

entered as shoulder, upper arm, elbow, forearm and wrist with separate exam findings for each component, meaning a single exam finding of paralysis for an arm would take ten steps to enter) and the same information is often reflected in the clinician's narrative.

- b. However, there *is* some utility in targeted use of these fields for certain situations such as stroke, spinal exams, and trauma without needing to enter all the fields in each record.
- 2. Capacity Assessment Group
This can be used to support documentation of patient capacity for refusal of care and/or transport, participation in advanced spinal assessments, or support for treatment decisions by EMS clinicians. *NOTE: The Capacity Assessment Group does not provide a legal definition of capacity and should not be used as such. It is intended only to assist the EMS clinician in documenting the most basic exam and history findings in order to determine capacity. Many additional factors must be considered when determining capacity including the situation, patient medical history, medical conditions, and consultation with medical direction.*
 - a. Barriers and situational confounders [Both only single entry]
 - i. eHistory.01—Barriers to Patient Care
 - ii. eHistory.17—Alcohol/Drug Use Indicators
 - b. Glasgow Coma Score (GCS) Vitals Group [*see Vitals section*] [serial entries allowed]
 - c. eVitals.26—Level of Responsiveness (AVPU) [serial entries allowed]
 - d. eExam.19—Mental Status Assessment [serial entries allowed]
 - e. eExam.20—Neurological Assessment [serial entries allowed]
- 3. Stroke Assessments
 - a. Initial Vitals
 - b. eSituation.18—Date/Time Last Known Well (Stroke/CVA)
 - c. Stroke Score Group
 - d. eExam.19—Mental Status Assessment
 - e. eExam.20—Neurological Assessment (*Speech, facial droop, arm drift, unilateral weakness*)
 - f. eVitals.31—Reperfusion Checklist (*May not apply if service area does not use due to lack of consensus on a standard reperfusion checklist, or acceptance by EMS if used*)
- 4. Spinal Injury/Exam
 - a. Capacity Assessment Group
 - b. Back and Spine Assessment Group
 - i. eExam.13—Back and Spine Assessment Finding Location
 - ii. eExam.14—Back and Spine Assessment
 - c. Extremity Assessment Group
 - i. eExam.15—Extremity Assessment Finding Location
 - ii. eExam.16—Extremities Assessment
- 5. 12-lead EKG Acquisition
 - a. eTimes.06—Unit Arrived on Scene Date/Time
 - b. eTimes.07—Arrived at Patient Date/Time
 - c. EKG Rhythm Group [*see Vitals section*]
 - d. Attach 12-lead graphic ePCR (through direct integration linkage with EKG monitor or attachment of scanned printout as allowed/available in software)
 - e. 12-lead-EKG Procedure-documented under Procedures Performed Group
- 6. Trauma/Injury