Northwest Community EMS System PBPI Monitor SHORT FORM REPORT QI AUDIT

| EMS Agency: | Month/Year: |
|---|---|
| Total # of Short Forms generated: | Reviewer: |
| The following data shall be entered on the Short Form unless an exception applies: nt unconscious | compative uncooperative unreliable historian cannot communicate |

| Date of call | Run No. | Pt info/ date/time Y/N/E | Chief comp Y/N/E | PMH, meds, allergies Y/N/E | PE & GCS Y/N | VS Y/N | ECG/ glucose/ oximetry prn Y/N/NA | Repeat after drugs /defib Y/N/NA | Rx rendered Y/N | Pt disposition Y/N | Crew members Y/N | Time in min. from EMS depart hospital to ePCR posted |
|--------------|---------|--------------------------------|------------------------|----------------------------------|--------------------|-----------|---|--|-----------------------|--------------------------|------------------------|--|
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| Total N: | | Υ | Υ | Υ | Υ | Υ | Υ | Υ | Υ | Υ | Υ | #≤2 hrs: |
| | | N | N | N | N | N | N | N | N | N | N | # >2 hrs: |
| | | Е | Е | Е | | | NA | NA | | | | |

Instructions:

IDPH requires that EMS agencies conduct QI reviews for all EMS paper short forms left at receiving facilities

Make a copy of the completed Short Form before giving original to receiving facility. EMS copy shall assist in generating the ePCR and for QI purposes

Reviewer will need to look up the posting time for the Image Trend ePCR and note if < or > 2 hours

Provide this report to the Resource Hospital EMS Office by the last day of the following month