labored	124 80	<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input checked="" type="radio"/> S
		LMP - 12/15/2020		Rate: <input type="radio"/> Regular <input type="radio"/> Shallow <input type="radio"/> Labored	Rate: <input type="radio"/> Regular <input type="radio"/> Shallow <input type="radio"/> Labored		<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.		<input type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moist <input type="radio"/> Dry	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input checked="" type="radio"/> S

OBJECTIVE PHYSICAL ASSESSMENT PE finds pt is A&Ox4, breathing normal/adequate w/ clear lung fields = /bilateral. Normal/warm CTC, regular radial pulses, + PERRL, + Ambulatory, abdomen soft and non-distended x4 quadrants, tender in both lower quads. Pt reports vomiting 4 times, diarrhea 3 times, minimal

COMMENTS hydration w/ minor weakness. Pt can not keep down solid food. No one else in household feels I.II. No further pt complaints or physical findings. Pt transported to NYP - Queens w/o incident or injury.

## 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 (ET)
- Oxygen Administered @ 1 5 L.P.M., Method NRB
- 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 ►    Minutes from Arrest Until C.P.R. ►    Minutes
- EKG Monitored (Attach Tracing) [Rhythm(s)]
- Defibrillation/Cardioversion No. Times  Manual  Semi-automatic

Disp: Hamilton A.

- 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) NewYork-Presbyterian Queens Hospital

DISP. CODE 7 6 2

CONTINUATION FORM USED YES ←

CREW	IN CHARGE Washington G.	DRIVER'S NAME Jefferson T.	NAME	NAME
	<input type="radio"/> EMT <input type="radio"/> AEMT # 1 2 3 4 5 6	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	M V O	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #

1 2 3 1 2 0

RUNNING 5-

0 0 7 3 7 3 0 0 0 0 2 2

AGENCY NAME

Whitestone VAS

DISPATCH INFORMATION

Abdominal Pain

CALL LOCATION

12-15 150 St, 2nd Floor

LOCATION CODE

7 0 9 6

MILEAGE

0 3 0 8 5 4

0 3 0 8 5 4

0 0 0 0 0 0

CALL RECD

1 4 5 2

ENROUTE

1 4 5 3

AT SCENE

1 4 5 8

FROM SCENE

AT DESTINATION

IN SERVICE

1 5 0 0

IN QUARTERS

1 5 0 8

PATIENT  
ADDRESS

UNKNOWN

INFORMATION  
APPOINTMENT NUMBER

( ) - 0 0 0 0

Physician

MECHANISM OF INJURY

 MVA (✓ seat belt used)  Fall of feet  
 Struck by vehicle  Unarmed assault GSW  Machinery

CHIEF COMPLAINT

SUBJECTIVE ASSESSMENT UAF BLS Unit 52F treating patient. As per 52F, "no additional BLS needed." Call cancelled.

## PRESENTING PROBLEM

- Fill in circle
- Airway Obstructions
  - Respiratory Arrest
  - Respiratory Distress
  - Cardiac Related (Potential)
  - Cardiac Arrest
  - Pain

- Allergic Reaction
- Syncope
- Stroke/CVA
- General Illness/Malaise
- Gastro-Intestinal Distress
- Diabetic Related (Potential)
- Shock
- Head Injury
- Spinal Injury
- Fracture/Dislocation
- Poisoning (Accidental)
- Burns
- Environmental
- Heat
- Cold
- Hazardous Materials
- OB/GYN
- Trauma-Blunt
- Trauma-Penetrating
- Soft Tissue Injury
- Bleeding/Hemorrhage
- Amputation
- Other

Call cancelled

## PAST MEDICAL HISTORY

- None
- Allergy to
- Hypertension
- Seizures
- COPD
- Other (List)
- Stroke
- Diabetes
- Cardiac
- Asthma

Current Medications (List)

