

PCR Information Standard

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Introduction

The Pre-Hospital Emergency Care Council protects the public by independently specifying, reviewing, maintaining and monitoring standards of excellence for the delivery of quality pre-hospital emergency care for people in Ireland.

PHECC is charged under our Establishment Order (Statutory Instrument No. 109 of 2000).

(f) advise the Minister of the standards which should inform the education and training of emergency medical technicians in the State;

To fulfil this commitment PHECC develops and supports the national implementation of EMS information standards, associated patient reports and data completion standards across all PHECC recognised licenced providers; statutory, private, auxiliary and voluntary. The standards provide definitions for all of the data elements, data types and data domains in the patient reports completed by all licenced providers.

The benefits of good quality data include providing:

- Accurate information to enable informed decision making in the delivery of safe quality care (1).
- Documentary evidence to assist the practitioner meet his/her CPC requirements.
- Data for quality, robust clinical audit.
- Data to support the legal requirements under the Data Protection Acts (2).
- Data for research into pre-hospital skills, equipment and services (3).
- Data to support the development of Strategic Plans.

The Patient Care Report (PCR) Information Standard consists of data elements about the patient which include but are not exclusive to: name and address, date of birth, key provider response times to the patient, chief complaint, vital observations, clinical impression and care delivered.

Safe reliable care depends on access to and use of accurate reliable information. Here is a summary of data quality dimensions (4).

Completion Standard	Description
Accuracy and Factualness	Accurate data is an essential requirement of documentation. Pre-hospital emergency care practitioners and responders must capture data accurately and distinguish between what they observe and what the patient states.
Completeness	Complete data will have all of the information recorded of the interaction which occurred between the practitioner/responder and the patient.
Legibility	The data must be recorded legibly to enable a correct interpretation of the data.
Objectivity	Data must be recorded objectively and not include value judgements.
Timeliness	Data should be recorded real-time or as close to real-time as possible.
Validity	The data is collected in accordance with the data definitions recorded in the current information standard which applies to the patient report which is being completed.

1. Incident data

ID No.	Data Element	Data Domain	Definition	Data Type
1. Incide	nt data			
1.1	Date of call	Day Month Year	Specific day, month and year the call is received at EMS Control Centre. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric DD/MM/YYYY
1.2	Time of call	Hour Minute Second	Time recorded at the precise moment the call is connected to NEOC. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.3	Passed	Hour Minute Second	Time the dispatch details of the call are passed to the first appropriate emergency response. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.4	Mobile	Hour Minute Second	Time the first appropriate emergency response is mobile and on way to the scene. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Interfacility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.5	At scene	Hour Minute Second	Time of arrival of the first appropriate emergency response at scene. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.6	At patient	Hour Minute Second	Time of arrival of the first appropriate emergency response at the patient. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.7	Depart scene	Hour Minute Second	Time the patient departs the scene to travel to the hospital/destination facility. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.8	At destination	Hour Minute Second	Time patient arrives at hospital/destination facility. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.9	At handover	Hour Minute Second	Time of completed handover of patient at hospital/destination facility. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.10	Clear	Hour Minute Second	Time ambulance/vehicle, crew and equipment available to respond to another incident. (ref: Definitions to support PHECC EMS Priority Dispatch Standard and PHECC Inter Facility Transfer Standard)	Numeric 24hr clock HH:MM:SS
1.11	Destination	Code	Hospital destination code. (ref: PHECC Hospital/Destination facility codes for pre- hospital patient reports/Health Service Provider Identifier (HSPI) assigned to the healthcare organisation	Alphanumeric
1.12	Dispatch Classification Reference	Number range 1-37 Echo, Delta, Charlie, Bravo, Alpha or Omega Number range 1-9 Suffix code	Dispatch Classification advised (ref: Medical Priority Dispatch System)	Numeric Alphabetic



ID No.	Data Element	Data Domain	Definition	Data Type
1.13 Prio	rity response			
	Echo	Yes No	Priority response code advised (ref: Definitions to support PHECC Priority Dispatch Standard) by NEOC	Tick box
	Delta	Yes No		
	Charlie	Yes No		
	Bravo	Yes No		
	Alpha	Yes No		
	Omega	Yes No		
1.14 Inte	r facility patient transf	er		
	Inter facility patient transfer	Yes Ap P EMT FAR No	Transfer of a patient between facilities (hospitals or local injury units), must be carried out with due regard to patient clinical needs. (ref: current PHECC Inter Facility Patient Transfer Standard)	Tick box
	Hospital Clinical Escort	Yes MP RN M No		
	Non-Clinical Escort	Yes Healthcare- assistant Family- member Other No		
1.15 Pra	ctitioner PIN			
	Practitioner attending	PIN	PHECC Personal Identification Number (PIN)/Health Service Provider Identifier (HSPI) assigned to the PHECC practitioner or health professional engaged in the care of the patient	Numeric
	Practitioner supporting	PIN		Alphanumeric
	Other	PIN		
1.16 Stat	ion			
	Station code	Code	Station code allocated by PHECC to the individual pre-hospital emergency care service provider station locations. (Ref: PHECC Station Codes or Eircode as appropriate)	Alphanumeric



