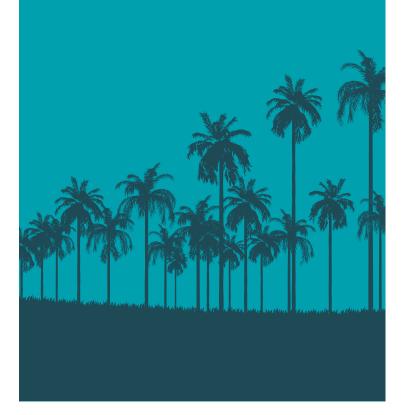
Florida HEALTH



Florida Emergency Medical Services Advisory Council

Data Committee



John Simpson, Chair January 8, 2025

EMSAC Data Committee Agenda

EMISTARS

Welcome/Opening Remarks

Review/Approval of Prior Meeting Record

Review/Discussion State Plan/Action Items

Update – Florida Stroke Registry

Review Florida V3.5 Implementation

Review of Data Quality Focus

Open Discussion







Roll Call

Approval of

&

Minutes



Roll Call



Abrams, Chad Byers, Patricia Carney, Chris Donatto, Darrel Faul, Jacob Fishe, Jennifer Hendry, Phyllis Jameson, Angus Johnson, Colin Judah, Lindsay Kruger, Robert Lozano, Michael Matzen, Brian Pappas, Peter Ransom, LuWayne Serrao, Simon Simpson, John, Chair Staples, Ryan **Taylor, Michael Tedesco, Anthony** Vass, Debbie



Review of Strategic Plan Measures





State Plan

- Subcommittee meetings
 - Members
 - \circ Colin Johnson
 - Anthony Tedesco
 - **o** Robert Kruger
 - \circ John Simpson
 - Chris Carney
 - \circ **Dr. Byers**
 - \circ Alicia Wolf
 - Dr. Pappas
- Monitor action plan to further accomplishment of strategic objectives assigned.
- Review and finalize action plan with full committee.
- Track/report on action plan.

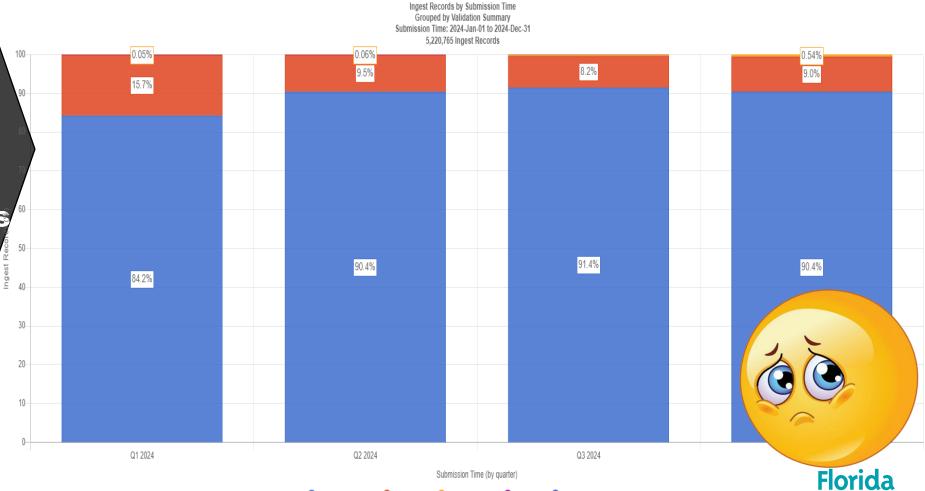




9% V3.5

Objective 1.1.C

Increase the percentage of data submission quality, specifically fully validated submissions from 38% to 90% by December 31, 2028



Tactics/Action

Activity Description	Person Responsible	Date	Activity Status
Activity/Intervention being carried out to address objective	Staff position responsible for carrying out or accountable for activity		Status of the indicator (Please see bottom of page for descriptions of selection choices)
 Develop Strategic Plan Implementation Plan 	Data Committee Strategic Plan Subcommittee/Facilitator Brenda Clotfelter	1/30/25	On Track
 In coordination with Bureau, develop Data Committee communique to agencies of objective and how it is measured 	Data Committee Strategic Plan Subcommittee/Facilitator Brenda Clotfelter	2/15/25	On Track
 Implement process of regularly communicating most common warnings statewide for distribution 	BEMO/Data Unit	2/15/25	On Track
 Develop standard report of validation results by agency to be provided or acquired by agencies monthly 	BEMO/Data Unit/biospatial	2/15/25	On Track
 Advertise and confirm the feedback loop for business rule issues/resolutions/changes 	BEMO/Data Unit	Qtrly	On Track
 Monitor Validation results quarterly 			On Track

