



FIRE DEPARTMENT BLS FIRST RESPONSE DOCUMENTATION REQUIREMENTS

PURPOSE

To define the minimum documentation expectations of Fire Department Basic Life Support First Response agencies who respond to requests for emergency medical services. This policy does not apply to transporting or non-transporting ALS agencies that must complete a Prehospital Care Report for every incident to which they are dispatched.

POLICY

Fire Department Basic Life Support First Response (BLSFR) agencies must record all requests for emergency medical services using either a PCR or a written or electronic fire service log, hereafter referred to as a Fire Record Management System (FireRMS).

For every request for emergency medical services, the following must be included in the FireRMS:

1. Date and time of incident
2. Incident location
3. EMD Code associated with the incident
4. The disposition of the incident

A Prehospital Care Report (PCR) must be completed when patient care is provided independently by a member of the BLSFR agency at any point during the response. "Independent patient care" refers to a member of the BLSFR agency who is in charge of patient care to their level of certification prior to the arrival of a transport unit or an advanced provider who assumes responsibility for that patient's care. Should the BLSFR agency not provide independent patient care during that incident, then a PCR is not required and the FireRMS may be used to document the service type provided.

The FireRMS incident dispositions and documentation requirements are:

1. Canceled
 - a. The BLSFR agency is cancelled en-route or on-scene by a law enforcement, fire or EMS agency and makes no patient contact. Patient contact is defined as visual contact with the patient. No PCR is required and the disposition is recorded in FireRMS.
 - b. NFIRS Equivalent:
 - 611 – Dispatched and canceled en route. Incident cleared or canceled prior to arrival of the responding unit.



2. No Patient Found

- a. The BLSFR agency arrives on scene and finds no patient. A patient is defined as a person encountered by EMS personnel with actual or potential injury or medical problem. No PCR is required and the disposition is recorded in FireRMS.

- b. NFIRS Equivalent:

- 324 – Motor vehicle accident with no injuries
- 621 – Wrong location, excludes malicious false alarms (710 series).
- 622 – No incident found on arrival at dispatch address
- 661 – EMS call where injured party has been transported by a non-fire service agency or left the scene prior to arrival.
- 600 – Good intent call, other.

3. Assist Ambulance

- a. The BLS agency assists the transporting ambulance or a higher level of care (in the case of a non-transporting ALS unit) with patient care (lifting, packaging, obtaining vital signs, riding with the transporting crew, etc) at the direction of the provider in charge. No PCR is required and the disposition is recorded in FireRMS.

- b. NFIRS Equivalent:

- 311 – Medical assist. Includes incidents where medical assistance is provided to another group/agency that has primary EMS responsibility.

4. Patient Care Provided

- a. The BLSFR agency is in charge of providing independent patient care to the level of their certification at any time during the incident. A PCR is required and the disposition is recorded in FireRMS. This includes when an agency provider:

- i. Administers aspirin, albuterol, naloxone, or epi-pen.
- ii. Utilizes an AED or blood glucometer.



- iii. Performs any procedure, including: cardiopulmonary resuscitation or assisted ventilation; spinal motion restriction using a cervical immobilization device and/or backboard; or immobilization of a suspected fracture using a splint or other immobilization device.
 - b. Generally, any time the BLSFR agency is at the patient's side before the transporting provider, a PCR is expected as an evaluation and "independent patient care" has been performed. Other instances such as mandated reporter conditions (abuse, neglect) should result in the generation of a PCR. When in doubt, complete a PCR.
 - c. NFIRS Equivalents:
 - 321 – EMS call. Includes calls when the patient refuses treatment. Excludes vehicle accident with injury (322) and pedestrian struck (323)
 - 322 – Motor vehicle accident with injuries. Includes collision with other vehicle, fixed objects, or loss of control resulting in leaving the roadway.
 - 323 – Motor vehicle/pedestrian accident (MV Ped). Includes any motor vehicle accident involving a pedestrian injury.
5. Standby
- a. The BLSFR agency provides EMS standby services for hazardous conditions with the intent to provide emergency medical aid or assessment should it be required. This includes emergency incident rehabilitation. No PCR is required and the disposition is recorded in FireRMS. If a patient is assessed or treated beyond that which is specified in emergency incident rehabilitation policy, a PCR is required.
 - b. NFIRS Equivalent:
 - 381 – Rescue or EMS standby for hazardous conditions. Excludes aircraft standby (462).

It is expected that the BLSFR agency monitor compliance with these documentation expectations.