REPORTING FORMAT

INTRODUCTION: Patient reports to a Base Hospital, Trauma Center or Receiving Hospital should be brief
and to the point. Only pertinent information should be presented initially, however the Base Physician may need
to request additional information in order to make sound treatment or triage decisions. Occasionally pause
briefly to confirm reception and allow for guestions or orders

2. MEDICAL PATIENTS:

2.1 Receiving Hospital Report

- FΤΔ
- ► General patient information
- ▶ Physical assessment
 - √ Vital signs/Glascow Coma Scale
 - √ Pertinent positives and pertinent negatives, as needed
 - √ For STEMI patients see "EKG 12-Lead" policy (page 126, section 4.3) for reporting information
- ▶ Interventions made and patient response, if applicable
- ▶ Problems encountered, if applicable (e.g. unable to intubate)

2.2 Base Contact

- ► General patient information
- ► Chief complaint and general assessment
- ▶ Patient destination and ETA
- ▶ Physical assessment
 - ✓ Vital signs/Glascow Coma Scale
 - ✓ Pertinent positives and pertinent negatives to support the general assessment.
- ▶ Treatment rendered prior to contact and patient response, if applicable
- ► Specific requests for medications/procedures

3. TRAUMA PATIENTS:

3.1 Receiving Hospital Report

- ► ETA
- ► General patient information
- ► Triage criteria met, including mechanism of injury
- ▶ Physical assessment
 - √ Vital signs/Glascow Coma Scale
 - ✓ Pertinent positives and pertinent negatives, as needed
- ▶ Interventions made and patient response, if applicable
- ▶ Problems encountered, if applicable (e.g. unable to intubate)

3.2 Trauma Destination (60 seconds)

- ► ETA to the closest appropriate ED vs. TC
- ► General patient information
- ► Triage criteria met
- ► Mechanism of injury
- ▶ Physical assessment
 - √ Vital signs, if available/Glascow Coma Scale
 - ✓ Pertinent positives and pertinent negatives