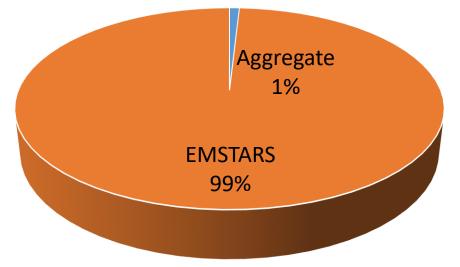
ор	NEMSIS Warnings	Occurrence	% of Occurrenc e	
	[3.5.0.230317CP4 nemSch_e187] Level of Care Provided per Protocol should be recorded (with a value other than "No Care Provided") when Patient Evaluation/Care is "Patient Evaluated and Care Provided".	38355	31.64%	
	[3.5.0.230317CP4 nemSch_e066] Primary Method of Payment should be recorded when Transport Disposition is "Transport by This EMS Unit".	25670	21.18%	
	[3.5.0.230317CP4 nemSch_e168] Final Patient Acuity should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".	25350	20.91%	
	[3.5.0.230317CP4 nemSch_e075] Date/Time of Symptom Onset should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided".	23122	19.08%	
	[3.5.0.230317CP4 nemSch_e025] Unit Left Scene Date/Time should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".	22767	18.78%	
	[3.5.0.230317CP4 nemSch_e084] Initial Patient Acuity should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided".	21723	17.92%	
	[3.5.0.230317CP4 nemSch_e078] Chief Complaint Anatomic Location should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided".	18407	15.19%	
	[3.5.0.230317CP4 nemSch_e159] Role/Type of Person Performing the Procedure should be recorded, unless Procedure Performed Prior to this Unit's EMS Care is "Yes".	15162	12.51%	
	[3.5.0.230317CP4 nemSch_e079] Chief Complaint Organ System should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided".	14630	12.07%	
9	[3.5.0.230317CP4 nemSch_e067] Number of Patients at Scene should be "Multiple" or "Single" when Unit	42260		

			% of
op			Occurrenc
	Florida Warnings	Occurrence	е
U	[3.5.0.211008CP3_FL_DOH_20240918 FL_33_eScene.01] First EMS Unit on Scene (eScene.01) cannot equal		
	a NOT Value when Unit Arrived on Scene (eTimes.06) has a date/time value.	33396	27.55%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_180_eSituation.01] Date/Time of Symptom Onset/Last Normal		
	(eSituation.01) cannot equal a NOT Value when Primary Symptom (eSituation.09) has a value other than a		
	NOT VALUE.	27502	22.69%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_30_eResponse.10] Type of Scene Delay (eResponse.10) cannot		
	equal a NOT Value when Unit Arrived on Scene (eTimes.06) has a date/time value.	26320	21.71%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_21_eResponse.09] Type of Response Delay (eResponse.09)		
	cannot equal a NOT Value when En Route Date/Time (eTimes.05) has a date/time value.	22461	18.53%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_644_eTimes.09] Unit Left Scene Date/Time (eTimes.09) cannot		
	equal a NOT Value when Unit Arrived on Scene Date/Time (eTimes.06) has a date/time value.	21688	17.89%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_328_eProcedures.11] Procedure Authorization (eProcedure.11)		
	cannot be left blank when Procedure (eProcedures.03) has a valid SNOMED CT Code and no Pertinent		
	Negatives.	18574	15.32%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_281_eVitals.23] Total Glasgow Coma Score (eVitals.23) cannot		
	equal "Not Recorded", "Not Reported" or "Refused"	18184	15.00%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_36_eScene.06] Number of Patients at Scene (eScene.06) cannot		
	equal a NOT Value when Unit Arrived on Scene (eTimes.06) has a date/time value.	17697	14.60%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_1198_eProcedures.03] Procedure (eProcedures.03) should have a		
	Florida Procedure List value.	17428	14.38%
	[3.5.0.211008CP3_FL_DOH_20240918 FL_959_eResponse.11] Type of Transport Delay (eResponse.11)		
	cannot equal a NOT Value when Transport Disposition (eDisposition.30) has a value of "Transport by This		
T O	EMS Unit (This Crew Only)" or "Transport by This EMS Unit, with a Member of Another Crew" or "Transport		
	by Another EMS Unit" or "Transport by Another EMS Unit, with a Member of This Crew" or "Non-Patient		



Objective 1.1.D

Increase the percentage of electronic patient care records (ePCR) submitted to the EMS **Tracking and Reporting System** (EMSTARS) from 79% to 95% by December 31, 2028.



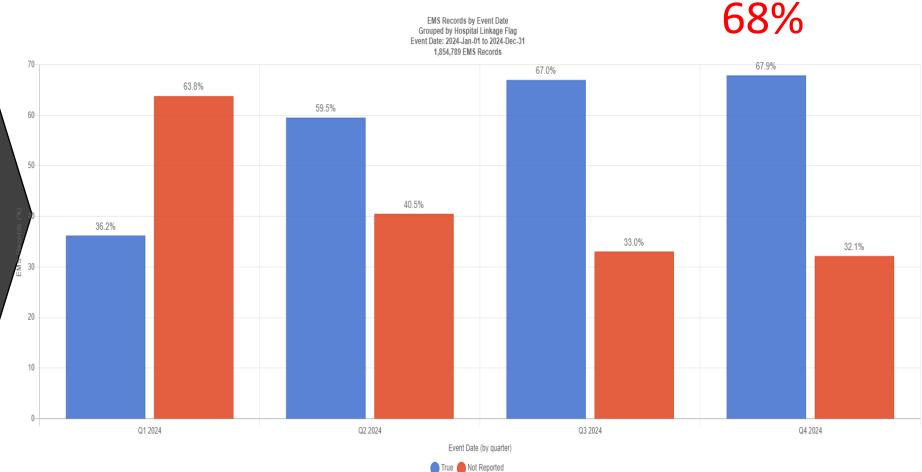
	2023	2024 Partial Qtr 4
EMSTARS/biospatial	4,979,499	4,792,977
Aggregate	111.500	56,306
Totals	5,090,999	4,849,283
% EMSTARS	98%	99%

336 Total Licensed Agencies 300 Agencies in EMSTARS – additional 10 subagencies 1 Pending 36 Aggregate



Objective 1.4.A

Increase the percentage of Health Information Exchange (HIE) outcome data matching to EMS records from 21% to 75% by December 31, 2028.





