

# Informational Bulletin

## ImageTrend Updates

Date: August 13, 2021

Number: 21.038

Effective Date: August 13, 2021

Expiration Date: N/A

Approved By: Darren L. Stevens, Fire Rescue Chief



Please see the following updates regarding EMS Reporting.

### DOCUMENTATION

Through the CQI process, it has been noted that the lack of signatures is increasing. As a reminder, it is the responsibility of all providers to obtain the appropriate signatures on all incidents. Below is a list of required signature examples (not all-inclusive):

1. AIC signature – Required for all incidents.
2. Patient signature – Required for all incidents with patient contact, to include a deceased patient (the assessment of a deceased patient is performed under implied consent and therefore must be appropriately documented). There has been an increase in the use of ‘No Access to Obtain Signature’ being used, and this is inappropriate.
  - a. Example of unacceptable documentation: M11XX documents patient care for a patient denoted to be A&Ox4, with a transport time of 17 minutes, and then leaves the signature box empty and checks ‘no access to obtain signature’.
3. Consent by parent/guardian for treatment/transport of minors.
4. Transfer of Care Signatures – all transfers, (aviation, law enforcement, etc.) must be documented to appropriately identify the disposition of a patient.

### MEDICATION SECURITY

Through interaction with the Pharmacy, there have been some noted discrepancies with narcotics exchanges. While we are now able to waste medications with other providers under OP 303, we must ensure that the forms are completed appropriately. This is a DEA requirement that the Pharmacy Director must have in the case of an audit. Please be sure to complete all waste signatures in addition to obtaining a nurse signature when exchanging the box.

Fauquier County Controlled Substance Kit Usage Form  
For use by Fauquier, Rapidan/Stafford and approved Outpatient (EMS Agencies)

Initial Kit: [Redacted] Issuing Facility: Fauquier Hospital Pharmacy Seal Number: [Redacted] Initial Date Prepared: 7/2/21

Medication	Amount Administered	Amount Wasted*	Waste Witness Signature	Returned
1. Fentanyl 100 mcg/2 ml				
2. Fentanyl 100 mcg/2 ml				
3. Fentanyl 100 mcg/2 ml				
4. Fentanyl 100 mcg/2 ml				
5. Fentanyl 100 mcg/2 ml				
6. Midazolam 5 mg/1 ml				
7. Midazolam 5 mg/1 ml				
8. Midazolam 5 mg/1 ml				
9. Midazolam 5 mg/1 ml				
10. Morphine 10 mg/1 ml				
11. Morphine 10 mg/1 ml				
12. Ketamine 500 mg/10 ml				

\*Excess medication shall NOT be wasted at the pharmacy

Medications were administered to: Patient Name: [Redacted] EMS Agency: [Redacted]  
 Patient DOB: [Redacted] Agency Inc: [Redacted]  
 Hospital MR #: [Redacted] EMS Unit: [Redacted]  
 EMS Attendant in Charge (ALS): [Redacted] EMS Co-Sign (ALS or BLS): [Redacted]

Accepting Nurse: [Redacted] Date: [Redacted]

Fauquier County Controlled Substance Kit Usage Form  
For use by Fauquier, Rapidan/Stafford and approved Outpatient (EMS Agencies)

Initial Kit: [Redacted] Issuing Facility: Fauquier Hospital Pharmacy Seal Number: [Redacted] Initial Date Prepared: 8/10/2021

Medication	Amount Administered	Amount Wasted*	Waste Witness Signature	Returned
1. Fentanyl 100 mcg/2 ml	50	50	[Redacted]	
2. Fentanyl 100 mcg/2 ml				
3. Fentanyl 100 mcg/2 ml				
4. Fentanyl 100 mcg/2 ml				
5. Fentanyl 100 mcg/2 ml				
6. Midazolam 5 mg/1 ml				
7. Midazolam 5 mg/1 ml				
8. Midazolam 5 mg/1 ml				
9. Midazolam 5 mg/1 ml				
10. Morphine 10 mg/1 ml				
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Accepting Nurse: [Redacted] Date: [Redacted]

## REPORTING IMPROVEMENTS

As our system continues to evolve, changes have been made to the documentation procedures. These changes are noted below, along with a graphic representation of how they appear within ImageTrend.

1. The Procedures section has been re-numbered to place all EMS Supervisor Procedures within a single section of the report. Procedures 600-605 contain those procedures as shown below.

**Procedures**

+ Add Another      ✓ OK      ✕ Cancel

Procedure: [Dropdown Menu]

Performed Prior to this Units EMS Care: [Dropdown Menu]

Time Performed: [Input Field]

Number of Attempts: [Input Field]

Successful: [Input Field]

Find value...  
 Wound Care - Dressing - Occlusive Application  
 Wound Care - Celox  
 E.-F.A.S.T.  
 IV by Ultrasound  
 Manual Transport Ventilator  
 Rapid Sequence Intubation  
 Simple Surgical Thoracotomy

2. A noted problem area in documenting the Supervisor intervention is the lack of addition of the EMS Supervisor to the crew. Remember that per IB 20.064, the EMS Supervisor must be added to the crew in order to properly document their intervention, including if they simply initiate a medication and allow the provider to transport (if comfortable) in certain cases.
3. In the case of a Rapid Sequence Intubation, a Power Tool has been added to the Image Trend System (see pictures). The Supervisor **MUST** be added to the crew prior to using this power tool. Once added, the tool can be opened and all procedures can be time-stamped with an accurate time that will automatically upload into the system. In order to use the Power Tool appropriately, follow the following procedure (pictures below):
  - a. Add the Supervisor to the crew list
  - b. Click the Power Tool icon
  - c. Time stamp the appropriate procedures and questions as events occur.

- At the bottom of the Procedures section are the three buttons regarding E-FAST, Ventilator Usage, and Blood Products. These buttons **should only be** activated by the EMS Supervisor, as it is their job to complete the report after the responding ALS provider has completed the base report in accordance with IB 20.064. Note: The provider may fill in the appropriate Procedure from Number 1 above (601-605) in order to accurately record the time, however, the documentation of the procedure outcomes tab and buttons is the responsibility of the responding Supervisor.

<b>Was an E-FAST Exam Performed?:</b>	Yes	No
<b>Was the Ventilator Used?:</b>	Yes	No
<b>Blood - Were Blood Products Used?:</b>	Yes	No

Questions regarding this informational bulletin should be directed to Captain Rob Smith.