



# OKEMSIS Data Dictionary

(NEMESIS Version 3.5, OKEMSIS Version 3.5)

## Oklahoma EMS Data Standard for Patient Care Reports

Oklahoma Version Date: May, 2024



## ***OKEMSIS Database Usage and Guidelines***

OKEMSIS (Oklahoma EMS Information System) is the secure repository for all EMS run data required by the State of Oklahoma, OKEMSIS - Oklahoma Emergency Medical Services Information System. Data is entered into OKEMSIS using run forms available on the website, XML file (imports), or field-bridge. Below are some database usage guidelines and recommendations. For additional information see [SUBMISSION GUIDELINES/ REQUIRED ENTRIES INTO OKEMSIS](#).

1. New EMS Services must call Emergency Systems at (405) 426-8480 to set up an OKEMSIS account after they have received their state license.
2. Data is due on a monthly basis and is required to be submitted by the last business day of the following month (ex., January is due by the end of February). Early data submission is strongly encouraged.
3. Each service is required to have a "Service Administrator" who has access to all runs, is able to enter/delete runs, add/inactivate staff, manage staff account permissions, review quality control, and manage some agency information. Each service should have no more than two service administrators (see [Permission Levels in OKEMSIS](#)).
4. If the EMS service changes service administrators, the service chief must notify (through e-mail) Emergency Systems ([eSystems@health.ok.gov](mailto:eSystems@health.ok.gov)) before access is given to the new administrator.
5. Each EMS service has access to their data, but not any other service. De-identified EMS data can be requested through a formal request/e-mail to Emergency Systems at [eSystems@health.ok.gov](mailto:eSystems@health.ok.gov). All data requests must be approved by the Oklahoma State Department of Health.
6. EMS services are responsible for entering the required service demographic data in their service set up in OKEMSIS.
7. All staff that perform runs must be entered into OKEMSIS even if a service imports their data through a third-party vendor.
8. If a staff member leaves the agency, i.e. quits or is fired, the service administrator needs to inactivate the person immediately. If there are runs still being entered for that person, the administrator can keep them active but "lock" their access to the OKEMSIS database. Deletion of staff is not recommended; it will result in their name being erased from all runs they participated in.
9. Staff's accounts are inactive for 3 months will be inactivated. Services must call Emergency Systems to re-activate staff.
10. All staff are required to have their first and last names, e-mail address, state EMS certification ID, and State or National Licensure Level entered in OKEMSIS. The primary contact or Service Chief needs to be indicated.
11. Do not use another person's username or password to log into OKEMSIS. Each person that needs access to OKEMSIS must be given their own account. Third party vendors also need their own username and password.



## **SUBMISSION GUIDELINES/REQUIRED ENTRIES INTO OKEMSIS**

If a ground or air unit leaves their station for a call into or out of Oklahoma, statute requires that the call information be entered into OKEMSIS. If the air or ground ambulance never leaves the station, the run should not be entered into OKEMSIS.

The information below details the related statutes and regulations concerning which types of runs are required to be entered into OKEMSIS.

### **§63-1-2511 Commissioner – Powers and Duties**

Paragraph 6 states: *“Develop a standard report form which will be used by local, regional and statewide emergency medical services and emergency medical systems to facilitate the collection of data related to the provision of emergency medical and trauma care. The Commissioner shall also develop a standardized emergency medical services data set and an electronic submission standard. Each ambulance service shall submit the information required in this section at such intervals as may be prescribed by rules promulgated by the State Board of Health.”*

The “data set” referred to above is established and includes the information in question. These forms need to be completed accurately and in their entirety. The data set has been established by many public hearings, sub-committees and the Oklahoma Emergency Response Systems Development Advisory Council approvals.

Further, the Oklahoma Administrative Code [OAC] has some language promulgated from the enabling legislation.

**OAC 310:641-3-160(a)(1)(B)** states: *“All run reports shall contain administrative, legal, medical, community health and evaluation information required by the Department.”* Required by the Department refers to the “Data Set” mentioned above.

**OAC 310:641-3-160(b)** states: *“The standardized data set and an electronic submission standard for EMS data as developed by the Department shall be mandatory for each licensed ambulance service. Reports of the EMS data standard shall be forwarded to the Department by the last business day of the following month.”*

Refusals and DOA’s, cancelled calls, and all other administrative, legal, medical, community health and evaluation information, are part of the standardized data set that is required by law.



## Permission Levels in OKEMSIS

<b>Permission Level</b>	<b>Permissions</b>	<b>Recommendation</b>
Ambulance Service Administrator	Gives access to all agency runs entered into OKEMSIS no matter which EMT enters it (including QA/QI, reports, etc.). Highest access to the EMS Services.	Recommended to have no more than 2 administrators per service.
Agency Admin	Gives access to all agency runs entered into OKEMSIS, as well as CQI and Report Writer access.	This permission level recommended for agency administrative support.
Ambulance Service Provider	Gives the EMT access to runs associated with their name only (runs they have entered or their name is on).	This permission level recommended for EMTs that only enters the runs.
Billing	Gives access to view/print the entire run including patient identifiable information. No other access is given here.	This permission level recommended for billing company or software.
CQI Permissions	Gives access to CQI modules.	This permission level is recommended for agency CQI and clinical coordinators.
Report Writer Access	Gives access to pull reports only.	This permission level is recommended for any EMT/employee of the EMS service that only pulls reports.
Vendor	Gives access to vendor to import runs only.	This permission level should be given to all vendors unless they perform other functions, such as billings.

## **NEMSIS Version 3 Demographic Dataset Submission**

NEMSIS v3 requires that the first data submission for v3 be a demographic submission. The table below lists the required elements for each regular data submission (dark green) by the EMS agency and all required demographic elements (blue). These demographic elements are required to be updated at least once a year, or as changes occur, by the EMS service. Emergency Systems will submit the data to NEMSIS. All demographic elements are found in your service set-up in OKEMSIS and are not required for every data submission (with exception for dAgency.01-.04).

<b>NEMSIS Version 3 Demographic Dataset Submission</b>		
<b>V3 Element #</b>	<b>V3 Element Title</b>	<b>Submission Requirements</b>
dAgency.01	EMS Agency Unique State ID	Every EMS XML File
dAgency.02	EMS Agency Number	Every EMS XML File
dAgency.04	EMS Agency State	Every EMS XML File
dAgency.05	EMS Agency Service Area States	Initially, Annually, and As Updated
dAgency.06	EMS Agency Service Area County(s)	Initially, Annually, and As Updated
dAgency.07	EMS Agency Census Tracts	Initially, Annually, and As Updated
dAgency.08	EMS Agency Service Area ZIP Codes	Initially, Annually, and As Updated
dAgency.09	Primary Type of Service	Initially, Annually, and As Updated
dAgency.11	Level of Service	Initially, Annually, and As Updated
dAgency.12	Organization Status	Initially, Annually, and As Updated
dAgency.13	Organizational Type	Initially, Annually, and As Updated
dAgency.14	EMS Agency Organizational Tax Status	Initially, Annually, and As Updated
dAgency.15	Statistical Calendar Year	Initially, Annually, and As Updated
dAgency.16	Total Primary Service Area Size	Initially, Annually, and As Updated
dAgency.17	Total Service Area Population	Initially, Annually, and As Updated
dAgency.18	911 EMS Call Center Volume per Year	Initially, Annually, and As Updated
dAgency.19	EMS Dispatch Volume per Year	Initially, Annually, and As Updated
dAgency.20	EMS Patient Transport Volume per Year	Initially, Annually, and As Updated
dAgency.21	EMS Patient Contact Volume per Year	Initially, Annually, and As Updated
dAgency.25	National Provider Identifier	Initially, Annually, and As Updated
dAgency.26	Fire Department ID Number	Initially, Annually, and As Updated
dConfiguration.01	State Associated with the Certification/Licensure Levels	Initially, Annually, and As Updated
dConfiguration.02	State Certification Licensure Levels	Initially, Annually, and As Updated
dConfiguration.03	Procedures Permitted by the State	State to NEMSIS Database - Initially, Annually, and As Updated
dConfiguration.04	Medications Permitted by the State	State to NEMSIS Database - Initially, Annually, and As Updated
dConfiguration.05	Protocols Permitted by the State	State to NEMSIS Database - Initially, Annually, and As Updated
dConfiguration.06	EMS Certification Levels Permitted to Perform Each Procedure	Initially, Annually, and As Updated
dConfiguration.07	EMS Agency Procedures	Initially, Annually, and As Updated



## NEMESIS Version 3 Demographic Dataset Submission

<i>V3 Element #</i>	<i>V3 Element Title</i>	<i>Submission Requirements</i>
dConfiguration.08	EMS Certification Levels Permitted to Administer Each Medication	Initially, Annually, and As Updated
dConfiguration.09	EMS Agency Medications	Initially, Annually, and As Updated
dConfiguration.10	EMS Agency Protocols	Initially, Annually, and As Updated
dConfiguration.11	EMS Agency Specialty Service Capability	Initially, Annually, and As Updated
dConfiguration.13	Emergency Medical Dispatch (EMD) Provided to EMS Agency Service Area	Initially, Annually, and As Updated
dConfiguration.15	Patient Monitoring Capability(s)	Initially, Annually, and As Updated
dConfiguration.16	Crew Call Sign	Initially, Annually, and As Updated





## ***OKEMSIS Database Usage-Third Party Vendors (Importing)***

For EMS services who import their run data into OKEMSIS through XML file or field bridge, there is a list of elements that each run must include (non-nillable, cannot be blank, and Not Values not acceptable). **All appropriate elements in the data dictionary are mandatory** but the following elements must have a valid answer in order for the file to import into the system. **If any one of the below elements do not have a valid answer, the whole XML file will fail to import.** The table below is a list of these mandatory, non-nillable elements.