Tactics/Action

Activity Description	Person Responsible	Date	Activity Status
Activity/Intervention being carried out to address objective	Staff position responsible for carrying out or accountable for activity		Status of the indicator (Please see bottom of page for descriptions of selection choices)
 Identify/confirm HIE data matching elements 	BEMO/Data Unit	2/1/25	On Track
 Collaborate with ACHA vendor and Conduct analysis of data matching problem areas/elements 	BEMO/Data Unit	3/1/25	On Track
 Develop business rules to improve quality of matching elements 	BEMO/Data Unit , Data Committee	4/1/25	On Track
 Implement communication/feedback process for matching issues 	BEMO/Data Unit	4/1/25	On Track

Research/Publication Related

Objective 1.5.A – Increase the number of peer-reviewed EMS-related journal articles to which the Department contributed from 0 to 25 by December 31, 2028.

Objective 5.1.A – Increase the number of EMS research projects that the Department participates in from 3 to 5 by December 31, 2028.

Objective 5.2.B – Increase the number of predictive analytical reports from 0 to 10 by December 31, 2028.

Need Draft action plan to further accomplishment of strategic objectives assigned.



Question - Annual Survey 23

Objective 5.2.C

Increase the number of collaborative programs with county health departments bidirectionally exchanging biosurveillance data with EMS providers to identify emerging health threats from 1 to 67 by December 31, 2028.

Tactics/Actions

	Activity Description	Person Responsible	Date	Activity Status
	to address objective	Staff position responsible for carrying out or accountable for activity		Status of the indicator (Please see bottom of page for descriptions of selection choices)
/	 Review EMS Survey questions to determine needed modifications/additions 	Data Committee	1/30/25	On Track
	 Coordinate with ESSENSE Team to determine current collaborative activities in County Health Departments 	BEMO	3/1/25	On Track



Potential Changes/Additions to EMS Survey

- As FL ranks # in MC Deaths in FL, would like to add a couple of things.
- Workforce question should be changed on page 3. Instead of saying shortage of EMTs/ Paramedics, maybe something like "operating at staffing levels under a full roster". I think the term "staffing shortage" has been demonized over the past few years.
- On page 9 for the stroke questions. With ACFR introducing the mobile stroke unit to Florida, and providing that resource to neighboring counties; and with other agencies beginning to look at this model; could we add a question or two about agencies that have a mobile stroke truck, agencies that use mutual aid for a stroke truck and agencies that are actively pursuing adding a stroke truck to their response fleet.
- For the mental wellness questions, K9 programs are becoming more and more popular. There is only one mention of a K9 program in the survey as a multiple choice answer to a question about what programs are offered. Perhaps adding a question like, if your agency has a K9 program, how are they utilized? station dogs, trained therapy dogs, deployable with peer support, etc.
- Suggest a question(s) on Agency participation in PI programs for our Comprehensive Stroke and Trauma centers.
 - Do they participate?
 - How do they participate (regular attendance or invitation for specific events to EMS Chief and/or EMS Medical Director?)



Goal 1.4

Enhance Data Systems and Linkages to Provide the Infrastructure to Facilitate Data Driven Advancement of EMS Care

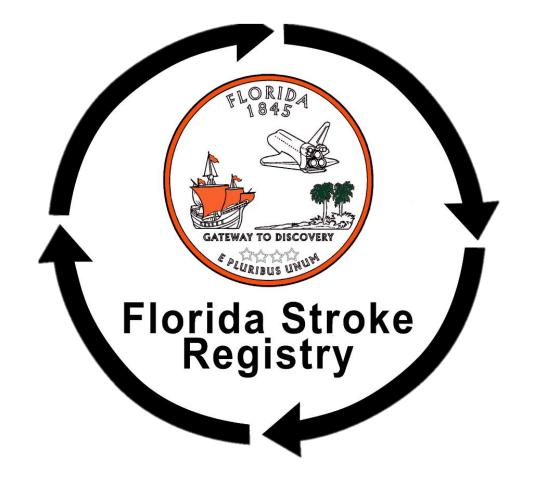
Tactics/Actions

Activity Description	Person Responsible	Date	Activity Status
carried out to address objective	Staff position responsible for carrying out or accountable for activity		Status of the indicator (Please see bottom of page for descriptions of selection choices)
 Complete planned bidirectional link with Florida Stroke Registry 	BEMO/FSR	1/1/26	On Track
 Reestablishment of Crash Record Linkage via a new MOU 	BEMO/HSMV	3/1/25	On Track
Implement Cares Export	BEMO	2/1/25	On Track



