NEMSIS v3.2.6 Change Log

July 16, 2012

File	Change (Yes / No)	File	Change (Yes / No)
CADDataset	No	eDisposition	No
DEMDataSet	No	eExam	No
EMSDataSet	No	eHistory	No
commonTypes	No	elnjury	No
dAgency	No	eLabs	No
dConfiguration	No	eMedDevice	No
dContact	No	eMedications	No
dCustom	No	eNarrative	No
dDevice	No	eOther	No
dFacility	No	eOutcome	No
dLocation	No	ePatient	No
dPersonnel	No	ePayment	No
dState	No	eProcedures	No
dVehicle	No	eProtocols	No
eAirway	No	eRecord	No
eArrest	No	eResponse	No
eCAD	No	eScene	No
eCrew	No	eSituation	No
eCustom	No	eState	No
eDevice	No	eTimes	No
eDispatch	Yes	eVitals	No

eDispatch.05 – Dispatch Priority (Patient Acuity)

Data Element Comment Change:

Old:

The use of priority and acuity values vary by EMS agency. Some systems may utilize fewer than four priority levels and some more. The use of four priority levels is to capture the majority and allow for the inclusion of the NHTSA National EMS Core Content definitions for patient acuity, specifically: Critical, Emergent, and Lower Acuity.

For EMS Agencies and CAD / EMD systems utilizing Alpha-Echo, Omega levels for determining the priority level for dispatch of the EMS unit, the recommended mapping is:

Echo = Priority 1	Charlie = Priority 2	Alpha = Priority 3
Delta = Priority 1	Bravo = Priority 2	Omega = Priority 4

Priority 1 is typically an emergent (lights and sirens) response

Priority 2 is typically an emergent response without the use lights and sirens

Priority 3 is typically a non-emergent response for nursing home, hospital-to-hospital transfers, etc.

Priority 4 is typically a scheduled response (scheduled transfer) or standby event

Definitions related to "Critical, Emergent, and Lower Acuity" can be found in the National EMS Core Content document from NHTSA EMS (DOT HS 809-898 July 2005) at

http://www.nhtsa.gov/people/injury/ems/emscorecontent/images/EMSCoreContent.pdf

New:

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Provided below is an example application only. This example bears no relationship to any particular federal, state, or agency billing requirement

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