

# Wyoming Ambulance Trip Reporting System 2007 PCR - Data Elements

<b>Race</b>	<b>Ethnicity</b>
Not Available	Not Applicable
Not Known	Not Known
Not Applicable	Not Available
American Indian or Alaska Native	Hispanic or Latino
Asian	Not Hispanic or Latino
Black or African American	
Native Hawaiian or Other Pacific Islander	
White/Caucasian	
Other Race	

<b>Cause of Injury</b>
Not Applicable
Not Available
Not Known
Aircraft Related Accident
*Agriculture Fram & Ranch
*Altercation
*Assault
Bicycle Accident
Bites
*Burn
Chemical poisoning
Child Battering
*Climbing
*Construction Accident
*Diving
Drowning
Drug Poisoning
Electrocution (non-lightning)
*Equestrian
Excessive Cold
Excessive Heat
*Explosion
Falls
Fire and Flames
Firearm Assault
Firearm Injury (accidental)
Firearm Self Inflicted
*Fireworks
*Inhalation Injury
*Intoxication
Lightning
Machinery Accidents
Mechanical Suffocation
Motor Vehicle Non-traffic Accident
Motor Vehicle Traffic Accident
Motorcycle
Non-motorized Vehicle Accident
Other: Please List
*Paint Ball Gun
Pedestrian Traffic Accident
Radiation Exposure
Rape
*Rodeo
Smoke Inhalation
*Snowmobile
Sports
Stabbing/Cutting Accidental
Stabbing/Cutting Assault
Struck By Blunt/Thrown Object
Train
Venomous Stings (plants, animals)
Water Transport Accident
Weather
* WY Added Injuries

<b>Trauma Team Activation Triage Indicators</b>	
<b>Primary Indicators</b>	
<b>Vital Signs &amp; Level of Consciousness</b>	
<ul style="list-style-type: none"> <li>• Systolic Blood Pressure .....&lt;90 or</li> <li>• Glasgow Coma Scale.....&lt;12 or</li> <li>• Respiratory rate .....&lt;10 or &gt;29</li> <li>• Penetrating Trauma Head, Neck or Torso</li> </ul>	
<b>Anatomic</b>	
<ul style="list-style-type: none"> <li>• All Amputations (except of two digits or less on a single limb)</li> <li>• Burns Associated With Major Trauma - 10% Or Greater</li> <li>• Flail Chest</li> <li>• Penetrating Injuries of Head, Neck, Torso, And Extremities Proximal To The Elbow or Knee or Joint Involvement (excluded cuts, abrasion, superficial wounds)</li> <li>• Traumatic Paralysis</li> <li>• Open or Depressed Skull Fractures</li> <li>• Fractures of Femur or Pelvis, or Two Fractures of Two or More Long Bones, (tibia/fibula, radius/ulna, humerus), Includes Open Fractures</li> </ul>	
<b>Secondary Considerations</b>	
<b>Contributing Physiologic Factors:</b>	
<ul style="list-style-type: none"> <li>• Age: &lt;5 or &gt;55</li> <li>• Pregnancy</li> <li>• Immunocompromised</li> <li>• Cardio- Respiratory, Diabetes, Liver Disease, Obesity, Bleeding Disorders</li> </ul>	
<b>Mechanism of Injury</b>	
<ul style="list-style-type: none"> <li>• Rollover</li> <li>• Motor Vehicle Crash</li> <li>• Ejection From Vehicle</li> <li>• Evidence of High Impact: (Auto Deformity&gt;20Inches) (Intrusion &gt;12 Inches) (Speed &gt; 40 Mph)</li> <li>• Falls Twice The Height Of Patient Or Greater Than 20 Feet</li> <li>• Large Animal Incident</li> <li>• Death In The Same Passenger Compartment</li> <li>• Pedestrian Thrown Or Run Over</li> <li>• Auto/Pedestrian or Bike With Significant (&gt;5Mph) Impact</li> <li>• Complex Extrication of Greater Than 20 Minutes</li> <li>• Motorcycle - Bike &gt;20 Mph</li> <li>• Separation of Bike and Rider</li> </ul>	
<b>Please check off the Prehospital Trauma Triage Indicator(s) utilized for Trauma Team Activation on the report</b>	