CARES Integration Business Rules

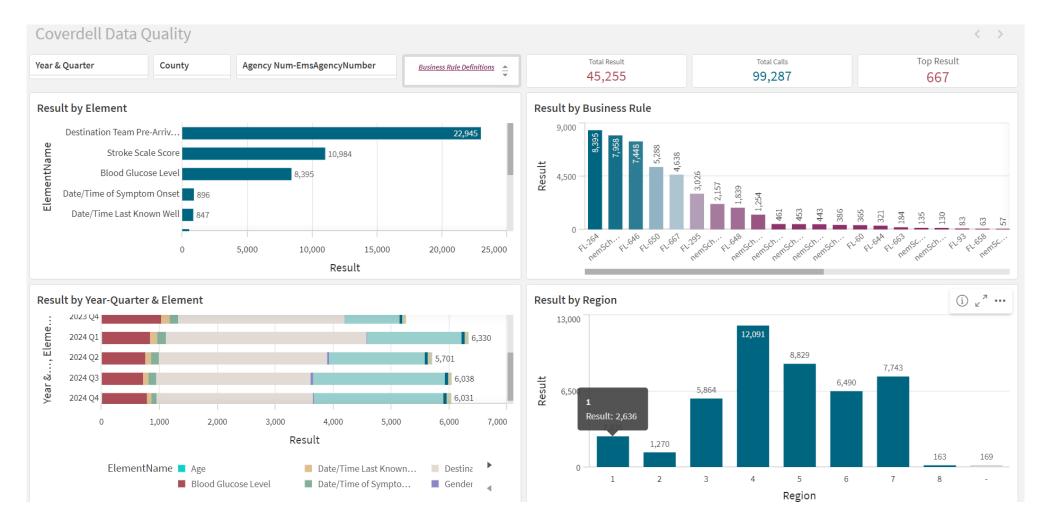
	Recommended		
Cares Recommended Rules	Rule Type	Florida Business Rule	Associated Element
If any eScene.ResponderGroup contains eScene.03 but none of the ResponderGroup elements contain eScene.24 =	Warning	If Other EMS or Public Safety Agencies at Scene (eScene.02) or Other EMS or Public Safety Agency ID Number (eScene.03) Has	eScene.24
Yes(9923003), a warning should be issued		a value then First Other EMS or Public Safety Agency at Scene to Provide Patient Care (eScene.24) should Have a value "Yes"	
		or "No"	
If CPR was initiated by the first responder (eArrest.20 is	Error	If Who First Initiated CPR(eArrest.20) has a value	eArrest.20
3020007, 3020009, or 3020011), there must be a		of ("3020007" or "3020009", or "3020011") then there must	
eScene.ResponderGroup with eScene.03 and eScene.24 =		be at least one First Other EMS or Public Safety Agency at	
Yes (9923003). Otherwise, an error should be issued		Scene to Provide Patient Care(eScene.24) has a value "Yes"	
If AED was first applied by the first responder (eArrest.21 is	Error	If Who First Applied the AED(eArrest.21) has a value	eArrest.21
3021007, 3021009, or 3021011), there must be a		of ("3021007" or "3021009", or "3021011") then there must	
eScene.ResponderGroup with eScene.03 and eScene.24 =		be at least one First Other EMS or Public Safety Agency at	
Yes (9923003). Otherwise, an error should be issued		Scene to Provide Patient Care(eScene.24) has a value "Yes"	
If the patient was first defibrillated by the first responder	Error	If Who First Defibrillated the Patient(eArrest.22) has a value	eArrest.22
(eArrest.22 is 3022007, 3022009, or 3022011), there must		of ("3022007" or "3022009", or "3022011"), there must be at	
be a eScene.ResponderGroup with eScene.03 and		least one First Other EMS or Public Safety Agency at Scene to	
eScene.24 = Yes (9923003). Otherwise, an error should be issued.		Provide Patient Care(eScene.24) has a value "Yes"	
Multiple eScene.ResponderGroup elements containing	Warning	in case of a multiple eScene.ResponderGroup only one First	eScene.24
eScene.03 and eScene.24 = Yes (9923003) should produce a	Warning	Other EMS or Public Safety Agency at Scene to Provide Patient	
warning.		Care(eScene.24) can be recorded as "Yes" all other First Other	
		EMS or Public Safety Agency at Scene to Provide Patient	
18		Care(eScene.24) should be recorded as "No"	



Dr. Carolina M. Gutierrez



Coverdell Measure Dashboard





Florida Stroke Registry EMS Dashboard

12 proposed measures reflecting a system of stroke care

Pre-Hospital (EMSTARS data)

- 1. % documentation of Last Know Well
- 2. % documentation of Blood Glucose
- 3. % documentation of Stroke Screen



"Acute Stroke Measures" (EMSTARS linked to GWTG-S acute stroke data)

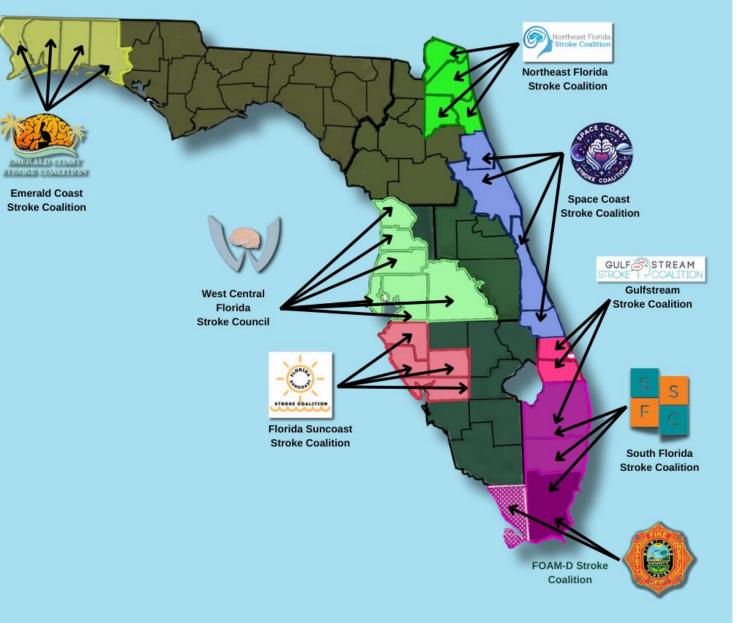
- % final diagnosis stroke (EMS Stroke Alerts compared to in-hospital stroke diagnosis) (AIS within 24 hrs)
- 2. % final diagnosis stroke that received IVT
- 3. % final diagnosis stroke that received EVT
- 4. % final diagnosis stroke that received Both
- 5. % final diagnosis stroke discharge HOME
- 6. % final diagnosis stroke discharge Rehab
- 7. % final diagnosis stroke Died In Hospital

Outcome Measures (EMSTARS linked to GWTG-S linked to AHCA

- 1. % final diagnosis stroke returned to hospital in 90 days
- 2. % final diagnosis stroke died in 90 days