<b><i>Element Description</i></b>	<b><i>OKEMSIS v3 Element Number</i></b>
EMS Agency Unique State ID (Header)	dAgency.01
EMS Agency Number (Header)	dAgency.02
EMS Agency State (Header)	dAgency.04
Crew Member ID	eCrew.01
Crew Member Level	eCrew.02
Crew Member Response Role	eCrew.03
Complaint Reported by Dispatch	eDispatch.01
Unit Disposition	eDisposition.27
EMS Transport Mode	eDisposition.16
Patient Care Report (PCR) Number (Header)	eRecord.01
Software Creator (Header)	eRecord.02
Software Name (Header)	eRecord.03
Software Version (Header)	eRecord.04
EMS Agency Number	eResponse.01
EMS Response Number	eResponse.04
Type of Service Requested	eResponse.05
Primary Role of the Unit	eResponse.07
Type of Dispatch Delay	eResponse.08
Type of Response Delay	eResponse.09
EMS Vehicle (Unit) Number	eResponse.13
EMS Unit Call Sign	eResponse.14
Level of Care of This Unit	eResponse.15
Response Mode to Scene	eResponse.23
Incident Location Type	eScene.09
Incident Street Address	eScene.15
Incident City	eScene.17
Incident State	eScene.18
Incident Zip Code	eScene.19
Incident County	eScene.21
EMS Dispatch Notified Date/Time	eTimes.02





<b>Element Description</b>	<b>OKEMSIS v3 Element Number</b>
Unit Notified by Dispatch Date/Time	eTimes.03
Unit En Route Date/Time	eTimes.05
Patient Care Report Narrative	eNarrative.01

### **Destination/Incident Facility Lists**

Incident Facility Code (eScene.10) and Destination Transferred To Code (eDisposition.02) utilize the same list of codes for Oklahoma facilities, based off emergency room encoder numbers. Out of state facilities have a generic number assigned by Emergency Systems staff and will only be added to the code list if they are regularly utilized by Oklahoma EMS services. If a vendor has a destination not on the OKEMSIS code list then that code needs to be mapped to one of the appropriate generic codes on the OKEMSIS list. Vendors must match their incident/destination codes with the OKEMSIS code list or that file will be rejected. A list of OKEMSIS incident/destination codes can be found in the [appendix](#) of this document.

### **Run Times and Time Zone**

In OKEMSIS, all times must be saved and submitted in Central Standard Time (CST). EMS services that import their data through a third-party vendor must have their run times in CST time in their XML file or field bridge software before they import into OKEMSIS. OKEMSIS will ask if your run times are in Zulu Time in the data exchange and if your times are in CST time, you say “NO” before you import. [Date and time formats](#) can be found in the appendix section.

### **Custom Codes/Elements**

Several state required (custom) elements have custom codes which are required in the OKEMSIS v3 dataset and are highlighted with that element. There are also several additional non-custom elements where custom codes have been added which are also required to be in the OKEMSIS v3 dataset: Type of Service Requested (eResponse.05), Procedures (eProcedures.03), Medication Administered (eMedications.03), Incident Location Type (eScene.09) and EMS Transport Mode (eDisposition.16).



# Definitions

## ***Unit Disposition***

**Patient Contact Made** – This crew/unit arrived on-scene and made contact with a patient.

**Cancelled on Scene** – This crew/unit arrived on-scene but was cancelled by another unit prior to having any potential patient contact or providing any services. An example scenario would be a first responder unit arrives, realizes they have a patient refusal as the transport unit arrives on scene and the first responder unit cancels the transport unit before they can do anything.

**Cancelled Prior to Arrival at Scene** – This crew/unit was cancelled before arriving on-scene, therefore it is unknown whether there could have been a patient or not.

**No Patient Contact** – This crew/unit arrived on-scene, but this crew/unit made no contact with a patient. Generally, this will mean a patient was present with another unit having patient contact, with this unit not having patient contact. This unit can still be providing rescue and support services to the incident in this case.

**No Patient Found** – This crew/unit arrived on-scene and looked for a patient, but none was found. The patient may have left the scene, or caller was mistaken and there never was a patient. For example, this unit may have been dispatched to an unconscious person, but arrived to find a college student just taking a nap on the lawn.

**Non-Patient Incident (Not Otherwise Listed)** – This crew/unit provided some sort of service that did not involve a patient. This type of incident could be a standby with no patient generated, organ transport, lift or public assist that was truly not a patient, or unit may have provided event command services.

## ***Patient Evaluation/Care***

**Patient Evaluated and Care Provided** – A patient was present, evaluated, and care was provided by this crew. This is the standard situation where a patient was present and cared for or “treated”, without refusal, by EMS.

**Patient Evaluated and Refused Care** – A patient was present and was evaluated by this crew, but the patient refused care. The patient may or may not be transported in combination with this value.

**Patient Evaluated, No Care Required** – A patient was present and was evaluated by this crew, but no care appeared to be required. Crews would need to evaluate someone in order to determine that no care was required. A classic example would be a patient only requiring a lift assist.



**Patient Refused Evaluation/Care** – A patient was present and refused any evaluation or care by this crew. This value should only be combined with “Patient Refused Transport” or “No Transport.”

**Patient Support Services Provided** – This unit provided support services to another crew/unit providing care. Support services could include extrication, carrying bags or helping to move a patient.

## ***Crew Disposition***

**Initiated and Continued Primary Care** – This crew began primary care for this patient with no previous care provided on-scene and did not transfer the care to another unit. Generally, this will be a one-unit response where there is only one crew responding and no other crew or unit was present. If multiple units from the same agency respond to an incident as an organized response and local rules do not require each unit to do a separate report, then this value would apply to the "agency" response of multiple units under one report. For transfers, "Primary Care" is considered to begin once crew receives responsibility for the patient and any care provided by the sending facility does not qualify as previous care for this value.

**Initiated Primary Care and Transferred to Another EMS Crew** – This crew began primary care for this patient with no previous care provided on scene and then transferred the care to another unit.

**Provided Care Supporting Primary EMS Crew** – Another crew started and continued primary care and this unit provided patient care supporting the primary crew’s care. For example, first responders arrived at the same time or later than the transport crew and helped provide care but were not the primary crew in charge of patient care.

**Assumed Primary Care from Another EMS Crew** – This crew assumed primary care of a patient that was initiated by another EMS Crew. This would commonly be used by an ALS intercept unit arriving and taking over primary care from a BLS unit.

**Incident Support Services Provided (Including Standby)** – This crew/unit provided non-patient care support services to an incident in general or to another unit/crew that is providing patient care. Support services could include extrication, carrying bags or equipment, helping move a patient, standby for police or a fire or fire rehab services where no one rose to the level of a patient.

**Back in Service, No Care/Support Services Required** – This crew/unit is immediately back in service as there was no patient care or support services required of the crew/unit at the incident. This would primarily apply if no patient was found or if the unit was cancelled on scene. Back in Service, Care/Support Services Refused.

**Back in Service, Care or Support Services Refused** – This crew/unit is back in service after patient care or support services were refused despite being offered. No

care or support services should be provided; however, an evaluation may have occurred prior to refusal of any care.

## ***Transport Disposition***

**Transport by This EMS Unit (This Crew Only)** – A patient was transported in this crew's unit by only this crew. This would be a standard ambulance transport. This should also be used if the crew transports the patient any distance to a helicopter or other EMS ground transport unit that subsequently transports to the final destination. In this case, the type of destination for this crew should be "Other EMS Air or Ground".

**Transport by This EMS Unit, with a Member of Another Crew** – A patient was transported in this crew's unit with this crew and member(s) of another crew. Common uses would be when the primary transport crew needs additional assistance from another crew during transport or when an intercepting ALS provider is on board.

**Transport by Another EMS Unit** – The patient was transported, but by another crew/unit. For example, a non-transport unit providing and transferring care to another crew/unit who then transports the patient. A destination for the transport should be listed so the receiving facility can access the non-transport EMS record.

**Transport by Another EMS Unit, with a Member of This Crew** – The patient is transported in another crew's unit with a member of this crew. This would be used when an ALS intercept provider transports in another crew's unit or this crew provides additional assistance to the other unit during transport.

**Patient Refused Transport** – Patient refused EMS transport. This would apply to a standard patient refusal of transport or when a patient was treated and chose to be transported by law enforcement or private vehicle.