<b>Situation CPR Required Data Elements</b>		
<i>add to narrative, required when CPR is performed</i>		
<b>Arrest Witnessed By:</b> Witnessed by Healthcare Provider Witnessed by Lay Person Not Witnessed Unknown	<b>Cardiac Arrest:</b> Yes, Prior to EMS Arrival Yes, After EMS Arrival No Not Applicable	<b>Any Return of Spontaneous Circulation:</b> Yes, Prior to ED Arrival Only Yes, Prior to ED Arrival and at the ED No Unknown
<b>Resuscitation Attempted:</b> Attempted Defibrillation Attempted Ventilation Initiated Chest Compressions Not Attempted-Considered Futile Not Attempted-DNR Orders Not Attempted-Signs of Circulation Not Applicable Not Known Not Available	<b>Cardiac Arrest Etiology:</b> Presumed Cardiac Trauma Drowning Respiratory Electrocution Other Unknown	<b>Reason CPR Discontinued:</b> DNR Medical Control Order Obvious Signs of Death Protocol/Policy Requirements Completed Return of Spontaneous Circulation (pulse or BP noted) Comfort One
<b>Estimated Time of Arrest Prior to EMS Arrival:</b>	20 Minutes 15-20 Minutes 10-15 Minutes 8-10 Minutes 6-8 Minutes	4-6 Minutes 2-4 Minutes 0-2 Minutes Not Available Unknown

## Providers Primary & Secondary Impression

Not Applicable  
 Not Available  
 Not Known  
 \*AAA  
 Abdominal Pain / Problems  
 Airway Obstruction  
 Allergic Reaction  
 Altered Level Of Consciousness  
 \*Asthma  
 Behavioral / Psychiatric Disorder  
 \*Bowel Obstruction  
 \*Cancer  
 Cardiac Rhythm Disturbance  
 Cardiac Arrest  
 Chest Pain / Discomfort  
 \*CHF  
 \*Dehydration  
 Diabetic Symptoms -  
 (hypoglycemia, hyperglycemia)  
 Electrocution  
 \*ETOH Abuse  
 \*Fever  
 \*GI Bleed  
 \*Headache  
 \*Hypertension  
 Hyperthermia  
 Hypothermia  
 Hypovolemia /Shock  
 Inhalation Injury (toxic gas)  
 Obvious Death  
 \*Other - Illness  
 \*Pain Do Not Use "Pain" for  
 Impression  
 Poisoning / Drug Ingestion  
 Pregnancy / OB Delivery  
 Respiratory Arrest  
 Respiratory Distress  
 Seizure  
 Sexual Assault / Rape  
 Smoke Inhalation  
 Stings / Venomous Bites  
 Stroke / CVA  
 Syncope / Fainting  
 Traumatic Injury  
 \*Unconscious / Unknown  
 Vaginal Hemorrhage  
  
 \* WY Added Impressions

## Medication Complication

None  
 Not Applicable  
 Not Available  
 Not Known  
 Altered Mental Status  
 Apnea  
 Bleeding  
 Bradycardia  
 Diarrhea  
 Extravasation  
 Hypertension  
 Hyperthermia  
 Hypotension  
 Hypoxia  
 Injury  
 Itching/Urticaria  
 Nausea  
 Other  
 Respiratory Distress  
 Tachycardia  
 Vomiting

## Procedure Complication

None  
 Not Applicable  
 Not Available  
 Not Known  
 Altered Mental Status  
 Apnea  
 Diarrhea  
 Esophageal Intubation  
 -Immediately  
 Esophageal Intubation  
 - Other  
 Extravasation  
 Hypertension  
 Hyperthermia  
 Hypotension  
 Hypoxia  
 Injury  
 Itching/Urticaria  
 Nausea  
 Other  
 Respiratory Distress  
 Tachycardia  
 Vomiting