ID No.	Data Element	Data Domain	Definition	Data Type
1.1 <i>7</i> Inc	ident address			
	Incident address	Address of location of incident	Address to where the first appropriate response is dispatched in response to a phone call to EMS Control Centre	Alphanumeric entry Tick box if same as permanent address
	Incident Eircode	Code	Location code comprising of routing key and unique identifier	Alphanumeric
	Same as permanent address	Yes No		

1.17.1 Incident location

ideni localion			
Home	Yes No	Place of occurance of incident is classified under International Classification of Diseases, Australian Modification, Tenth Revision (ICD-10-AM Codes), External causes of morbidity and mortality. (u50-y98). Coded in combination with event and mechanism of injury	Tick box
Farm	Yes No		
Industrial place or premises	Yes No		
Recreation or sports place	Yes No		
Street or road	Yes No		
Public building	Yes No		
Residential institution	Yes No		
Other places	Yes No		
Other	Text		

1.18 Nature of assistance prior to arrival of practitioner

None	Yes No	Type of assistance given prior to arrival of EMS practitioner	Tick box
First Aid	Yes No		
Compression only CPR	Yes No		
CPR	Yes No		
AED	Yes No		
ALS	Yes No		

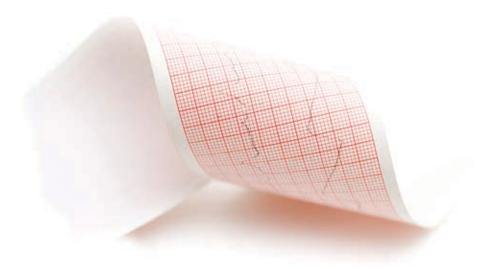


ID No.	Data Element	Data Domain	Definition	Data Type				
1.19 Identity of assistance prior to arrival of practitioner								
	Citizen	Yes No	Identity of individual providing assistance prior to arrival of EMS practitioner	Tick box				
	Responder	Yes No						
	Fire	Yes No						
	Garda	Yes No						
	Auxiliary	Yes No						
	Practitioner	Yes No						
	Other identity of assistance	Yes No						
	Other	Text						

1.19.1 Clinical level

No training	Yes No	Clinical level of individual providing assistance prior to arrival of EMS practitioner	Tick box
Unknown training	Yes No		
BLS/CFR	Yes No		
FAR/OFA	Yes No		
EFR	Yes No		
EMT	Yes No		
Paramedic	Yes No		
Advanced paramedic	Yes No		
Nurse	Yes No		
Doctor	Yes No		
Other	Yes No		
Other clinical level	Text		

ID No.	Data Element	Data Domain	Definition	Data Type
1.20 De	ad on arrival			
	Recognition of death	Yes No	Practitioner recognises death (ref: Current edition CPGs)	Tick box
	Cease resuscitation	Yes No	Practitioner ceases resuscitation (ref: Current edition CPGs)	
	Transported	Yes No	Patient is transported (ref: Current edition CPGs)	
1.21 Tre	eat Refer (TR)			
	Treat & immediate refer	Yes No	Treat and immediate referral for follow up care	Tick box
	Treat & recommend follow up <24 Hrs	Yes No	Treat and recommend for follow up care within 24 hours	
	Treat and refer self care with advice	Yes No	Treat and refer for self care with advice (ref: Current edition CPGs)	
.22 No	ot treated / not transport	ed (NTT)		
	Transport declined	Yes No	Transport declined by patient	Tick box
	Treatment declined	Yes No	Treatment declined by patient	
	Stood down	Yes No	Crew stood down by servcie provider	