## OBJECTIVE PHYSICAL ASSESSMENT

VITAL SIGNS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS
		Rate: <input type="text"/>	Rate: <input type="text"/>		<input type="radio"/> Alert	<input type="radio"/> Normal	<input type="radio"/> Unremarkable	<input type="radio"/> C	
		<input type="radio"/> Regular	<input type="radio"/> Regular		<input type="radio"/> Voice	<input type="radio"/> Dilated	<input type="radio"/> Cool	<input type="radio"/> Pale	
		<input type="radio"/> Shallow	<input type="radio"/> Shallow		<input type="radio"/> Pain	<input type="radio"/> Constricted	<input type="radio"/> Warm	<input type="radio"/> Cyanotic	
		<input type="radio"/> Labored	<input type="radio"/> Labored		<input type="radio"/> Unresp.	<input type="radio"/> Sluggish	<input type="radio"/> Moist	<input type="radio"/> Flushed	
		Rate: <input type="text"/>	Rate: <input type="text"/>			<input type="radio"/> No-Reaction	<input type="radio"/> Dry	<input type="radio"/> Jaundiced	
		<input type="radio"/> Regular	<input type="radio"/> Regular						
		<input type="radio"/> Shallow	<input type="radio"/> Shallow						
		<input type="radio"/> Labored	<input type="radio"/> Labored						
		Rate: <input type="text"/>	Rate: <input type="text"/>						
		<input type="radio"/> Regular	<input type="radio"/> Regular						
		<input type="radio"/> Shallow	<input type="radio"/> Shallow						
		<input type="radio"/> Labored	<input type="radio"/> Labored						

## 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)  L.P.M., Method \_\_\_\_\_
- Oxygen Administered @  Time \_\_\_\_\_
- 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  Until C.P.R.  Minutes
- EKG Monitored (Attach Tracing) [Rhythm(s)]
- Defibrillation/Cardioversion No. Times  Manual  Semi-automatic

Disp: Hamilton A.

- 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) Call cancelled

DISP. CODE 0 0 6

CONTINUATION FORM USED YES

CREW	IN CHARGE	Washington G.	DRIVER'S NAME	Jefferson T.	NAME	NAME	NAME
<input type="radio"/> EMT <input type="radio"/> AEMT #	1 2 3 4 5 6	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	M V O	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #			

1 2 1 3 2 0

5-

0 0 7 3 7 3 0 0 0 0 2 2

AGENCY

Whitestone VAS

DISPATCH INFORMATION

Shot

12 Ave / 150 St

MILEAGE

LOCATION CODE  
0 3 0 8 5 4  
0 3 0 8 5 4  
7 0 9 6 0 0 0 0 0 0CALL RECD  
1 9 0 0  
ENROUTE  
1 9 0 1  
AT SCENE  
1 9 0 7  
FROM SCENE  
AT DESTINATION  
IN SERVICE  
1 9 1 7  
IN QUARTERS  
1 9 2 5

PATIENT INFORMATION

UNKNOWN

UNKNOWN

Address

( ) - 0 0 0 0

Address

( ) - 0 0 0 0

Address

( ) - 0 0 0 0

D.O.B. / / 0 0 0 0

F

M

Physician

CARE IN PROGRESS ON ARRIVAL:

None  Citizen  PD/FD/Other First Responder  Other EMS  PAD used

Extrication required  Seat belt used?  Seat Belt Use  Crew  Patient

minutes  Yes  No  Unknown  Reported By  Police  Other

CHIEF COMPLAINT

SUBJECTIVE ASSESSMENT UAF no patient, no EMS, no PD, no FD on scene. 94Z canvasses area and waited on scene for 10 minutes, still no patient. 94Z back in service. No patient found.

PRESENTING PROBLEM

- Fill in circle
- Allergic Reaction
  - Syncope
  - Stroke/CVA
  - General Illness/Malaise
  - Gastro-Intestinal Distress
  - Diabetic Related (Potential)
  - Pain
  - Airway Obstructions
  - Respiratory Arrest
  - Respiratory Distress
  - Cardiac Related (Potential)
  - Cardiac Arrest

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

● Other

No Patient Found

PAST MEDICAL HISTORY

- None
- Allergy to \_\_\_\_\_
- Hypertension  Stroke
- Seizures  Diabetes
- COPD  Cardiac
- Other (List)  Asthma

Current Medications (List)

VITALS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	PUPILS	SKIN	STATUS
		Rate: _____	Rate: _____		<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.		<input type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moisit <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S
		<input type="radio"/> Regular <input type="radio"/> Shallow <input type="radio"/> Labored	<input type="radio"/> Regular <input type="radio"/> Irregular		<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.		<input type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Moisit <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> 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)  L.P.M., Method \_\_\_\_\_
- Oxygen Administered @  Time \_\_\_\_\_
- 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

Disp: Hamilton A.