Florida Stroke Registry EMS Dashboard proposed dissemination and application methods

- RALPHEL. SACCO CONTROL CONTR
- Timeline: Quarterly quality improvement reports composed local EMS blinded performance data
- Dissemination: In collaboration with BEMO, FSR will notify EMS medical directors of the latest report, code representing the blinded data (agency)
- Application: Suggested to be reviewed in local stroke coalition meetings
- Data-level: Recommended Agency-specific, blinded, benchmarked by the county/region and state
- Purpose: Collaborative review will enhance communication and data transparency between EMS and hospitals
- Contact us with feedback and suggestions- flstrokeregistry@miami.edu



Applied in Local Stroke Coalitions Recognized by the FSR

- FSR Regional Dashboards are provided only to hospitals and EMS systems participating in FSR recognized stroke coalitions (8 to date)
- County/Region-specific hospital reperfusion performance measures are displayed side-by-side allowing comparison across (blinded) local stroke centers and benchmarked by neighboring counties and the state.





Ema<mark>il: <u>flstrokeregistry@miami.edu</u> Website: https://floridastrokecollaboration.org/</mark>





















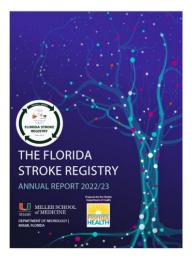








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Open Discussion - Mobile Stroke Unit Procedure/Med codes

Here are the CPT codes for items / care provided on the MSTU.

Head CT without contrast: 70450
PT w/INR: 85610
HgB: 85018
POCT Glucose: 82947
BMP: 80047

For the injections IV meds, would use one of the following CPTs, depending on what other (injectable) meds were given during the encounter: 96374, 96375, 96376.

 Intravenous infusion (procedure) SCTID: 14152002 	☆ ≞
Intravenous infusion of thrombolytic (procedure) SCTID: 307521008	☆ ≞
Computed tomography of head - without contrast (procedure) SCTID: 383371000119108	☆ ≞
 Laboratory blood sugar (procedure) SCTID: 166896004 	☆≛





Have you transitioned to V3.5?

61 agencies still on V3.4

3.4 NEMSIS timeline





V3.5 Implementation

Vendor State of Readiness

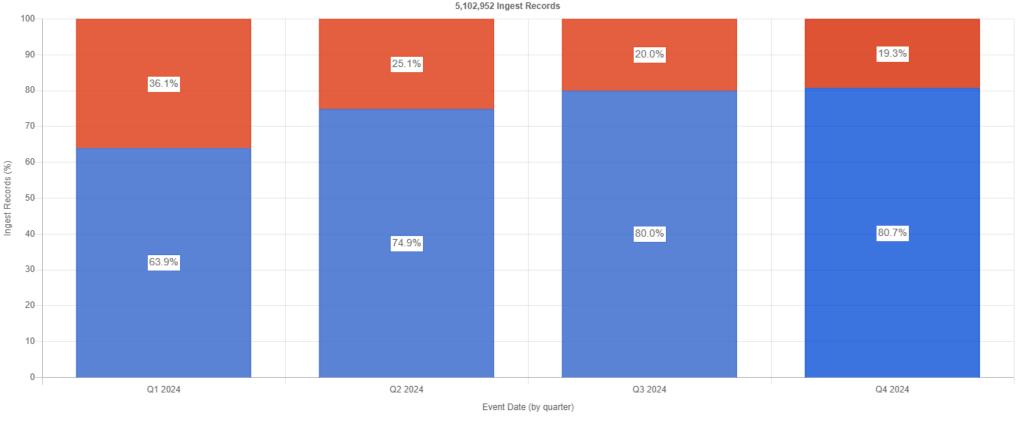
12 vendors validated to submit V3.5

Vendor	Validated	
ESO Solutions	Yes	
First Due	Yes	
Zoll -Rescue net	Yes	
Image Trend, Inc.	Yes	
Documed	Yes	
EMSCharts, Inc.	Yes	
SafetyPad		
American Medical Response		
Digitech	Yes	
EPR Systems USA Inc	Yes	
Truamasoft LLC	Yes	
Emergency Reporting		
Emergency Networking	Yes	
EMS Consultants Ltd.		
Cloud PCR LLC		
Metro pcr - Saffire Software	Yes	
Stryker formerly Physio-Control (Sansio)		
Creatie EMS		
FIREHOUSE Software, A Xerox Solution		
		la
Beyond Lucid	Yes	IH

Grant V3.5 Objective - Of those EMS Runs submitted to EMSTARS; Increase % of NEMSIS V3.5 or higher to 95% by December 2025.

EMISTARS





Ingest Records by Event Date Grouped by Data Source Version Event Date: 2024-Jan-01 to 2024-Dec-31

NEMSIS v3.5.0 NEMSIS v3.4.0





EMS Data Standard Versioning 10-Year Project Plan



Legend

Consensus: Stakeholders review and reach agreement on revisions. Software Build: Software developers create and release tools for the new version. Live: Version is complete, software is available, and data can be submitted to the TAC. Continuing to accept data: Records in this version are accepted by the TAC. Discontinued: Records in this version are no longer accepted by the TAC.

January 2023, supersedes previous drafts. Calendaring represents approximate start/end dates and should not be construed to represent a set schedule. Actual schedules will be developed as milestones approach. Last Updated: April, 2024

Type of Release

Informational Release: Includes corrections to the dictionary (e.g., typos, comments, update links). The release is "backwards compatible" (e.g., ePCR record generated in v3.5.0 is valid in v3.5.1).