2. Patient demographics

D No.	Data Element	Data Domain	Definition	Data Type
2.1 Uniqu	e identifier			
	Control Centre (CC)	Code	Licenced provider Control Centre Code (ref: PHECC Control Centre and Station Codes for pre-hospital reports)	Alpha Numeric
	Incident number	Incident number	The second element is the incident number. Sequential number generated for the incident by the licensed CPG provider (ref: PHECC Control Centre and station codes for pre-hospital reports)	Alphanumeric
	Vehicle call sign	Vehicle call sign	The third element is the vehicle call sign, This is the call sign or number allocated to specific vehicles within the licensed CPG providers. (ref: PHECC Control Centre and Station codes for pre-hospital reports)	Alphanumeric
	Patient number	A B C	The fourth elements indicate first, second or third patient, A, B or C in a possible multiple person incident travelling in the same ambulance. (ref: PHECC Command and Control Centre and Station codes for pre-hospital reports)	Alphanumeric
	Barcode number	Barcode number	Specific pre printed barcode Bar code number may be used in the absence of the Incident number	Not required
	СС	Code	Patient Care Report unique identifier comprises of 4 elements one of which is the EMS Control Centre Code. (ref: PHECC Control Centre and Station codes for pre-hospital reports)	Alphanumeric
2 Patier	nt demographics			
	Title	Dr Ms Mr Mrs Prof	A prefix added to a name	Tick box
	Surname	Surname	Their family name, surname, last name or marital name	Free text Alphabetic
	Forename	First name	The given name, first name or forename	
	Individual Health Identifier (IHI)	Code	A unique, non-transferable number assigned to all individuals using health and social care services	Alphanumeric
	Date of birth	Day Month Year	Specific day, month and year the patient was born	Numeric DD/MM/YYY
	Age	Age	Age of patient recorded in days, weeks, months or years as appropriate	Numeric
	Paediatric weight	Kilograms	Paediatric weight expressed in kilograms	Numeric
	Permanent address	Permanent address	Location of patient's permanent residence	Alphanumeric
	Eircode	Code	Location code comprising of routing key and unique identifier	Alphanumeric
	Gender	Male Female Intersex or Indetermined Not stated/ Inadequately described	Classification of sex of patient	Tick box M/F/I/U
	General Practitioner (GP)	Surname First name	Name of patient's GP	Alphabetic
	Next of kin	Surname First name	Name of patient's next of kin	Alphabetic



Numeric

Telephone number of next of kin

Telephone number of patient's next of kin

First name

Telephone

number

3. Patient clinical assessment

ID No.	Data Element	Data Domain	Definition	Data Type
3.1 Chie	f complaint			
	Patient chief complaint	Chief complaint	The presenting complaint which is the reason pre-hospital emergency care is being sought	Alphabetic
	Time of onset	Hour Minute	Time of onset of presenting complaint	24 hour HH:MM
	Date of onset	Day Month Year	Date of onset of presenting complaint	Numeric DD/MM/YYYY

3.2 Primary survey

ly solvey			
Airway clear	Yes No	Initial rapid assessment of airway to determine if any life threatening condition exists	Tick box
Airway partially obstructed	Yes No		
Airway obstructed	Yes No		
C Spine suspect	Yes No	Initial rapid assessment of C Spine to determine if life threatening condition exists	Tick box
C Spine not indicated	Yes No		
Breathing normal	Yes No	Initial rapid assessment of breathing to determine if life threatening condition exists	Tick box
Breathing abnormal	Yes No		
Breathing fast	Yes No		
Breathing slow	Yes No		
Breathing absent	Yes No		
Pulse present	Yes No	Initial rapid assessment of circulation to determine if life threatening condition exists	Tick box Numeric
Pulse regular	Yes No		
Pulse absent	Yes No		
Pulse irregular	Yes No		
Pulse rate	Measurement		
Skin normal	Yes No		
Skin pale	Yes No		



D No.	Data Element	Data Domain	Definition	Data Type
	Skin flushed	Yes No		
	Skin cyanosed	Yes No		
	Cap-refill <2sec	Yes No		
	Cap-refill >2sec	Yes No		
	Loss of consciousness before arrival	Yes No Unknown	Initial rapid assessment of level of consciousness to determine if life threatening condition exists	Tick box
	AVPU	Alert, Verbal, Painful or Unresponsive	Determination of responsiveness of patient	A, V, P, U
	Abrasion	Yes No	Brief account of findings for time critical/potentially time critical features including circulation, sensation, motion, Wallace Rule of Nines Burns calculation	Tick box Alphabetic on body image Numeric %
	Burn	Yes No		
	CSM RA/RL/LA/LL	Yes No		
	% burn	Yes No		
	Contusion	Yes No		
	Dislocation	Yes No		
	Fracture	Yes No		
	Pain	Yes No		
	Rash	Yes No		
	Swelling numbness	Yes No		
	Wound	Yes No		