**Non-Patient Transport (Not Otherwise Listed)** – A transport occurred but did not include a patient. This could include transport of organs, special equipment-such as bariatric equipment or an air crew to or from their aircraft without a patient.

**No Transport** – No transport for a patient occurred. For example, following a lift assist that did not require a refusal.

## ***Type of Service Requested***

**911 Response (Scene)** – Select if the EMS Agency responded to the scene of an emergency in its own jurisdiction, whether the caller used 911 or dialed direct to the EMS Agency dispatcher using a regular phone number. **Do not include transfers between acute care facilities.**

**Inter-Facility Transport, Emergent (911 Call)** – This is the correct value to enter if the EMS Agency transferred an **emergent** patient from an acute care facility such as an emergency department or urgent care center to another emergency department or



urgent care center. **Do not include transfers to or from nursing homes, long-term care facilities, residential facilities, or doctor's clinics.**

**Inter-Facility Transport, Non-Emergent (Routine)** – This is the correct value to enter if the EMS Agency transferred a *non-emergent* patient from an acute care facility such as an emergency department or urgent care center to another emergency department or urgent care center. **Do not include transfers to or from nursing homes, long-term care facilities, residential facilities, or doctor's clinics.**

**Medical Transport** – Select if the EMS Agency responded to a pre-hospital, **non-emergency transport**, which includes transports from a doctor's office, clinic, long-term care, residential care center, rehab center, nursing homes, etc., and to requests for medical transport to the emergency department. **Do not include transfers between acute care facilities.**

**Mutual Aid** – Select if the EMS Agency responded to the scene of an emergency outside its jurisdiction at the request of another EMS Agency.

**Standby** – Select for purposes of being available in case of a medical/traumatic emergency, such as sporting events, fires, or police action.

**Intercept** – Select when one EMS Provider is requested to meet another with the intent of receiving a patient. The destination code for the originating agency should be "2-Care Transfer to Another Ambulance Service" (code 444) and the Type of Service Requested should be "Intercept" for the intercept recipient agency.

**Public Assistance/Other Not Listed** – added for EMS expanded scope events such as elderly assistance, injury prevention, public education, immunization programs, etc.

### ***Incident Location Type (Selected Definitions)***

**Private Residence** – Any home or residence (not just the patient's home) including a farmhouse. Includes the yard, driveway, garage, pool, garden, or walk of a home, apartment, or residence.

**Institutional (nonprivate) residence** – Any residence other than private which includes mental institutions, drug rehab clinics, group homes, and half-way houses. **Does not include Healthcare facilities.**

**Farm** – NOT a farmhouse: a place of agriculture, including ranches, land under cultivation, and nonresidential farm buildings.

**Mine or Pit** – Includes sand pits, gravel pits and tunnels under construction.

**Athletic Field (Outdoor)** – Includes outdoor sports fields, courses, and sports stadiums. If the incident occurs on an indoor court, put "Athletic Court (Indoor)".





**Athletic Court (Indoor)** – Includes indoor sports courts, courses, and sports stadiums. If the incident occurs on an outdoor court, put “Athletic Field (Outdoor).”

**Street, highway and other paved roadways** – Any paved public street, road, highway, or avenue.

**Unspecified street and highway (including unpaved)** – Any paved or unpaved public street, road, or avenue not otherwise listed in the current list.

**Other specified public building** – Any publicly owned building and its grounds not otherwise specified in the current list.

**Trade or Service Area** – Any privately owned building used for business not otherwise stated in the current list - this ***excludes health care facilities***.

**Ambulatory Health Services Establishments** – This industry group comprises establishments, not classified to any other industry group, primarily engaged in providing ambulatory health care services, such as ambulance services, blood banks, blood donor stations, organ banks, blood pressure screening services, hearing testing services and physical examination services, except by health practitioners.

**Lake/River** – Any other body of water, including creeks. ***Does not include swimming pools.***

**Wilderness area** – Any state/federal wilderness or park area (example: Wichita Wildlife Refuge in Lawton, Oklahoma). ***Does not include neighborhood public parks.***

**Other Wilderness area** – Any wilderness or park area that doesn’t fit the definition of “Wilderness Area”. ***Does not include neighborhood public parks.***

## ***Patient Priority Status***

**Priority 1** – These are patients with high energy blunt or penetrating injury causing physiological abnormalities or significant single or multisystem anatomical injuries. They have time sensitive injuries requiring the resources of a designated Level I, Level II, or Level III Trauma Center. These patients should be directly transported to a Designated Level I, Level II, or Regional Level III facility for treatment. If needed, patients may be stabilized at a Level III or Level IV facility, depending on location of occurrence, and time and distance to the higher-level trauma center. These patients may be cared for in a Level III facility if the appropriate services and resources are available.

**Priority 2** – These are patients with potentially time sensitive injuries due to a high energy event (positive mechanism of injury) or with a less severe single system injury but currently with no physiological abnormalities or significant anatomical injury.

**Priority 3** – These patients are without physiological abnormalities, altered mentation, neurological deficit, or a significant single system injury that has been involved in a low



energy event. These patients should be treated at the nearest treating facility or the patient's hospital of choice. An example would be a same level fall with extremity or hip fracture.

## **EMS Transport Mode(s) - Examples**

**Air Medical-Fixed Wing** – If a Fixed Wing aircraft was the only EMS unit involved in the patient transport from the point of origin (scene) to the final destination (i.e., hospital, etc.) then choose this code (4216001).

**Air Medical-Rotor Wing** – If a Rotor Wing aircraft was the only EMS unit involved in the patient transport from the point of origin (scene) to the final destination (i.e., hospital, etc.) then choose this code (4216003).

**Ground-Ambulance** – If a Ground Ambulance was the only EMS unit involved in the patient transport from the point of origin (scene) to the final destination (i.e., hospital, etc.) then choose this code (4216005).

**Ground-to-Ground Transfer** – If a patient is transferred from a ground ambulance to another ground ambulance then choose this code (4216006).

**Ground-Rescue Vehicle-to-Ground Ambulance Transfer** – If a patient is transferred from a rescue vehicle (i.e., ATV, wheelchair van, etc.) to a ground ambulance then choose this code (4216008). *Rescue vehicles do **not** include air (fixed or rotor wing) or ground ambulances.*

**Ground-Rescue Vehicle-to-Air Ambulance Transfer** – If a patient is transferred from a rescue vehicle (i.e., ATV, wheelchair van, etc.) to an air ambulance (fixed or rotor wing) then choose this code (4216009). *Rescue vehicle **does not** include air (fixed or rotor wing) or ground ambulances.*

**Ground-to-Air Transfer** – If a patient is transferred from a ground ambulance to an air ambulance (fixed or rotor wing) then choose this code (4216018).

**Air-to-Ground Transfer** – If a patient is transferred from an air ambulance (fixed or rotor wing) to a ground ambulance then choose this code (4216019).

**Air-to-Air Transfer** – If a patient is transferred from an air ambulance (fixed or rotor wing) to another air ambulance then choose this code (4216020).

**Ground-to-Air-to-Ground Transfer** – If a patient is transferred from a ground ambulance to an air ambulance (fixed or rotor wing) to another ground ambulance then choose this code (4216021).

**No Transport** – If the EMS unit (ground or air) has no patient contact or the patient was not transported by the responding unit then choose this code (4216022). **NOTE:** If a ground ambulance responds to the scene and an air ambulance is called and arrives on





scene (patient not transported by ground ambulance vehicle, only patient care is transferred) then the ground ambulance would use the “No Transport” code while the air ambulance would use the code(s) 4216001 (fixed wing) or 4216003 (rotor wing).

## **Miscellaneous Definitions**

**Trauma** – Any event associated with an injury that can be labeled as a **Priority 1, 2 or 3 patient** according to the definitions assigned to each priority status. See **“Validation Rules-Trauma”** in the definitions to see Primary/Secondary Impression codes associated with Trauma.

**Validation Score** – A number between a negative number and 100, given to each EMS service call entered into OKEMSIS based on a set of rules called VALIDATION RULES. The optimum goal is to have a validation score of 100.

**Validation Rules** – A set of criteria based on the OKEMSIS data elements associated with a validation score. All data elements in OKEMSIS have an associated validation rule, based on Unit and Patient Evaluation/Cares Disposition, and other appropriate criteria. Validation rules are in the comments section under each element.

**High Energy Event** - Patients involved in rapid acceleration/deceleration events that absorb large amounts of energy are at an increased risk for severe injury despite normal vital signs on their initial assessment. Five to fifteen percent of these patients, despite normal vital signs and no apparent anatomical injury on initial evaluation, have a significant injury discovered after a full trauma evaluation with serial observations. Determinates to be considered are direction and velocity of impact and the use of personal protection devices. Motor vehicle crashes when occupants are using personal safety restraint devices may not be considered a high-energy event. Personal safety devices will often protect the occupant from absorbing high amounts of energy even when the vehicle shows significant damage.