Minor Release: Includes changes that are more permissive to the data standard (e.g., new optional elements or changing an error to a warning). The release is "backwards compatible".

Major Release: Includes changes that may be more restrictive (e.g., upgrading an element from state or optional to national). This release is NOT "backwards compatible" to the previous version.

Critical Patch: Corrects security or functionality that seriously compromises the daily function of the standard. Released as needed.

NEMSIS 3.5.1





What's in V3.5.1

New Elements	12	
Definition Change	15	
 New Field Value/code list/PN 	16	
 Field Description /Name 	3	
 Field Value Change 	4	Subcommittee Review
 Field Value Description 	7	Neview
Data Element Comment Change	7	
 Data Element Comment Change URL 	25	
 Pattern change 	4	Elevide

FIOY

New Element

dAgency.27 Add New Element

Description: Element number: dAgency.27 Element name: Licensed Agency



dAgency.27

NEMSIS Version 3.5.1.240801CR1

dAgency.27 - Licensed Agency

Definition

Indication if the agency is licensed by the state that issued the EMS Agency Number (dAgency.02).

National Element	No	Pertinent Negatives (PN)	No
State Element	No	NOT Values	No
Version 2 Element		Is Nillable	No
Usage	Optional	Recurrence	0:1

Code List

CodeDescription9923001No9923003Yes

Data Element Comment

Associated with each of the EMS Agency Number (dAgency.02).





dRecord.01

Add New Element

Description: Element number: dRecord.01 Element name: Software Creator



NEMSIS Version 3.5.1.240801CR1

dRecord.01

dRecord.01 - Software Creator

Definition

The name of the vendor who designed the application that created the record for the agency listed in dAgency02.

National Element		No	Pertinent Negatives (PN)	No
State Element		No	NOT Values	Yes
Version 2 Element			Is Nillable	Yes
Usage		Recommended	Recurrence	0:1
Attributes				
NOT Values (NV) 7701001 - Not Applicable 7701003 - Not Recorded				
Constraints				
Data Type string			axLength	
Data Element Comment				
This was added to decompart the setting would be accepted the Decomposition VML file. This is not the last a flower which sent				

This was added to document the software used to generate the Demographic XML file. This is not the last software which sent the demographic file from another software.





dRecord.02

Add New Element

Description: Element number: dRecord.02 Element name: Software name





dRecord.02

NEMSIS Version 3.5.1.240801CR1

dRecord.02 - Software Name

Definition

The name of the application used to create the record for the agency listed in dAgency.02.

National Element	No	Pertinent Negatives (PN)	No
State Element	No	NOT Values	Yes
Version 2 Element		Is Nillable	Yes
Usage	Recommended	Recurrence	0:1

Attributes

NOT Values (NV) 7701001 - Not Applicable

7701003 - Not Recorded

Constraints

Data Type string

minLength

maxLength 50

Data Element Comment

This was added to document the software used to generate the Demographic XML file. This is not the last software which sent the demographic file from another software.





dRecord.03

Add New Element

Description: Element number: dRecord.03 Element name: Software Version





dRecord.03

NEMSIS Version 3.5.1.240801CR1

dRecord.03 - Software Version

Definition

The version of the application used to create the record for the agency listed in dAgency.02.

No	Pertinent Negatives (PN)	No
No	NOT Values	Yes
	Is Nillable	Yes
Recommended	Recurrence	0:1
	No	No NOT Values Is Nillable

***	nh	1 11	00
LLI	IU	u	es

NOT Values (NV)
7701001 - Not Applicable

7701003 - Not Recorded

Constraints

Data 1	Гуре
string	

minLength

maxLength 50

Data Element Comment

This was added to document the software version used to generate the Demographic XML file. This is not the last software which sent the demographic file from another software.





eMedications.13

Add new element

Description: Element Number: eMedication.13 Element Name: Medication Administered by Another Unit



40



NEMSIS Version 3.5.1.240801CR1

State

eMedications.13

eMedications.13 - Medication Administered by Another Unit

Definition

Indicates the medication was administered by someone other than the EMS clinicians in this EMS unit. This is not for prior to arrival medications, but for medications administered when multiple units/caregivers are on scene simultaneously providing patient care.

National Element	No	Pertinent Negatives (PN)	No
State Element Yes		NOT Values	Yes
Version 2 Element		Is Nillable	Yes
Usage	Recommended	Recurrence	0:1
Attributes			
NOT Values (NV) 7701001 - Not Applicable 7701003 - Not Recorded			
Code List			
Code Description			
9923001 No 9923003 Yes			





eOutcome.21

Add New Element

Description:

Element number: eOutcome.21 Element name: Injury Severity Score

This is not for EMS Clinicians to complete. This would be a spot for the information to be populated by Information exchange. This would come from ER records, and be utilized by Trauma Registries, ACS, Traffic Data





eOutcome.21

NEMSIS Version 3.5.1.240801CR1

eOutcome.21 - Injury Severity Score

Definition

The patient's total Injury Severity Score.

National Element		No	Pertinent Negatives (PN)	No
State Element		No	NOT Values	No
Version 2 Element			Is Nillable	No
Usage		Optional	Recurrence	0:1
Constraints				
Data Type integer	minInclusive 0		maxInclusive 75	

Data Element Comment





Add New Element

Description: Element number: ePatient.23 Element name: Name Suffix





NEMSIS Version 3.5.1.240801CR1

ePatient.23 - Name Suffix

Definition

The patient's name component following family name that may be used to describe a person's position in a family.