## Condition Codes - optional

None  
 Not Applicable  
 Not Available  
 Not Known  
 Altered Mental Status  
 Abdominal Pain (ALS-789.00)  
 Abnormal Cardiac Rhythm/Cardiac Dysrhythmia (ALS-427.9)  
 Abnormal Skin Signs (ALS-780.8)  
 Abnormal Vital Signs (ALS-796.4)  
 Alcohol Intoxication or Drug Overdose (BLS-305.0)  
 Allergic Reaction (ALS-995.0)  
 Allergic Reaction (BLS-692.9)  
 Altered Level of Consciousness (non-traumatic) (ALS-780.01)  
 Animal Bites/Sting/Envenomation (ALS-989.5)  
 Animal Bites/Sting/Envenomation (BLS-879.8)  
 Back Pain (non-traumatic possible cardiac or vascular)  
 (ALS-724.5)  
 Back Pain (non-traumatic with neurologic symptoms)  
 (ALS-724.9)  
 Blood Glucose (ALS-790.21)  
 Burns-Major (ALS-949.3)  
 Burns-Minor (BLS-949.2)  
 Cardiac Arrest-Resuscitation in Progress (ALS-427.5)  
 Cardiac Symptoms other than Chest Pain (atypical pain)  
 (ALS-536.2)  
 Cardiac Symptoms other than Chest Pain (palpitations)  
 (ALS-785.1)  
 Chest Pain (non-traumatic) (ALS-786.50)  
 Choking Episode (ALS-784.9)  
 Cold Exposure (ALS-991.6)  
 Cold Exposure (BLS-991.9)  
 Convulsions/Seizures (ALS-780.39)  
 Difficulty Breathing (ALS-786.05)  
 Electrocution (ALS-994.8)  
 Eye Symptoms (non-traumatic) (BLS-379.90)  
 Hazmat Exposure (ALS-987.9)  
 Heat Exposure (ALS-992.5)  
 Heat Exposure (BLS-992.2)  
 Hemorrhage (ALS-459.0)  
 Infectious Diseases requiring Isolation/Public Health Risk  
 (BLS-038.9)  
 Lightning (ALS-994.0)  
 Major Trauma (ALS-959.8)  
 Medical Device Failure (ALS-996.0)  
 Medical Device Failure (BLS-996.3)  
 Neurologic Distress (ALS-436.0)  
 Non Traumatic Headache (ALS-437.9)  
 Other Trauma (amputation digits) (BLS-886.0)  
 Other Trauma (amputation other) (ALS-887.4)  
 Other Trauma (fracture/dislocation) (BLS-829.0)  
 Other Trauma (major bleeding) (ALS-958.2)  
 Other Trauma (need for monitor or airway) (ALS-518.5)  
 Other Trauma (penetrating extremity) (BLS-880.0)  
 Other Trauma (suspected internal injuries) (ALS-869.0)  
 Pain (Severe) (ALS-780.99)  
 Poisons (all routes) (ALS-977.9)  
 Post-Operative Procedure Complications (BLS-998.9)  
 Pregnancy Complication/Childbirth/Labor (ALS-650.0)  
 Psychiatric/Behavioral (abnormal mental status) (ALS-292.9)  
 Psychiatric/Behavioral (threat to self or others) (BLS-298.9)  
 Respiratory Arrest (ALS-799.1)  
 Severe Abdominal Pain (ALS-789.00)  
 Severe Alcohol Intoxication (ALS-977.3)  
 Severe Dehydration (ALS-787.01)  
 Sick Person-Fever (BLS-036.9)  
 Unconscious/Syncope/Dizziness (ALS-780.02)

### Glasgow Coma Scale

Category	0-23 Months	2-5 Years	> 5 Years
<b>Verbal Response</b>	Not Recorded : 0	Not Recorded : 0	Not Recorded : 0
	None : 1	None : 1	None : 1
	Persistent cry, grunting : 2	Grunts : 2	Incomprehensible : 2
	Inappropriate cry : 3	Cries and/or screams : 3	Inappropriate : 3
	Cries, inconsolable : 4	Inappropriate words : 4	Confused : 4
Smiles, Coos, Cries appropriately : 5	Appropriate words : 5	Oriented : 5	
<b>Eye Open</b>	Not Recorded : 0	Not Recorded : 0	Not Recorded : 0
	None : 1	None : 1	None : 1
	To Painful stimulation : 2	To Painful stimulation : 2	To Painful stimulation : 2
	Verbal stimulation : 3	Verbal stimulation : 3	Verbal stimulation : 3
	Spontaneously : 4	Spontaneously : 4	Spontaneously : 4
<b>Motor Response</b>	Not Recorded : 0	Not Recorded : 0	Not Recorded : 0
	None : 1	None : 1	None : 1
	Extensor posturing in response to painful stimulation : 2	Extends to pain : 2	Flexes to pain : 2
	Flexor posturing in response to painful stimulation : 3	Flexes to pain : 3	Withdraws : 3
	General withdrawal in response to painful stimulation : 4	Withdraws : 4	Localizes pain : 4
	Localization of painful stimulation : 5	Localizes pain : 5	Obeys commands : 5
	Spontaneously : 6	Obeys commands : 6	Obeys commands : 6

## EMS: Ordinary People, Extraordinary Service

Provided as a service to enhance emergency care by the:

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Wyoming  
 Department  
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