ID No.	Data Element	Data Domain	Definition	Data Type
3.3 AMPLE	assessment			
	No known allergies	Yes No	Reported known drug and agent allergies if known	Tick box Free text Alphabetic
	Allergies unknown	Yes No		
	Free text	Text		
	Medications known	Yes No	Record of medications taken regularly if known or as recorded	Tick box Free text Alphabetic
	Medications unknown	Yes No		
	Medications as supplied	Yes No		
	Medications per doctor's letter	Yes No		
	Free text	Text		
	Past medical history known	Yes No	Past medical history reported by patient or relative if present or known	Tick box Alphabetic
	Past medical history unknown	Yes No		
	Past medical history per doctor's letter	Yes No		
	Past medical history per relative	Yes No		
	Last intake unknown	Yes No	Description of last food or drink consumed Time last food or drink consumed	Tick box Free text Alphanumeric 24 hour HH:MM
	Last intake description	Description		
	Last intake time	Hour Minute		
	Event	Event	Identify the activity of the patient at the time the incident occurred. (ref: ICD 10 AM, External causes of morbidity and mortality (u50-y98)). Event is coded in combination with place of occurence and mechanism of injury	Free text Alphabetic



э.	Data Element	Data Domain	Definition	Data Type
Mec	hanism of injury			
	Assault	Yes No	Mechanism by which injury occurred. (ref: ICD 10 AM, external causes of morbidity and mortality (u50-y98)). Coded in combination with place of occurrence and event	Tick box
	Attack/Bite by Animal/Insect	Yes No		
	Chemical poisoning	Yes No		
	Electrocution	Yes No		
	Excessive cold	Yes No		
	Excessive heat	Yes No		
	Fall	Yes No		
	Firearm injury	Yes No		
	Injury to child	Yes No		
	Machinery accidents	Yes No		
	MVA off road	Yes No		
	RTA Bicycle	Yes No		
	RTA Motorbike	Yes No		
	RTA Pedestrian	Yes No		
	RTA Vehicle	Yes No		
	Smoke, Fire Flames	Yes No		

Stabbing

Other

Other

Water transport accident

No

Yes No

Yes No

Yes No

Text

ID No.	Data Element	Data Domain	Definition	Data Type
3.4.1 Circ	umstances of injury			
	Accident	Yes No	Assessment of circumstances of incident. (ref: ICD 10 AM, external causes of morbidity and mortality (u50-y98)). Coded in combination with place of occurrence and activity	Tick box
	Event of undetermined intent	Yes No		
	Intentional self harm	Yes No		

3.4.2 Vehicle details

Rollover	Yes No	Vehicle details following car crash	Tick box and record: Arrow/X /≠≠ as appropriate on diagram Numeric
Helmet removal	Yes No		
Seatbelt	Yes No		
Trapped	Yes No		
Airbag deployed	Yes No		
Greater (>) than 20 min extrication	Yes No		
Fatality in vehicle	Yes No		
Estimated vehicle speed	Measurement		





4. Clinical status

ID No.	Data Element	Data Domain	Definition	Data Type
4.1 Clinic	cal status			
	Life threatening	Yes No	A clinical status decision following assessment by the practitioner where life is at risk in the immediate timeframe or a critical time frame	Tick box
	Serious not life threatening	Yes No	A clinical status decision following assessment by the practitioner where there is a serious but not life threatening risk to patient	
	Non serious or non life threatening	Yes No	A clinical status decision following assessment by the practitioner where the risk to life is not serious or not life threatening	

5. Vital observations

5.1 Vital observations

bservations			
Vital observation time 1	Hour Minute	Clinical indicators of current health status. Up to 4 instances of vital observations	24 hour HH:MM
Vital observation time 2 Hour Minute		recorded for times 1, times 2, times 3 and times 4	Numeric Alphabetic or tick box
Vital observation time 3	Hour Minute		
Vital observation time 4	Hour Minute		
Pulse rate	Measurement		
Rhythm	Short code - R (regular) Short code - 1 (irregular)		
Electrocardiograph (ECG) rate	Rate		
	Short code - NSR (Normal sinus rhythm)		
	Short code - SB (Sinus bradycardia)		
	Short code - ST (Sinus tachycardic	3)	
	Short code - PAC (Premature atrial contraction)		
	Short code - PVC (Premature ventricular contraction)		
	Short code - VT (Ventricular tachycardia)		
	Short code - JR (Junctional rhythm		
	Short code - SVT (Superventricular tachycardia)		
	Short code - AF (Atrial fibrillation Short code - AFL (Atrial flutter)		
	Short code - FHB (First degree heart block)		
	Short code - SHBT1 (Second degree heart block type 1)		