**Oklahoma PCR #** - A unique number assigned to each service call that corresponds to the question number on the run form provided by OSDH Emergency Systems.

**Respiratory condition due to chemicals, gases, fumes and vapors incident (Provider Impression, eSituation.11, code J68.9)** - This is related to any respiratory condition due to exposure to chemicals, gases, fumes, or vapors *not related to drug use*.

**Inhalant Related Disorders (Provider Impression, eSituation.11, code F18)** - This is related to any respiratory condition due to exposure to chemicals, gases, fumes, or vapors *related to drug use*. One example includes patients who huff paint.

**Heavy Transport Vehicle (Cause of Injury Codes V69.3, V69.9)** - A heavy transport vehicle is defined as a motorized vehicle with three or more axles. An example would be a semi-truck with a trailer.



**Rolling-Type Pedestrian Conveyance Accident (Cause of Injury Code V00.1)** - An accident involving a non-motorized pedestrian conveyance which includes roller skates (inline included), skateboards, non-motorized wheelchairs, baby strollers, etc.

**\*Validation Rules: "Trauma"** - "Trauma" is associated with the Primary/Secondary Impression codes of S39.91, S90, S59.9, S39.94, S05, S09.9, S79.9, S06.9, S39.92, S89.9, S19.9, T14.90, S39.93, S49.9, S29.9, S69.9, P15.9, J94.2, J93.9, S06.0X9, and S06.0X0.

**\*\*Validation Rules: "Invasive Airway"** - "Invasive Airway" is associated with the Procedure Codes of 78121007, 429705000, 427753009, 424979004, 232679009, 232673005, 232692007, 232674004, 232689008, 232711005, 271280005, itSNOMED.001.

**\*\*Validation Rules: "Patient Contact"** - Codes associated with eDisposition.27 (Unit Disposition) with "Patient Contact Made".

**TReC (Trauma Referral Center)** - The trauma transfer and referral center (mainly region 7 and 8). See TReC Statute §63-1-2530.8, Rule OS 310:641-3-130.

**OKEMSIS Usage: Mandatory** - Element required to be in the Oklahoma dataset. Some mandatory elements for Oklahoma are optional in NEMSIS data dictionary but have to be included in the PCR for Oklahoma.

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Due to the dynamic nature of assessments during an EMS service call a specific set of assessments will not be required. What is required is that with any service call (or run) with patient contact *the appropriate patient assessment (trauma or medical) must be performed and the data submitted into OKEMSIS*. The eExam section must be included in your PCR but there will be no validation rules for the specific elements within this section. *A validation rule that requires a patient assessment has been applied*. A list of required eExam elements can be found in the [appendix](#) section of this document.

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**NOTE: Suggested code lists are updated as needed in Oklahoma. An updated suggested code list can be found here: [OSDH EMS Website](#) .**

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# *dAgency*

OKEMSIS ID: *dAgency.01*

Oklahoma PCR #: N/A

## EMS Agency Unique State ID

NEMSIS ID: *dAgency.01* – EMS Agency Unique State ID

### Definition

*The unique ID assigned to the EMS Agency is associated with all state licensure numbers and information.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	No	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Constraints

<u>Data Type</u>	<u>Min Length</u>	<u>Max Length</u>
String	1	50

### Data Element Comment/Validation Rules

*This may be the EMS Agency Name, or a unique number assigned by the state EMS office. This is required to document multiple license types and numbers associated with the same EMS Agency. This element is required in the header of the XML file for services that import their data with every file submitted. It is also required for every demographic submission.*

# EMS Agency Number

NEMSIS ID: *dAgency.02* – EMS Agency Number

## Definition

*The state-assigned provider number of the responding agency.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	D01_01	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

## NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

## Constraints

<u>Data Type</u>	<u>Min Length</u>	<u>Max Length</u>
String	1	15

## Data Element Comment/Validation Rules

*This is the primary identifier for the entire Demographic Section. Each of the Demographic sections must be associated with an EMS Agency Number. An EMS Agency can have more than one Agency Number within a state. This reflects the ability for an EMS Agency to have a different number for each service type or location (based on state implementation). The EMS Agency Number in *dAgency.02* can be used to auto-populate *eResponse.01* EMS Agency Number in the EMS Event section. Published: This element is required in the header of the XML file for services that import their data with every file submitted. It is also required for every demographic submission.*

OKEMSIS ID: *dAgency.04*

Oklahoma PCR #: N/A

## EMS Agency State

NEMSIS ID: *dAgency.04* – EMS Agency State

### Definition

*The state/territory which assigned the EMS agency number.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	D01_03	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Constraints

Pattern  
[0-9]{2}

### Data Element Comment/Validation Rules

*This has been clarified to reflect that it is the state in which the EMS Agency resides, and the state associated with the EMS Agency number. This element is required in the header of the XML file for services that import their data with every file submitted. It is also required for every demographic submission.*

GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)

OKEMISIS ID: *dAgency.05*

Oklahoma PCR #: N/A

## EMS Agency Service Area States

NEMESIS ID: *dAgency.05* – EMS Agency Service Area States

### Definition

*The states in which the EMS Agency provides services including the state associated with the EMS Agency Number.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	No	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

### Constraints

#### Pattern

[0-9]{2}

### Data Element Comment/Validation Rules

*Element added to document all the states in which the EMS agency provides services. Each state listed is associated with the counties, census tracts, and ZIP codes within the EMS Agency Service Area for each state. This element is required for every demographic submission but is not a part of the normal data submission. Each state is captured as a group where the EMS agency provides service. The group includes *dAgency.05*, *dAgency.06*, *dAgency.07*, and *Agency.08*.*

GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)



## EMS Agency Service Area County(ies)

NEMSIS ID: *dAgency.06* – EMS Agency Service Area County(s)

### Definition

*The county(ies) within each state for which the agency formally provides service.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	D01_04	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:M

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### CorrelationID

*Data Type: string    minLength: 0    maxLength: 255*

### Constraints

#### Pattern

*[0-9]{5}*

### Data Element Comment/Validation Rules

*Each state listed is associated with the counties, census tracts, and ZIP codes within the EMS Agency Service Area for each state. County codes are based on ISO/ANSI codes. It is a 5-digit code based on state (2-digit) and county (3-digit). This element is required for every demographic submission but is not a part of the normal data submission.*

*GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)*

# EMS Agency Census Tracts

NEMESIS ID: dAgency.07 – EMS Agency Census Tracts

### Definition

The US census tracts in which the EMS agency formally provides service.

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	No	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable

7701003 - Not Recorded

#### CorrelationID

Data Type: string

minLength: 0

maxLength: 255

### Constraints

#### Pattern

[0-9]{11}

### Data Element Comment/Validation Rules

This element is required for every demographic submission but is not a part of the normal data submission. This data element was added to better document the service area of the EMS Agency. Each state listed is associated with the counties, census tracts, and ZIP codes within the EMS Agency Service Area for each state. The format of the census tract number must be an 11-digit number, based upon the 2010 census, using the pattern: 2-digit State Code 3-digit County Code 6-digit Census Tract Number (no decimal). Example: NEMESIS TAC office (UT, Salt Lake County, Census Tract - located at 295 Chipeta Way, Salt Lake City, UT) 49035101400.

# EMS Agency Service Area ZIP Codes

NEMESIS ID: *dAgency.08* – EMS Agency Service Area ZIP Codes

**Definition**

*The ZIP codes for the EMS Agency's service area.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	No	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

**Attributes**

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

CorsrelationID

Data Type: string      minLength: 0      maxLength: 255

**Constraints**

Pattern

[0-9]{5}|[0-9]{5}-[0-9]{4}|[0-9]{5}-[0-9]{5}|[A-Z][0-9][A-Z] [0-9][A-Z][0-9]

**Data Element Comment/Validation Rules**

*This element is required for every demographic submission but is not a part of the normal data submission. This data element was added to better document the service area of the EMS Agency. Each state listed is associated with the counties, census tracts, and ZIP codes within the EMS Agency Service Area for each state.*

## *Primary Type of Service*

NEMSIS ID: *dAgency.09* – Primary Type of Service

**Definition**

*The primary service type provided by the agency.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	D01_05	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

<u>Code</u>	<u>Description</u>
9920001	911 Response (Scene) with Transport Capability
9920003	911 Response (Scene) without Transport Capability
9920005	Air Medical
9920007	ALS Intercept
9920009	Critical Care (Ground)
9920013	Medical Transport (Convalescent, Interfacility Transfer Hospital and Nursing Home)
9920015	Rescue

**Data Element Comment/Validation Rules/Validation Rules/Validation Rules/Validation**

*The Primary Type of Service that is associated with each of the EMS Agency Numbers. This element is required for every demographic submission but is not a part of the normal data submission.*

## Level of Service

### NEMSIS ID: dAgency.11 – Level of Service

#### Definition

*The level of service which the agency provides EMS care for every request for service (the minimum certification level). This may be the license level granted by the state EMS office.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	D01_07	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

#### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

#### Code List

Code	Description
9917001	Advanced Emergency Medical Technician (AEMT)
9917003	Emergency Medical Responder (EMR)
9917005	Emergency Medical Technician (EMT)
9917007	Paramedic
9917013	Intermediate
9917019	Physician
9917021	Critical Care Paramedic
9917023	Community Paramedicine
9917025	Nurse Practitioner
9917027	Physician Assistant
9917029	LPN (licensed practical nurse)
9917031	Registered Nurse

#### Data Element Comment/Validation Rules

*The Level of Service is associated with the specific EMS Agency Number (dAgency.02) for the EMS Agency. The category Intermediate includes EMS professionals with an “85” or “99” certification level. For example, a BLS licensed ambulance service (EMT) with Intermediate or Paramedic on staff, the appropriate level of service is "EMT". This is because the care provided to patients is limited to BLS skills. This element is required for every demographic submission but is not a part of the normal data submission.*

## Organization Status

### NEMESIS ID: *dAgency.12* – Organization Status

#### Definition

*The primary organizational status of the agency. The definition of Volunteer or Non-Volunteer is based on state or local definitions.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D01_09	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

#### NEMESIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

#### Code List

Code	Description
1016001	Mixed
1016003	Non-Volunteer
1016005	Volunteer

#### Data Element Comment/Validation Rules

*The Organizational Status that is associated with the EMS Agency and the specific EMS Agency Number (*dAgency.02*). This element is required for every demographic submission but is not a part of the normal data submission.*

## Organizational Type

**NEMESIS ID: *dAgency.13* – Organizational Type**

**Definition**

*The organizational structure from which EMS services are delivered (fire, hospital, county, etc.).*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D01_08	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

<u>Code</u>	<u>Description</u>
9912001	Fire Department
9912003	Governmental, Non-Fire
9912005	Hospital
9912007	Private, Non-hospital
9912009	Tribal

**Data Element Comment/Validation Rules**

*Organizational Type is associated with the EMS Agency and the specific EMS Agency Number (*dAgency.02*). This element is required for every demographic submission but is not a part of the normal data submission. Fire Department includes volunteer, paid, or a combination of both.*



## EMS Agency Organizational Tax Status

NEMESIS ID: *dAgency.14* – EMS Agency Organizational Tax Status

### Definition

*The EMS Agencies business/corporate organizational tax status.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	No	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

### NEMESIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Code List

<u>Code</u>	<u>Description</u>
1018001	For Profit
1018003	Other (ex: Government)
1018005	Not For Profit

### Data Element Comment/Validation Rules

*This element is associated with the EMS Agency for the specific EMS Agency Number (*dAgency.02*). This element is required for every demographic submission but is not a part of the normal data submission.*

OKEMISIS ID: *dAgency.15*

Oklahoma PCR #: N/A

## Statistical Calendar Year

NEMESIS ID: *dAgency.15* – Statistical Calendar Year

### Definition

*The calendar year to which the information pertains to for the EMS Agency and the specific EMS Agency Number (dAgency.02).*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	D01_10	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable

7701003 - Not Recorded

7701005 - Not Reporting

### Constraints

#### Data Type

integer

#### minInclusive

1900

#### maxInclusive

2050

### Data Element Comment/Validation Rules

*Calendar Year will allow multiple entries to allow data to be stored on several years. This statistical information is associated with the EMS Agency's specific EMS Agency Number (dAgency.02) and elements dAgency.16 through dAgency.22. This element is required for every demographic submission but is not a part of the normal data submission.*

## Total Primary Service Area Size

### NEMESIS ID: *dAgency.16* – Total Primary Service Area Size

#### Definition

*The total square miles in the agency's service area.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	D01_12	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

#### NEMESIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

#### Attributes

##### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Positive Integer	1	4,000,000

#### Data Element Comment/Validation Rules

*This statistical information is associated with the EMS Agency's specific EMS Agency Number (*dAgency.02*). A value should be associated with each (*dAgency.15*) Statistical Calendar Year. This element is required for every demographic submission but is not a part of the normal data submission.*

# Total Service Area Population

NEMESIS ID: *dAgency.17* – Total Service Area Population

**Definition**

*The total population in the agency's service area is based, if possible on year 2010 census data.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	D01_13	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Positive Integer	1	4,000,000

**Data Element Comment/Validation Rules**

*This statistical information is associated with the EMS Agency's specific EMS Agency Number (*dAgency.02*). A value should be associated with each (*dAgency.15*) Statistical Calendar Year. This element is required for every demographic submission but is not a part of the normal data submission.*

# 911 EMS Call Center Volume per Year

NEMESIS ID: *dAgency.18* – 911 EMS Call Center Volume per Year

**Definition**

*The number of 911 calls received by the call center during the last calendar year.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	D01_14	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Positive Integer	1	4,000,000

**Data Element Comment/Validation Rules**

*This statistical information is associated with the EMS Agency's specific EMS Agency Number (*dAgency.02*). A value should be associated with each (*dAgency.15*) Statistical Calendar Year. This element is required for every demographic submission but is not a part of the normal data submission.*

## *EMS Dispatch Volume per Year*

NEMESIS ID: *dAgency.19* – EMS Dispatch Volume per Year

**Definition**

*The number of EMS dispatches during the last calendar year.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	D01_15	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Positive Integer	1	4,000,000

**Data Element Comment/Validation Rules**

*This statistical information is associated with the EMS Agency's specific EMS Agency Number (*dAgency.02*). A value should be associated with each (*dAgency.15*) Statistical Calendar Year. This element is required for every demographic submission but is not a part of the normal data submission.*

# EMS Patient Transport Volume per Year

NEMESIS ID: *dAgency.20* – EMS Patient Transport Volume per Year

**Definition**

*The number of EMS transports per year based on last calendar year.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	D01_16	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Positive Integer	1	4,000,000

**Data Element Comment/Validation Rules**

*This statistical information is associated with the EMS Agency's specific EMS Agency Number (*dAgency.02*). A value should be associated with each (*dAgency.15*) Statistical Calendar Year. This element is required for every demographic submission but is not a part of the normal data submission.*

OKEMISIS ID: *dAgency.21*

Oklahoma PCR #: N/A

# EMS Patient Contact Volume per Year

NEMESIS ID: *dAgency.21* – EMS Patient Contact Volume per Year

### Definition

*The number of EMS patient contacts per year based on last calendar year.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	D01_17	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

### NEMESIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Positive Integer	1	4,000,000

### Data Element Comment/Validation Rules

*This statistical information is associated with the EMS Agency's specific EMS Agency Number (*dAgency.02*). A value should be associated with each (*dAgency.15*) Statistical Calendar Year. This element is required for every demographic submission but is not a part of the normal data submission.*





OKEMSIS ID: dAgency.25

Oklahoma PCR #: N/A

# National Provider Identifier

NEMSIS ID: dAgency.25 – National Provider Identifier

## Definition

The National Provider Identifier issued by CMS.

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	D01_21	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

## Attributes

### NOT Values (NV)

7701001 - Not Applicable

7701003 - Not Recorded

### CorrelationID

Data Type: string minLength: 0 maxLength: 255

## Constraints

<u>Data Type</u>	<u>Length</u>
String	10

## Data Element Comment/Validation Rules

This element is required for every demographic submission but is not a part of the normal data submission. Only EMS Agencies billing for service will have an NPI number. CMS (Centers for Medicare and Medicaid Services) NPI Registry lookup: <https://npiregistry.cms.hhs.gov/NPPESRegistry/NPIRegistryHome.do>

## Fire Department ID Number

NEMESIS ID: dAgency.26 – Fire Department ID Number

**Definition**

*The state assigned Fire Department ID Number for EMS Agency(ies) operating within a Fire Department.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	No	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

**Constraints**

<u>Data Type</u>	<u>minLength</u>	<u>maxLength</u>
string	1	20

**Data Element Comment/Validation Rules**

*This element is required for every demographic submission but is not a part of the normal data submission. Element was added to better associate Fire, EMS licensure, and operational identifiers. Fire Department ID was added to better integrate Fire Department EMS Agencies and linkage to other EMS related data systems such as NFIRS. Put “Not Applicable” if your service is not a fire department.*

# *dConfiguration*

## **State Associated with the Certification/Licensure Levels**

NEMESIS ID: *dConfiguration.01* – State Associated with the Certification/Licensure Levels

**Definition**

*The state associated with the state certification/licensure levels.*

<b>NEMESIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	No
<b>NEMESIS State Element</b>	Yes	<b>NOT Values</b>	No
<b>NEMESIS v2 Element</b>	No	<b>Is Nillable</b>	No
<b>OKEMISIS Usage</b>	Mandatory	<b>Recurrence</b>	1:1

**Constraints**

Pattern  
[0-9]{2}

**Data Element Comment/Validation Rules**

*Associated with the state (dAgency.01 - EMS Agency State). GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)*

*The state EMS system does not need to import this information into their database. Reference the Demographic Dataset Submission Guide for further details. This element is required for every demographic submission but is not a part of the normal data submission.*

## State Certification/Licensure Levels

NEMSIS ID: *dConfiguration.02* – State Certification/Licensure Levels

### Definition

*All the potential levels of certification/licensure for EMS personnel are recognized by the state.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	D04_01	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:M