- 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) No patient found

DISP. CODE 0 0 8

CONTINUATION FORM USED YES

CREW	IN CHARGE	Washington G.	DRIVER'S NAME	Jefferson T.	NAME	Burr, A.	NAME	
<input checked="" type="radio"/> EMT <input type="radio"/> AEMT #	1 2 3 4 5 6	<input type="radio"/> CFR <input checked="" type="radio"/> EMT <input type="radio"/> AEMT #	7 8 9 1 2 3	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	3 r d		<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	

1 2 1 3 2 0

RUN NO

5-

0 0 7 3 7 3    0 0 0 0 2 3

AGENCY NAME  
DISPATCH INFORMATION  
CALL LOCATION

Whitestone VAS  
Unconscious  
12 Ave / 150 St

LOCATION CODE  
7 0 9 6

MILEAGE  
0 3 0 8 5 4  
0 3 0 8 5 4  
0 0 0 0 0 0

CALL RECD	1 2 0 0
ENROUTE	1 2 0 1
AT SCENE	1 2 1 0
FROM SCENE	
AT DESTINATION	
IN SERVICE	1 2 1 5
IN QUARTERS	1 2 2 0

PATIENT INFORMATION UNKNOWN NAME UNKNOWN

ADDRESS

APPT UNIT NUMBER

CITY

0 4 5 D.O.B. 1 2 / 1 3 / 1 9 7 5 F M

( ) - 0 0 0 0

T - + 4 - 0 0 0 0

Physician

## MECHANISM OF INJURY

- MVA (✓ seat belt used)
- Fall of feet
- GSW
- Machinery
- Struck by vehicle
- Unarmed assault
- Knife

CHIEF COMPLAINT "Get away from me!" - pt states

## SUBJECTIVE ASSESSMENT

UAF approximately 45 y/o male seated upright on sidewalk w/  
no apparent life threats. Bystander on scene states he called EMS for pt who was  
sleeping in front of his property out of concern for his well-being. Upon interacting

## PRESENTING PROBLEM

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- Respiratory Distress
- Cardiac Related (Potential)
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- 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

## ● Other

## RMA (Refused All)

## 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
	1 2 1 0	Rate: <input type="text"/>	Rate: <input type="text"/>		<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S
	1 2 1 5	Rate: <input type="text"/>	Rate: <input type="text"/>		<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.	15	<input checked="" type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input checked="" type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S
		Rate: <input type="text"/>	Rate: <input type="text"/>		<input type="radio"/> Alert <input type="radio"/> Voice <input type="radio"/> Pain <input type="radio"/> Unresp.		<input type="radio"/> Normal <input type="radio"/> Dilated <input type="radio"/> Constricted <input type="radio"/> Sluggish <input type="radio"/> No-Reaction	<input type="radio"/> Unremarkable <input type="radio"/> Cool <input type="radio"/> Warm <input type="radio"/> Cyanotic <input type="radio"/> Moist <input type="radio"/> Flushed <input type="radio"/> Dry <input type="radio"/> Jaundiced	<input type="radio"/> C <input type="radio"/> U <input type="radio"/> P <input type="radio"/> S

OBJECTIVE PHYSICAL ASSESSMENT w/ pt, he grew very agitated. Pt yelled "I don't want the ambulance" and proceeded to get up and walk away. Pt was apparently alert, breathing normal/unlabored, skin color/temperature/condition normal, pupils equal and round. Pt refused all care. RMA refused. All witnessed by bystander.

## COMMENTS

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- (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) RMA (Refused All)

DISP. CODE 0 0 5

CONTINUATION FORM USED YES

CREW	IN CHARGE	Washington G.	DRIVER'S NAME	Jefferson T.	NAME	NAME	NAME	NAME
		1 2 3 4 5 6	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #	M V O	<input type="radio"/> CFR <input type="radio"/> EMT <input type="radio"/> AEMT #			