Data Element	Data Domain	Definition	Data Type
	Short code - SHBT2 (Second degree heart block type 2)		
	Short code - THB (Third degree heart block)		
	Short code - ASY (Asystole)		
	Short code - IDO (Idioventricular)		
	Short code - PEA (Pulseless electrical activity)		
	Short code - VF (Ventricular fibrillation)		
Respiratory rate	Respiration rate		
Respiratory quality	Short code - 1 (Normal respiration quality)		
	Short code - 2 (Laboured quality)		
	Short code - 3 (Shallow quality) Short code - 4 (Wheeze)		
	Short code - 5 (Creps)		
	Short code - 6 (Retract)		
	Short code - 7 (Absent)		
Peak expiratory flow rate	Measurement		
Percentage oxygen saturation (% SaO ₂)	Percentage		
Percentage end tidal carbon dioxide (% ETCO ₂)	Percentage		
Capillary refill	Measurement		
Blood pressure	Systolic measurement Diastolic measurement		
Temperature	Measurement		
National Early Warning Score	Measurement	Early warning scoring using defined parameters which indicate deterioration in acute patients (ref: current PHECC CPGs)	Numeric + / -
Pupil size	Measurement	Clinical indicators of patient current	Alphanumeric
Pupil reaction	Short code - + (Pupil reacts) Short code (Pupil does not react) Short code - C (Eyes closed)	health status	+ / -
Revised trauma score	Measurement	Injury severity score estimating the degree of injury and prognosis of a trauma patient (ref: current PHECC CPGs)	Numeric
Pain score	Measurement	Pain score of the patient's pain intensity as reported by them	Numeric
Blood glucose	Measurement	Numeric value in mmol/L as recorded by glucometer	Numeric



ID No.

ID No.	Data Element	Data Domain	Definition	Data Type	
5.1.1 Glas	gow Coma Scale				
	Eyes	Short code - 4 (Spontaneous eye response)	Clinical indicators of patient current health status	Numeric	
		Short code - 3 (Response to voice)			
		Short code - 2 (Response to pain)			
		Short code - 1 (No response)			
	Verbal	Short code - 5 (Orientated verbal response)			
		Short code - 4 (Confused verbal response)			
		Short code - 3 (Inappropriate words)			
		Short code - 2 (Incomprehensible sounds)			
		Short code - 1 (None)			
	Motor	Short code - 6 (Obeys)			
		Short code - 5 (Local pain)			
		Short code - 4 (Flexion to pain)			
		Short code - 3 (Abnormal flexion)			
	Short code - 2 (Extension to pa				
		Short code - 1 (None)			
5.2 FAST a	ssessment				
	Facial movement present	Yes No	Rapid assessment tool to assist in the early recognition of stroke (CVA)	Tick box	





Arm movement present on request

Speech difficult or slurred

Yes No

Yes No

6. Clinical impression

ID No.	Data Element	Data Domain	Definition	Data Type
6.1 Card	liac			
	Cardiac arrest	Yes No	An early clinical impression of the presenting illness/injury. (ref: ICD 10 AM)	Tick box
	Cardiac arrhythmia	Yes No		
	Cardiac chest pain	Yes No		
	Heart failure	Yes No		
	Other cardiac	Yes No		
6.2 Med	ical			
	Back pain	Yes No	An early clinical impression of the presenting illness/injury. (ref: ICD 10 AM)	Tick box
	Diabetes mellitus	Yes No		
	Fever	Yes No		
	Headache	Yes No		
	Hypothermia Other medical	Yes No Yes		
	Omer medical	No		
6.3 Neui	rological			
	Altered level of consciousness	Yes No	An early clinical impression of the presenting illness/injury. (ref: ICD 10 AM)	Tick box
	Seizures	Yes No		
	Stroke	Yes No		
	Other neurological	Yes No		
6.4 Obs	tetrics and or Gynaecol	ogical		
	Haemorrhage <24 wks	Yes No	An early clinical impression of the presenting illness/injury. (ref: ICD 10 AM)	Tick box
	Haemorrhage >24 wks	Yes No		
	Labour	Yes No		
	Post partum haemorrhage	Yes No		
	Pre-hospital delivery	Yes No		
	Other obs/Gynae	Yes No		



ID No.	Data Element	Data Domain	Definition	Data Type
6.5 Respir	atory			
	Asthma	Yes No	An early clinical impression of the presenting illness/injury. (ref: ICD 10 AM)	Tick box
	COPD	Yes No		
	FBAO	Yes No		
	Respiratory arrest	Yes No		
	Respiratory distress	Yes No		
	Smoke inhalation	Yes No		
	Other respiratory	Yes No		
6.6 Traum	a			
	Burns	Yes No	An early clinical impression of the presenting illness/injury. (ref: ICD 10 AM)	Tick box
	Dislocation/Sprain	Yes No		
	Fracture	Yes No		
	Haemorrhage	Yes No		
	Head injury	Yes No		
	Maxillo-facial injury	Yes No		
	Multiple trauma	Yes No		
	Shock	Yes No		
	Spinal injury	Yes No		
	Open wound	Yes No		
	Other trauma	Yes No		
6.7 Sepsis				
	Severe sepsis	Yes No	An early clinical impression of the presenting illness	Tick box
	Septic shock	Yes No	An early clinical impression of the presenting illness	Tick box