### Attributes

#### CorrelationID

Data Type: *string*    *minLength: 0*    *maxLength: 255*

### Code List

<u>Code</u>	<u>Description</u>
9911001	Advanced Emergency Medical Technician (AEMT)
9911003	Emergency Medical Responder (EMR)
9911005	Emergency Medical Technician (EMT)
9911007	Paramedic
9911011	Intermediate
9911019	Other
9911023	Critical Care Paramedic

### Data Element Comment/Validation Rules

*The category EMT-Intermediate includes EMS professionals with an “85” or “99” certification level. The state EMS system does not need to import this information into their database. Reference the Demographic Dataset Submission Guide for further details. This element is required for every demographic submission but is not a part of the normal data submission.*

## **EMS Certification Levels Permitted to Perform Each Procedure**

NEMESIS ID: *dConfiguration.06* – EMS Certification Levels Permitted to Perform Each Procedure

**Definition**

*EMS certification levels which are permitted to perform the procedure listed in dConfiguration.07.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D04_05	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

<u>Code</u>	<u>Description</u>
9917001	Advanced Emergency Medical Technician (AEMT)
9917002	Emergency Medical Technician - Intermediate
9917003	Emergency Medical Responder (EMR)
9917005	Emergency Medical Technician (EMT)
9917007	Paramedic
9917019	Physician
9917021	Critical Care Paramedic
9917023	Community Paramedicine
9917025	Nurse Practitioner
9917027	Physician Assistant
9917029	Licensed Practical Nurse (LPN)

**Data Element Comment/Validation Rules**

*Using each certification level within the agency, indicate the approved procedures allowed utilizing dConfiguration.07 (EMS Agency Procedures). This element is required for every demographic submission but is not a part of the normal data submission.*

# EMS Agency Procedures

NEMESIS ID: *dConfiguration.07* – EMS Agency Procedures

**Definition**

*A list of all procedures that the agency has implemented and available for use by any/all EMS certification levels.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D04_04	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:M

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

*CorrelationID*

*Data Type: string    minLength: 0    maxLength: 255*

**Constraints**

<i>Data Type</i>	<i>minInclusive</i>	<i>maxInclusive</i>
<i>integer</i>	<i>100000</i>	<i>9999999999999999</i>

**Data Element Comment/Validation Rules**

*This is associated with the EMS Agency Number (dAgency.02) since each EMS Agency Number may have different capabilities. Each procedure is associated with the EMS professional certification levels permitted to perform the procedure. A list of procedures can be found in the appendix of this document: [OKEMISIS procedures](#). The EMS agency should submit “Not Applicable” and “Nil” to the state system for the demographic export. The state EMS system does not need to import this information into their database. It is the responsibility of the state to submit this element to the national EMS database (NEMESIS). Reference the Demographic Dataset Submission Guide for further details.*





## ***EMS Certification Levels Permitted to Administer Each Medication***

NEMSIS ID: *dConfiguration.08* – EMS Certification Levels Permitted to Administer Each Medication

**Definition**

*All EMS certification levels which are permitted to administer the medications listed in dConfiguration.09 (EMS Agency Medications).*

<b>NEMSIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	No
<b>NEMSIS State Element</b>	Yes	<b>NOT Values</b>	No
<b>NEMSIS v2 Element</b>	D04_07	<b>Is Nillable</b>	No
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

<u>Code</u>	<u>Description</u>
9917001	Advanced Emergency Medical Technician (AEMT)
9917002	Emergency Medical Technician - Intermediate
9917003	Emergency Medical Responder (EMR)
9917005	Emergency Medical Technician (EMT)
9917007	Paramedic
9917019	Physician
9917021	Critical Care Paramedic
9917023	Community Paramedicine
9917025	Nurse Practitioner
9917027	Physician Assistant
9917029	Licensed Practical Nurse (LPN)
9917031	Registered Nurse

**Data Element Comment/Validation Rules**

*Using each certification level within the agency, indicate the approved medications allowed utilizing dConfiguration.09 (EMS Agency Medications). This element is required for every demographic submission but is not a part of the normal data submission.*

## **EMS Agency Medications**

**NEMESIS ID: *dConfiguration.09* – EMS Agency Medications**

**Definition**

*A list of all medications the agency has implemented and have available for use.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D04_06	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:M

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

*Code Type*  
 9924003 – RxNorm                      9924005 - SNOMED-CT

*CorrelationID*  
 Data Type: string    minLength: 0    maxLength: 255

**Constraints**

Data Type	minLength	maxLength
string	2	9

**Data Element Comment/Validation Rules**

*The medication list is stored as the RxNorm (RXCUI) Code. This is associated with the EMS Agency Number (*dAgency.02*) since each EMS Agency Number may have different capabilities. The EMS agency should submit “Not Applicable” and “Nil” to the state system for the demographic export. The state EMS system does not need to import this information into their database. It is the responsibility of the state to submit this element to the national EMS database (NEMESIS). Reference the Demographic Dataset Submission Guide for further details. A list of medications can be found in the appendix of this document: [OKEMSIS list](#).*

# EMS Agency Protocols

NEMESIS ID: *dConfiguration.10* – EMS Agency Protocols

**Definition**

*A list of all of the EMS field protocols that the agency has in place and available for use.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D04_08	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:M

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

*CorrelationID*

*Data Type: string minLength: 0 maxLength: 255*

**Code List**

<u>Code</u>	<u>Description</u>
9914001	Airway
9914003	Airway-Failed
9914005	Airway-Obstruction/Foreign Body
9914007	Airway-Rapid Sequence Induction (RSI-Paralytic)
9914009	Airway-Sedation Assisted (Non-Paralytic)
9914011	Cardiac Arrest-Asystole
9914013	Cardiac Arrest-Hypothermia-Therapeutic
9914015	Cardiac Arrest-Pulseless Electrical Activity
9914017	Cardiac Arrest-Ventricular Fibrillation/ Pulseless Ventricular Tachycardia
9914019	Cardiac Arrest-Post Resuscitation Care
9914021	Environmental-Altitude Sickness
9914023	Environmental-Cold Exposure
9914025	Environmental-Frostbite/Cold Injury
9914027	Environmental-Heat Exposure/Exhaustion
9914029	Environmental-Heat Stroke/Hyperthermia
9914031	Environmental-Hypothermia
9914033	Exposure-Airway/Inhalation Irritants



9914035	Exposure-Biological/Infectious
9914037	Exposure-Blistering Agents
9914041	Exposure-Chemicals to Eye
9914043	Exposure-Cyanide
9914045	Exposure-Explosive/ Blast Injury
9914047	Exposure-Nerve Agents
9914049	Exposure-Radiologic Agents
9914051	General-Back Pain
9914053	General-Behavioral/Patient Restraint
9914055	General-Cardiac Arrest
9914057	General-Dental Problems
9914059	General-Epistaxis
9914061	General-Fever
9914063	General-Individualized Patient Protocol
9914065	General-Indwelling Medical Devices/Equipment
9914067	General-IV Access
9914069	General-Medical Device Malfunction
9914071	General-Pain Control
9914073	General-Spinal Immobilization/Clearance
9914075	General-Universal Patient Care/ Initial Patient Contact
9914077	Injury-Amputation
9914079	Injury-Bites and Envenomations-Land
9914081	Injury-Bites and Envenomations-Marine
9914083	Injury-Bleeding/ Hemorrhage Control
9914085	Injury-Burns-Thermal
9914087	Injury-Cardiac Arrest
9914089	Injury-Crush Syndrome
9914091	Injury-Diving Emergencies
9914093	Injury-Drowning/Near Drowning
9914095	Injury-Electrical Injuries
9914097	Injury-Extremity
9914099	Injury-Eye
9914101	Injury-Head
9914103	Injury-Impaled Object
9914105	Injury-Multisystem
9914107	Injury-Spinal Cord
9914109	Medical-Abdominal Pain
9914111	Medical-Allergic Reaction/Anaphylaxis
9914113	Medical-Altered Mental Status
9914115	Medical-Bradycardia
9914117	Medical-Cardiac Chest Pain
9914119	Medical-Diarrhea
9914121	Medical-Hyperglycemia
9914123	Medical-Hypertension
9914125	Medical-Hypoglycemia/Diabetic Emergency
9914127	Medical-Hypotension/Shock (Non-Trauma)
9914129	Medical-Influenza-Like Illness/ Upper Respiratory Infection
9914131	Medical-Nausea/Vomiting
9914133	Medical-Newborn/ Neonatal Resuscitation
9914135	General-Overdose/Poisoning/Toxic Ingestion
9914137	Medical-Pulmonary Edema/CHF
9914139	Medical-Respiratory Distress/Asthma/COPD/Reactive Airway
9914141	Medical-Seizure