National Element		No	Pertinent Negatives (PN)	No
State Element		No	NOT Values	No
Version 2 Elen	nent		Is Nillable	No
Usage		Optional	Recurrence	0:1
Constraints				
Data TypeminLengthmaxLengthstring150				
Data Element	Comment			



Data Element Comment



Add New Element

Description: Element number: ePatient.24 Element name: Patient's Preferred Language





NEMSIS Version 3.5.1.240801CR1

ePatient.24 - Patient's Preferred Language

minLength: 2

Definition

The patient's preferred language.

National Element	No	No Pertinent Negatives (PN) No	
State Element	No	NOT Values	No
Version 2 Element		Is Nillable	No
Usage	Optional	Recurrence	0 : M

maxLength: 255

Attributes

CorrelationID	
Data Type: string	

Code List

ı.	int			

Code	Description
amh	Amharic
ara	Arabic
arm	Armenian
ben	Bengali
crp	Cajun (Creole and Pidgins)

chi Chinese

47





eProcedures.14

Add New Element

Description: Element number: eProcedures.14 Element name: Airway Placement Technique





NEMSIS Version 3.5.1.240801CR1

State

eProcedures.14

eProcedures.14 - Airway Placement Technique

Definition

The manner/equipment used during the placement of the advanced airway.

National Element	No	Pertinent Negatives (PN)	No
State Element	Yes	NOT Values	Yes
Version 2 Element		Is Nillable	Yes
Usage	Recommended	Recurrence	0 : M

Associated Performance Measure Initiatives

minLength: 2

Airway

Attributes

NOT Values (NV) 7701001 - Not Applicable

7701003 - Not Recorded

CorrelationID

Data Type: string

maxLength: 255

Code List

- CodeDescription3914001Blind Digital Technique
- 3914003 Cross Finger Technique
- 3914005 Direct Laryngoscopy
- 3914007 Fiberoptic Laryngoscopy
- 3914009 Indirect Laryngoscopy
- 3914011 Video Laryngoscopy





eProcedures.15

Add New Element

Description: Element number: eProcedures.15 Element name: Procedure Performed by Another Unit





NEMSIS Version 3.5.1.240801CR1

eProcedures.15

State

eProcedures.15 - Procedure Performed by Another Unit

Definition

Indicates the procedure was performed by someone other than the EMS clinicians in this EMS unit. This is not for prior to arrival procedures, but for procedures performed when multiple units/caregivers are on scene simultaneously providing patient care.

National	Element	No	Pertinent Negatives (PN)	No
State Ele	ement	Yes	NOT Values	Yes
Version 2	2 Element		Is Nillable	Yes
Usage		Recommended	Recurrence	0:1
Attributes	S			
NOT Values (NV) 7701001 - Not Applicable 7701003 - Not Recorded				
Code Lis	t			
Code 9923001 9923003	Description No Yes			

Data Element Comment

This is the method to document when care is provided by others when multiple units are present at the scene.





eScene.25 Add New Element

Description: Element number: eScene.25 Element name: Transferred Patient/Care To/From Agency





NEMSIS Version 3.5.1.240801CR1

State

eScene.25

eScene.25 - Transferred Patient/Care To/From Agency

Definition

Whether primary responsibility for the care of the patient was transferred in the field to or from the EMS agency listed in eScene.02.

National Element	No	Pertinent Negatives (PN)	No
State Element	Yes	NOT Values	Yes
Version 2 Element		Is Nillable	Yes
Usage	Recommended	Recurrence	0:1

Attributes

NOT Values (NV)

7701001 - Not Applicable

7701003 - Not Recorded

Code List

- Code Description
- 2725001 Transferred Patient to Agency
- 2725003 Received Patient from Agency
- 2725005 No Transfer of Patient/Care To/From Agency





eVitals.34 Add New Element

Element number: eVitals.34 Element name: Stroke Severity Score



54



NEMSIS Version 3.5.1.240801CR1

State

eVitals.34 - Stroke Severity Score

Definition

The stroke severity value associated with the stroke scale type listed in eVitals.30.

2			
National Element	No	Pertinent Negatives (PN)	Yes
State Element	Yes	NOT Values	Yes
Version 2 Element		Is Nillable	Yes
Usage	Recommended	Recurrence	0:1
Associated Performance Measure Initiatives			
Stroke			
Attributes			
NOT Values (NV) 7701001 - Not Applicable 7701003 - Not Recorded			
Pertinent Negatives (PN) 8801023 - Unable to Complete			
Constraints			
Data Type minInclusi	ive ma 42	axInclusive	



Definition Change



Flement Number : dContact.16 Element Number : eArrest.14 Flement Number : eArrest.03 Element Number : eDispatch.03 Element Number : eDisposition.19 Element Number : eDisposition.20 Element Number : eDisposition.27 Element Number : eHistory.01 Element Number : eLabs.01

Element Number : eOther.19 Element Number : eOther.20 Element Number : eOther.21 Element Number : ePatient.15 Element Number : eScene.02 Element Number : eTimes.13



New Field Values



Flement Number : dPersonnel 13 Element Number : dPersonnel.20 Element Number : eAirway.08 Element Number : eArrest.14 Element Number : eDispatch.01 Element Number : eDisposition.14 Element Number : eDisposition.31 Element Number : eExam.13 Element Number : eExam.16

Element Number : eHistory.17 Element Number : eOther.06 Element Number : ePatient.14 Element Number : ePatient.15 Element Number : eProcedures.15 Element Number : eResponse.09 Element Number : eVitals.30



Field Value Change



Element Number : eAirway.08

Element Number : eLabs.03

Element Number : ePatient.15

Element Number : eSituation.18



Field Description Change



Element Number : dContact.16 Element Number : eDispatch.03 Element Number : eDisposition.19