Data Element	Data Domain	Definition	Data Type
al			
Abdominal pain	Yes No	An early clinical impression of the presenting illness/injury. (ref: ICD 10 AM)	Tick box
Acute intoxication	Yes No		
Allergic reaction	Yes No		
Behavioural disorder	Yes No		
Illness unknown	Yes No		
Nausea / Vomiting	Yes No		
Poisoning	Yes No		
Syncope / Collapse	Yes No		
Other General	Yes No		

7. Care management

ID No. **6.8 Gen**

Basic airway management	Yes No	Airway care management intervention	Tick box
FB clearance magill forceps	Yes No		
Supraglotic airway	Yes No		
Pocket mask	Yes No		
BVM	Yes No		
Oxygen therapy	Yes No		
Intubation	Yes No		
CPAP therapy	Yes No		
Needle thoracocentesis	Yes No		
Cricothyroidotomy	Yes No		



ID No.	Data Element	Data Domain	Definition	Data Type			
7.2 Card	diac support						
	12 lead ECG	Yes No	Cardiac support care management intervention	Tick box			
	Active cooling	Yes No					
	Refer OHCA	Yes No					
7.3 Hae	morrhage control						
	Direct pressure	Yes No	Haemorrhage control management	Tick box			
	Pressure points	Yes No					
	Tourniquet use	Yes No					
7.4 Circ	7.4 Circulation support						
	Intravenous cannula	Yes No	Circulation support care management intervention	Tick box			
	Intraosseous cannula	Yes No					
7.5 lmm	obilisation and or extri	cation					
	Canvas sheet	Yes No	Immobilisation and extrication care management intervention	Tick box			
	Cervical collar	Yes No					
	Extrication device	Yes No					
	Log roll	Yes No					
	Long board	Yes No					
	Orthopaedic stretcher	Yes No					
	Rapid extraction	Yes No					
	Splint	Yes No					
	Spinal injury decision	Yes No					

ID No.	Data Element	Data Domain	Definition	Data Type			
7.6 Sepsi	7.6 Sepsis bundle						
	Oxygen therapy	Yes No	Sepsis bundle care management	Tick box and record data in medication			
	IV fluid	Yes No		treatment			
	Antibiotics	Yes No					
	Pre-alert	Yes No	If yes to pre-alert record name				

7.7 Miscellaneous

Active re-warming	Yes No	Miscellaneous care management intervention not listed previously	Tick box
Burns dressing	Yes No		
Minor injury	Yes No		
Other dressing	Yes No		
Positioning	Yes No		
Taser gun barb	Yes No		





8. Medication treatment

ID No.	Data Element	Data Domain	Definition	Data Type
8.1 Med	lications			
	Medications	Medication name	Medications available to pre-hospital practitioners as per current edition of PHECC CPGs	Alphanumeric
8.1.2 Ro	oute of administration	on of medication		
	Route	Short code - PO (oral)	Route of administered medication	Alphabetic
		Short code - INH (inhalation)		
		Short code - IN (intranasal)		
		Short code - SL (sublingual)		
		Short code - BU (buccal)		
		Short code - ETT (endotracheal Tube)		
		Short code - IM (intramuscular)		
		Short code - SC (subcutaneous)		
		Short code - 10 (intraosseous)		
		Short code - IV (intravenous)		
		Short code - PR (per rectum)		
3.1.3 Do	ose of medication fo	r administration		
	Dose	Measurement in addition to the following:	Unit of measurement of administered medication	Numeric Alphabetic

Short code - g (grams) Short code - L (litres)

Short code - mEq/L (milliEquivalent per litre)

Short code - % (percent)

Short code - mcg (micrograms)
Short code - Mg (milligrams)
Short code - mL (millilitres)

8.1.4 Time	8.1.4 Time of medication administration						
	Time	Hour Minute	Time medication administered	24 hour entry HH:///M			
	PIN	Practitioner Pin/HSPI	PHECC Personal Identification Number (PIN)/Health Service Provider Identifier (HSPI) assigned to the PHECC practitioner or health professional engaged in the care of the patient	Numeric			