9914143	Medical-ST-Elevation Myocardial Infarction (STEMI)
9914145	Medical-Stroke/TIA
9914147	Medical-Supraventricular Tachycardia (Including Atrial Fibrillation)
9914149	Medical-Syncope
9914151	Medical-Ventricular Tachycardia (With Pulse)
9914153	Not Done
9914155	OB/GYN-Childbirth/Labor/Delivery
9914157	OB/GYN-Eclampsia
9914159	OB/GYN-Gynecologic Emergencies
9914161	OB/GYN-Pregnancy Related Emergencies
9914163	OB/GYN-Post-partum Hemorrhage
9914165	Other
9914167	Exposure-Carbon Monoxide
9914169	Cardiac Arrest-Do Not Resuscitate
9914171	Cardiac Arrest-Special Resuscitation Orders
9914173	Exposure-Smoke Inhalation
9914175	General-Community Paramedicine / Mobile Integrated Healthcare
9914177	General-Exception Protocol
9914179	General-Extended Care Guidelines
9914181	General-Interfacility Transfers
9914183	General-Law Enforcement - Blood for Legal Purposes
9914185	General-Law Enforcement - Assist with Law Enforcement Activity
9914187	General-Neglect or Abuse Suspected
9914189	General-Refusal of Care
9914191	Injury-Mass/Multiple Casualties
9914193	Injury-Thoracic
9914195	Medical-Adrenal Insufficiency
9914197	Medical-Apparent Life-Threatening Event (ALTE)
9914199	Medical-Tachycardia
9914201	Cardiac Arrest-Determination of Death / Withholding Resuscitative Efforts
9914203	Injury-Conducted Electrical Weapon (e.g., Taser)
9914205	Injury-Facial Trauma
9914207	Injury-General Trauma Management
9914209	Injury-Lightning/Lightning Strike
9914211	Injury-SCUBA Injury/Accidents
9914213	Injury-Topical Chemical Burn
9914215	Medical-Beta Blocker Poisoning/Overdose
9914217	Medical-Calcium Channel Blocker Poisoning/Overdose
9914219	Medical-Opioid Poisoning/Overdose
9914221	Medical-Respiratory Distress-Bronchiolitis
9914223	Medical-Respiratory Distress-Croup
9914225	Medical-Stimulant Poisoning/Overdose

#### Data Element Comment/Validation Rules

***This is associated with the EMS Agency Number (dAgency.02) since each EMS Agency Number may have different capabilities. State and local entities can add additional protocols to the list, but the additional protocols must map to these uniform codes. The list is defined by the NASEMSO State Medical Directors. This element is required for every demographic submission but is not a part of the normal data submission.***



# EMS Agency Specialty Service Capability

NEMESIS ID: *dConfiguration.11 - EMS Agency Specialty Service Capab.*

### Definition

*Special training/services provided by the EMS Agency or available to the EMS service area/community.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element		Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:M

### Attributes

#### CorrelationID

Data Type: *string* minLength: 0 maxLength: 255

### Code List

<u>Code</u>	<u>Description</u>
1211001	Air Rescue
1211003	CBRNE
1211005	Community Health Medicine
1211007	Disaster Medical Assistance Team (DMAT)
1211009	Disaster Mortuary (DMORT)
1211011	Dive Rescue
1211013	Farm Rescue
1211015	High Angle Rescue
1211017	Machinery Disentanglement
1211019	None
1211021	Ski / Snow Rescue
1211023	Tactical EMS
1211025	Trench / Confined Space Rescue
1211027	Urban Search and Rescue (USAR)
1211029	Vehicle Extrication
1211031	Veterinary Medical Assistance Team (VMAT)
1211033	Water or Ice Related Rescue (Incl Swift Water)
1211035	Wilderness Search and Rescue

### Data Element Comment/Validation Rules

*This element is required for every demographic submission but is not a part of the normal data submission.*



## ***Emergency Medical Dispatch (EMD) Provided to EMS Agency Service Area***

NEMESIS ID: *dConfiguration.13* - Emergency Medical Dispatch (EMD) Provided to EMS Agency Service Area

**Definition**

*Indication as to whether Emergency Medical Dispatch is provided to the EMS Agency's service area.*

<b>NEMESIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	No
<b>NEMESIS State Element</b>	Yes	<b>NOT Values</b>	No
<b>NEMESIS v2 Element</b>	No	<b>Is Nillable</b>	No
<b>OKEMISIS Usage</b>	Mandatory	<b>Recurrence</b>	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

Code	Description
1213001	No
1213003	Yes, 100% of the EMS Agency's Service Area
1213005	Yes, less than 100% of the EMS Agency's Service Area

**Data Element Comment/Validation Rules**

*Added to better document the implementation of Emergency Medical Dispatch. Associated with each EMS Agency and the specific EMS Agency Number (dAgency.02). This element is required for every demographic submission but is not a part of the normal data submission.*



## **Patient Monitoring Capability(ies)**

**NEMSIS ID: *dConfiguration.15* – Patient Monitoring Capability(s)**

**Definition**

*The EMS Agency's patient monitoring capability which can be provided to any/all patients presenting to EMS.*

<b>NEMSIS National Element</b>	No	<b>Pertinent Negatives (PN)</b>	No
<b>NEMSIS State Element</b>	Yes	<b>NOT Values</b>	No
<b>NEMSIS v2 Element</b>	No	<b>Is Nillable</b>	No
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	1:M

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

*CorrelationID*

*Data Type: string    minLength: 0    maxLength: 255*

**Code List**

<u>Code</u>	<u>Description</u>
1215001	Capnography-Numeric
1215003	Capnography-Waveform
1215005	ECG-12 Lead or Greater
1215007	ECG-Less than 12 Lead (Cardiac Monitor)
1215009	Oximetry-Carbon Monoxide
1215011	Oximetry-Oxygen
1215013	Pressure Measurement-Invasive (Arterial, CVP, Swan, etc.)
1215015	Pressure Measurement-Non-Invasive (Blood Pressure, etc.)
1215017	Ventilator-Transport
1215019	Vital Sign Monitoring

**Data Element Comment/Validation Rules**

*Added to identify the patient monitoring capability of the EMS Agency. Associated with each EMS Agency Number (*dAgency.02*) since each EMS Agency Number may have a different capability within each EMS Agency. Other patient monitoring capability may exist, but NEMSIS Version 3 only includes these specific capabilities. This element is required for every demographic submission but is not a part of the normal data submission.*

## Crew Call Sign

NEMESIS ID: *dConfiguration.16* – Crew Call Sign

### Definition

*The EMS crew call sign is used to dispatch and communicate with the unit. This may be the same as the EMS Unit/Vehicle Number in many agencies.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D04_02	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:M

### Attributes

*CorrelationID*

*Data Type: string    minLength: 0    maxLength: 255*

### Constraints

<u>Data Type</u>	<u>minLength</u>	<u>maxLength</u>
string	1	50

### Data Element Comment/Validation Rules

*This element is required for every demographic submission but is not a part of the normal data submission.*

# *dContact*

## Agency Contact ZIP Code

NEMESIS ID: *dContact.08* – Agency Contact ZIP Code

**Definition**

*The ZIP code of the Agency's contact's mailing address.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	D02_07	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	0:1

**Attributes**

*Not values not allowed for this variable.*

**Constraints**

Pattern

*[0-9]{5}||[0-9]{5}-[0-9]{4}||[0-9]{5}-[0-9]{5}||[A-Z][0-9][A-Z] [0-9][A-Z][0-9]*

**Data Element Comment/Validation Rules**

*The address for the director/chief/lead administrator/CEO/ should be the main address for the EMS agency. Zip Codes Product Website: <https://www.zipcodedownload.com/Products/Product/Z5Commercial/Standard/Overview/Product: USA - 5-digit ZIP Code Database, Commercial Edition>.  
Published: This element is required for every demographic submission but is not a part of the normal data submission.*

# eAirway

## Indications for Invasive Airway

NEMSIS ID: eAirway.01 – Indications for Invasive Airway

### Definition

*The clinical indication for performing invasive airway management.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	No	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:M

### NEMSIS Associated Performance Measure Initiatives

#### Airway

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### CorrelationID

Data Type: string      minLength: 0      maxLength: 255

### Code List

Code	Description
4001001	Adequate Airway Reflexes/Effort, Potential for Compromise
4001003	Airway Reflex Compromised
4001005	Apnea or Agonal Respirations
4001007	Illness Involving Airway
4001009	Injury Involving Airway
4001011	Other (Not Listed)
4001013	Ventilatory Effort Compromised

### Data Element Comment/Validation Rules

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure). Otherwise use “Not Applicable”.*

**\*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.**

# Date/Time Airway Device Placement Confirmation

NEMSIS ID: eAirway.02 – Date/Time Airway Device Placement Confirmation

**Definition**

*The date and time the airway device placement was confirmed.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	No	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMSIS Associated Performance Measure Initiatives**

**Airway**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

**Pattern**

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure). Otherwise use “Not Applicable”. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*

**\*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.**





## Airway Device Being Confirmed

NEMESIS ID: eAirway.03 – Airway Device Being Confirmed

**Definition**

*The airway device in which placement is being confirmed.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	No	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	0:1

