



To: All MLREMS Agencies and Providers

Advisory 09-03

From: Jeremy T. Cushman, MD, MS, EMT-P
Associate Regional Medical Director

RJ (Terry) Fairbanks, MD, MS, EMT-P
REMAC Chair

Date: August 19, 2009

Re: State DOH Policy 09-08 Reporting Incident, Injuries, and Crashes

The New York State Bureau of EMS recently released policy statement 09-08 Reporting Incident, Injuries, and Crashes (attached). This requires all EMS agencies to complete DOH Form 4461 (also attached) "for any incident in which serious injury, illness or death of an EMS provider, patient or other individual (for example, a bystander, driver of another vehicle) occurred in the course of their EMS response and/or duties." Although not specifically stated within the policy, "serious injury or illness" is generally construed as to mean an injury or illness that results in an evaluation by a physician or for which a PCR would be completed.

Importantly, fire departments responding to or participating in an EMS incident **are** required to complete this form. Fire departments responding to or participating in firefighting activities (fire suppression, rescue not involving patient care, hazardous materials, etc) do not have to complete this form. Ambulances and ALS first response services must complete this form regardless of their activity at the time of the incident.

DOH Form 4461 must be completed and returned within 5 business days of the incident to Mr. Ross Zastrow at the Bureau of EMS regional office (Fax 585-423-8028; e-mail rz02@health.state.ny.us; or postal mail to: The Triangle Building, 335 East Main St, Rochester, NY 14604-2127). Additionally, the Monroe-Livingston REMAC requires that a copy be forwarded to the Regional Program Agency. The purpose of the ML-REMAC receiving this information is to assure that such information can be used to make system improvements at the local level based upon knowledge of past events. This information will be used to identify system hazards and trends, and in no way will reporting via this mechanism result in a regional quality assurance review unless a specific quality assurance concern is brought forth in writing to the REMAC.

We encourage your agency to review its policies regarding injuries and illnesses in the workplace and make appropriate modifications to assure compliance with this state requirement. The DOH Form 4461 can be downloaded from mlrems.org.

With any questions, do not hesitate to contact the MLREMS Program Agency, via the University of Rochester, Division of Prehospital Medicine.

601 Elmwood Avenue, Box 655
Rochester, New York 14642
585-463-2900
opc@urmc.rochester.edu