9. Continuity of care

ID No.	Data Element	Data Domain	Definition	Data Type
9.1 Han	dover			
	Handover	Yes No	Record if patient handover received from practitioner/s engaged in the care of the patient, time and PIN	Tick box Numeric entry 24 hour entry HH:MM
	Time of continuity of care	Hour Minute	palierii, iirile aria FiiN	
	PIN	PIN		
9.2 Inter	vention			
	Intervention	Yes No	Record if care administered by a practitioner who is not the principal care giver, time and PIN. Record care administered in care	Tick box Numeric entry HH:MM
	Time of intervention	Hour Minute	management and PIN	1111.77000
	PIN	PIN		
9.3 Assu	uming clinical lead			
	Assuming clinical lead	Yes No Hour Minute PIN	Record if clinical lead handed over/not handed over to a person of a higher clincal level	Tick box Numeric entry 24 hour entry HH:MM
9.4 Reli	nquishing clinical lead			
	Relinquishing clinical lead	Yes No Hour Minute PIN	Record if clinical lead handed over/not handed over to a person of a higher clincal level	Tick box Numeric entry 24 hour entry HH:MM
10. C	linical audit			

10.1 Clinical audit			
Clinical audit	Yes No	Determine if the patient incident requires systematic review	Tick box

11. Decline treatment and or refusal of transport

11.1 Decline treatment and or re	efusal of transport	•	
Understanding of clinical situation	Yes No	Determination of patient decision making capacity to reject treatment and or transport and to make an alternative care plan	Tick box
Appreciation of applicable risk	Yes No	and to make an alternative care plan	
Ability to make alternative care plan	Yes No		

12. Out-of-hospital cardiac arrest data

12.1 History of coronary disease						
History of coronary disease	Yes No Unknown	History of coronary artery disease present	Tick box			



ID No.	Data Element	Data Domain	Definition	Data Type
12.2 Ch	est pain			
	Time of chest pain	Hour Minute	Time or best estimate of time of chest pain	24 hr clock HH:MM Tick box
12.3 Co	llapse			
	Time of collapse	Hour Minute		
	Collapse witnessed	Yes No	Record of collapse seen or heard	Tick box
	Civilian	Yes No	Category of witness of collapse and clinical level	Tick box Alphabetic
	Responder	Yes No		
	Fire	Yes No		
	Garda	Yes No		
	Auxiliary/Voluntary	Yes No		
	Practitioner	Yes No		
	Other	Yes No		
	Other	Text		

12.3.1 Witness clinical level

No training	Yes No	Clinical level of witness of collapse	Tick box Alphabetic
Unknown training	Yes No		
CFR/BLS	Yes No		
FAR/OFA	Yes No		
EFR	Yes No		
EMT	Yes No		
Paramedic	Yes No		
Advanced paramedic	Yes No		
Nurse	Yes No		
Doctor	Yes No		
Other	Yes No		
Other	Text		

ID No.	Data Element	Data Domain	Definition	Data Type
12.4 Che	st compressions			
	Chest compressions commenced	Yes No	Record of commencement of chest compressions	Tick box

12.4.1 Who commenced chest compressions

Civilian	Yes No	Category of person who commenced chest compressions and clinical level	Tick box Alphabetic
Responder	Yes No		
Fire	Yes No		
Garda	Yes No		
Auxiliary/Voluntary	Yes No		
Practitioner	Yes No		
Other	Yes No		
Other	Text		

12.4.2 Clinical level of person who commenced chest compressions

No training	Yes No	Clinical level of person who commenced chest compressions	Tick box Alphabetic
Unknown training	Yes No		
CFR/BLS	Yes No		
FAR/OFA	Yes No		
EFR	Yes No		
EMT	Yes No		
Paramedic	Yes No		
Advanced paramedic	Yes No		
Nurse	Yes No		
Doctor	Yes No		
Other	Yes No		
Other	Text		



ID No.	Data Element	Data Domain	Definition	Data Type
	Time chest compressions commenced	Hour Minute	Time or best estimate of time chest compressions commenced	24 hr clock HH:MM Tick box entry
	Total duration of chest compressions	Hour Minute	Time or best estimate of duration of chest compressions	
	Mechanical Cardiopulmonary Resuscitation device?	Yes No	Mechnical CPR was /was not used	
12.5 Init	tial arrest rhythm			
	Initial rhythm	Shockable Unshockable	Was initial rhythm a shockable rhythm	Tick box
	Specify rhythm	Ventricular fibrillation	What was first cardiac rhythm recorded	Free text
		Ventricular tachycardia	prior to defibrillation	Alphabetic
		Unknown rhythm - shock advised		
		Unknow rhythm - no shock advised		
		Asystole		
		Pulseless electrical activity		
	Time first rhythm analysis	Hour Minute	Time or best estimated first cardiac rhythm recorded prior to defibrillation	24 hour HH:MM