Field Value Description Change

- Element Number : eArrest.09
- Element Number : eDisposition.30
- Element Number : eExam.24
- Element Number : eExam.25
- Element Number : eHistory.20
- Element Number : eLabs.05
- Element Number : eScene.04



Data Element Comment Change



Element Number : dAgency.04

Element Number : eDisposition.19

Element Number : eDisposition.20

Element Number : eOutcome.02

Element Number : ePayment.09

Element Number : eResponse.05

Element Number : eSituation.19



Data Element Comment URL Change



Element Number : dAgency.07 Element Number : dContact.09 Element Number : dPersonnel.08 Element Number : dPersonnel.13 Element Number : dPersonnel.14 Element Number : eArrest.01 Element Number : eArrest.10 Element Number : eArrest.20 Element Number : eArrest.21 Element Number : eArrest.22 Element Number : eDispatch.05 Element Number : eDisposition.08 Element Number : eOutcome.01

Element Number : ePatient.11 Element Number : ePatient.14 Element Number : ePayment.16 Element Number : ePayment.30 Element Number : ePayment.38 Element Number : eScene.02 Element Number : eScene.03 Element Number : eScene.22 Element Number : eScene.23 Element Number : eScene.24 Element Number : eSituation.13 Element Number : eSituation.14



Update Regex Pattern



Element Number : eSituation.09 Element Number : eSituation.10 Element Number : eSituation.11 Element Number : eSituation.12



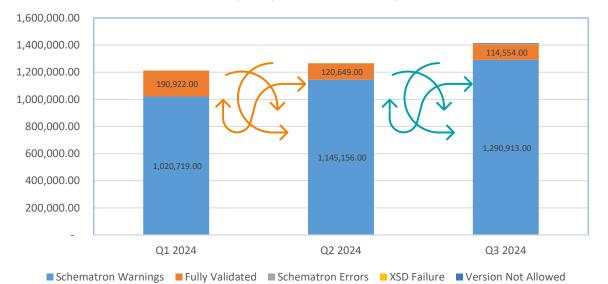
Continuing the Data Quality Focus







EMS Data Collection



Ingest Records by Submission Time Grouped by Validation Summary

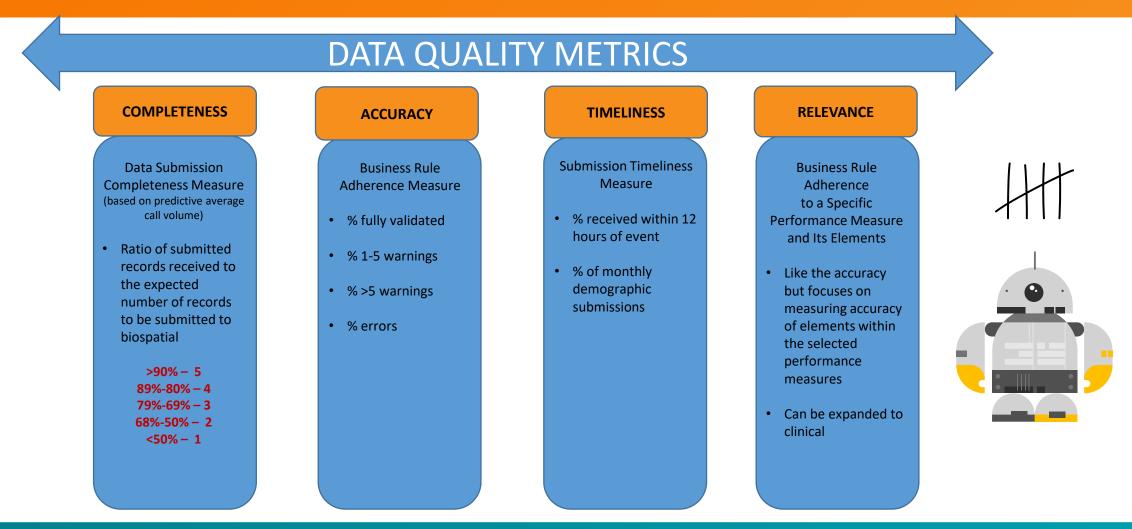
DATA CONCERNS

- Are we getting all the data?
- Is the data we are collecting correct?
- Is it valuable? Are we getting it on time?
- Can we make decisions based on this data?





Data Quality Improvement Efforts







Take Aways

- Low Validation scores
 - In some cases, state schematron not implemented
- Poor policy adherence to demographic data submissions
- Targeted data element issues
 in Coverdell measures





Next Steps

- Created regional views
- Regional coordinators to track
- What would you like to see????



NASEMSO Data Managers Council (DMC)

Blood Product Administration Documentation Best Practice Guidance Proposal Discussion

Blood product administration in out-of-hospital settings is gaining attention for its life saving potential.

Need for consistent and reliable data is necessary to fully capture its benefits in this setting.



How to Document Blood Product Administration

Step 1: Document blood products were given as a Procedure and complete corresponding Procedure elements

116859006Transfusion of blood product

Step 2: Document the specific blood product administered and complete the corresponding Medication elements

Transfusion of cryoprecipitate	Cry
Transfusion of fresh frozen plasma	Fre
Administration of albumin	Alb
Intravenous blood transfusion of platelets	Pla
Transfusion of whole blood	Wh
Transfusion of packed red blood cells	Pac
	Transfusion of fresh frozen plasma Administration of albumin Intravenous blood transfusion of platelets Transfusion of whole blood

Cryoprecipitate Fresh frozen plasma Albumin Platelets Whole blood Packed red blood cells (RBC)



Other Data Quality or coding issues

Ideas for next meeting?



Open Discussion

We appreciate your continued support.

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Meeting Participant List