12.6 Defibrillator pads

Manual Automated External Defibrillator (AED)	Yes No	Manual AED use	Tick box
Defibrillator pads applied	Yes No	Record of application of defibrillator pads	Tick box

12.6.1 Who first applied defibrillator pads

Civilian	Yes No	Category of person who applied defibrillator pads	Tick box Alphabetic
Responder	Yes No		
Fire	Yes No		
Garda	Yes No		
Auxiliary/Voluntary	Yes No		
Practitioner	Yes No		
Other	Yes No		
Other	Text		

10.11	B. El .		D () W	D. T
ID No.	Data Element	Data Domain	Definition	Data Type
12.6.2 Cli	nical level ot person w	rho first applied defibrillator		
	No training	Yes No	Clinical level of person who first applied defibrillator pads	Tick box Alphabetic
	Unknown training	Yes No		
	CFR/BLS	Yes No		
	FAR/OFA	Yes No		
	EFR	Yes No		
	EMT	Yes No		
	Paramedic	Yes No		
	Advanced paramedic	Yes No		
	Nurse	Yes No		
	Doctor	Yes No		
	Other	Yes No		
	Other	Text		
12.7 Shoc	k			
	Was shock advised	Yes No	When defibrillator pads applied was shock advised by defibrillator	Tick box
	Was shock delivered	Yes No Unknown No shock advised	When defibrillator advised shock, was shock delivered	Tick box
	Defibrillator malfunction	Yes No	Record of malfunction of defibrillator	Tick box
12.7.1 W	no delivered first shocl	<u> </u>		
	Civilian	Yes No	Category of person who delivered first shock	Tick box
	Responder	Yes No		
	Fire	Yes No		
	Garda	Yes No		
	Auxiliary/Voluntary	Yes No		
	Practitioner	Yes No		
	Other	Yes No		



ID No.	Data Element	Data Domain	Definition	Data Type
12.7.2 C	linical level of person w	vho delivered first shock		
	No training	Yes No	Clinical level of person who delivered first shock	Tick box Alphabetic
	Unknown training	Yes No		
	CFR/BLS	Yes No		
	FAR/OFA	Yes No		
	EFR	Yes No		
	EMT	Yes No		
	Paramedic	Yes No		
	Advanced paramedic	Yes No		
	Nurse	Yes No		
	Doctor	Yes No		
	Other	Yes No		
	Other	Text		
	Total number of shocks	Number	Total number of shocks delivered or best estimate of total number of shocks given	Numeric
	Time first shock delivered	Hour Minute	Time first shock delivered	24 hr clock HH:MM
12.8 CPR	l in progress when tran	sporting		
	CPR in progress on transfer to hospital	Yes No	Patient transferred to hospital while CPR in progress	Tick box
12.9 Doc	tor in attendance			
	Doctor in attendance	Yes No	Doctor in attendance	Tick box
12.10 Re	turn of spontaneous ci	rculation (ROSC)		
	ROSC at any stage	Yes No	ROSC returned at any stage during the cardiac incident	Tick box
12.10.1	Person who first achiev	red return of spontaneous cir	rculation (ROSC)	
	Civilian	Yes No	Category of person who first achieved ROSC	Tick box
	Responder	Yes No		
	<u> </u>			



ID No.	Data Element	Data Domain	Definition	Data Type
	Fire	Yes No		
	Garda	Yes No		
	Auxiliary/Voluntary	Yes No		
	Practitioner	Yes No		
	Other	Yes No		

12.10.2 Clinical level of person who first achieved spontaneous circulation (ROSC)

No training	Yes No	Clinical level of person who first achieved ROSC	Tick box Alphabetic
Unknown training	Yes No		
CFR/BLS	Yes No		
FAR/OFA	Yes No		
EFR	Yes No		
EMT	Yes No		
Paramedic	Yes No		
Advanced paramedic	Yes No		
Nurse	Yes No		
Doctor	Yes No		
Other	Yes No		
Other	Text		
Time of ROSC	Hour Minute	Time of Return of Spontaneous Circulation (ROSC)	24 hr clock HH:MM
Spontaneous circulation on arrival in ED	Yes No	Spontaneous circulation on arrival in ED	Tick box

12.11 Cardiac First Response Report completed

CFR Report completed Yes No		Report completed and handed over NS practitioner	Tick box
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13. References

- (1, 3) Pre-Hospital Emergency Care Council. (2007) Patient Care Report Guidebook: For Pre-Hospital Emergency Care, 2nd ed., Kildare: Pre-Hospital Emergency Care Council.
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- (4) Health Information and Quality Authority. (2013) National Standard Demographic Dataset and Guidance for use in health and social care settings in Ireland, Dublin: Health Information and Quality Authority.

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