**NEMESIS Associated Performance Measure Initiatives**

**Airway**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
4003001	Cricothyrotomy Tube
4003003	Endotracheal Tube
4003005	Other-Invasive Airway
4003007	SAD-Combitube
4003009	SAD-King
4003011	SAD-LMA
4003013	SAD-Other
4003015	Tracheostomy Tube

**Data Element Comment/Validation Rules**

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure). SAD means Supraglottic Airway Device.*

**\*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.**

# Airway Device Placement Confirmed Method

NEMSIS ID: eAirway.04 – Airway Device Placement Confirmed Method

## Definition

*The method used to confirm the airway device placement.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	No	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:M

## NEMSIS Associated Performance Measure Initiatives

### Airway

#### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### CorrelationID

Data Type: String      minLength: 2      maxLength: 255

#### Code List

<u>Code</u>	<u>Description</u>
4004001	Auscultation
4004003	Bulb/Syringe Aspiration
4004005	Colorimetric ETCO2
4004007	Condensation in Tube
4004009	Digital (Numeric) ETCO2
4004011	Direct Re-Visualization of Tube in Place
4004013	Endotracheal Tube Whistle (BAAM, etc.)
4004015	Other
4004017	Visualization of Vocal Cords
4004019	Waveform ETCO2
4004021	Chest Rise

#### Data Element Comment/Validation Rules

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure). Otherwise use “Not Applicable”. If the invasive airway is confirmed via*

***multiple methods each method should be documented individually by time, method, and type of individual.***

***\*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.***

# Tube Depth

NEMSIS ID: eAirway.05 – Tube Depth

**Definition**

*The measurement at the patient's teeth/lip of the tube depth in centimeters (cm) of the invasive airway placed.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	No	NOT Values	No
NEMSIS v2 Element		Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway*

**Constraints**

Data Type: integer      maxInclusive: 32      minInclusive: 4

**Data Element Comment/Validation Rules**

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with "Patient Evaluated and Care Provided" and an "Airway" code, indicated in eProcedure.03 (Procedure), of 78121007, 232679009, 232692007, 232674004, 232689008. Otherwise leave this element blank.*

**\*\* "Patient Contact" is defined in the definition section of this document.**

# Type of Individual Confirming Airway Device Placement

NEMSIS ID: eAirway.06 – Type of Individual Confirming Airway Device

**Definition**

*The type of individual who confirmed the airway device placement.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMSIS Associated Performance Measure Initiatives**

**Airway**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
4006001	Another Person on the Same Crew
4006003	Other (Not Listed)
4006005	Person Performing Intubation
4006007	Receiving Air Medical/EMS Crew
4006009	Receiving Hospital Team

**Data Element Comment/Validation Rules**

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure), otherwise use “Not Applicable”.*

**\*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.**

## Crew Member ID

NEMSIS ID: eAirway.07 – Crew Member ID

### Definition

*The crew member id during this EMS patient encounter at this date and time.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

### NEMSIS Associated Performance Measure Initiatives

#### Airway

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

Data Type: string      minLength: 2      maxLength: 15

### Data Element Comment/Validation Rules

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with "Patient Evaluated and Care Provided" and an "Airway" indicated in eProcedure.03 (Procedure). Otherwise use "Not Applicable".*

**\*\*Both "Invasive Airway" and "patient contact" are defined in the definition section of this document.**

# Airway Complications Encountered

NEMSIS ID: *eAirway.08* – Airway Complications Encountered

**Definition**

*The airway management complications encountered during the patient care episode.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:M

**NEMSIS Associated Performance Measure Initiatives**

**Airway**

**Attributes**

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

CorrelationID

Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
4008001	Adverse Event from Facilitating Drugs
4008003	Bradycardia (<50)
4008005	Cardiac Arrest
4008007	Esophageal Intubation-Delayed Detection (After Tube Secured)
4008009	Esophageal Intubation-Detected in Emergency Department
4008011	Failed Intubation Effort
4008013	Injury or Trauma to Patient from Airway Management Effort
4008015	Other (Not Listed)
4008017	Oxygen Desaturation (<90%)
4008019	Patient Vomiting/Aspiration
4008021	Tube Dislodged During Transport/Patient Care
4008023	Tube Was Not in Correct Position when EMS Crew/Team Assumed Care of the Patient



#### Data Element Comment/Validation Rules

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure). Otherwise use “Not Applicable” for this element.*

*\*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.*

## Suspected Reasons for Failed Airway Procedure

NEMSIS ID: eAirway.09 – Suspected Reasons for Failed Airway Procedure

**Definition**

*The reason(s) the airway was unable to be successfully managed.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element		Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:M

**NEMSIS Associated Performance Measure Initiatives**

**Airway**

**Attributes**

CorrelationID

Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
4009001	Difficult Patient Airway Anatomy
4009003	ETI Attempted, but Arrived At Destination Facility Before Accomplished
4009005	Facial or Oral Traumas
4009007	Inability to Expose Vocal Cords
4009009	Inadequate Patient Relaxation/Presence of Protective Airway Reflexes
4009011	Jaw Clenched (Trismus)
4009013	Other (Not Listed)
4009015	Poor Patient Access
4009017	Secretions/Blood/Vomit
4009019	Unable to Position or Access Patient

**Data Element Comment/Validation Rules**

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure) and eProcedure.06 is “unsuccessful”. Otherwise leave this element blank. \*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.*



## Date/Time Invasive Airway Placement Attempts Abandoned

NEMESIS ID: eAirway.11 – Date/Time Invasive Airway Placement Attempts

**Definition**

*The date and time that the invasive airway attempts were abandoned for the patient.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	No
NEMESIS v2 Element		Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway*

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for all Incident/Patient Disposition codes, eDisposition.28, with “Patient Evaluated and Care Provided” and an “Airway” indicated in eProcedure.03 (Procedure), otherwise leave blank. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*

**\*\*Both “Invasive Airway” and “patient contact” are defined in the definition section of this document.**

# eArrest

# Cardiac Arrest

NEMESIS ID: eArrest.01 – Cardiac Arrest

**Definition**

*Indication of the presence of a cardiac arrest at any time during this EMS event.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E11_01	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Cardiac Arrest*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
3001001	No
3001003	Yes, Prior to any EMS arrival (includes Transport EMS & Medical First Responders)
3001005	Yes, after any EMS arrival (includes Transport EMS & Medical First Responders)

**Data Element Comment/Validation Rules**

*This element is a component of the Utstein Cardiac Arrest Criteria. If this EMS event is for an interfacility transfer of a patient with a recent history of a cardiac arrest with ROSC, and who does not experience another cardiac arrest during transport, then do not document Cardiac Arrest (eArrest.01) with "Yes, Prior to Any EMS Arrival (includes Transport EMS & Medical First Responders)".*

*EMS is defined as Emergency Medical Services personnel and Medical First Responder personnel who respond to a medical emergency in an official capacity as part of an organized medical response team. By this definition, physicians, nurses, or paramedics who witness a cardiac arrest and initiate CPR but are not part of the organized medical response team are characterized as bystanders and are not part of the EMS system.*

***Medical First Responders are defined as personnel who are dispatched through the 911 system, respond in an official capacity, have the capability and/or training to provide emergency medical care, but are not the designated transporter of the patient. Thus, law enforcement officers who respond in an official capacity to a cardiac arrest, have the capability and/or training to provide emergency medical care (e.g., carry AEDs in their patrol vehicles, hold EMR licensure, are CPR certified, etc.) are considered Medical First Responders for the purposes of this data element.***

***Responders dispatched through the 911 system with no capability of providing emergency medical care are not considered Medical First Responders. For example, towing and wrecking responding to a vehicle crash, or law enforcement officers who do not provide any emergency medical care would not be considered Medical First Responders.***

# Cardiac Arrest Etiology

NEMSIS ID: eArrest.02 – Cardiac Arrest Etiology

**Definition**

*Indication of the etiology or cause of cardiac arrest (classified as cardiac, non-cardiac, etc.)*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E11_02	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Cardiac Arrest*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
3002001	Cardiac (Presumed)
3002003	Drowning/Submersion
3002005	Drug Overdose
3002007	Electrocution
3002009	Exsanguination-Medical (Non-Traumatic)
3002011	Other
3002013	Respiratory/Asphyxia
3002015	Traumatic Cause

**Data Element Comment/Validation Rules**

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.*



## Resuscitation Attempted By EMS

NEMESIS ID: eArrest.03 – Resuscitation Attempted By EMS

**Definition**

*Indication of an attempt to resuscitate the patient who is in cardiac arrest (attempted, not attempted due to DNR, etc.)*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E11_03	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

**NEMESIS Associated Performance Measure Initiatives**

**Cardiac Arrest**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

**Code List**

Code	Description
3003001	Attempted Defibrillation
3003003	Attempted Ventilation
3003005	Initiated Chest Compressions
3003007	Not Attempted-Considered Futile
3003009	Not Attempted-DNR Orders
3003011	Not Attempted-Signs of Circulation

**Data Element Comment/Validation Rules**

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.*

## Arrest Witnessed By

NEMSIS ID: eArrest.04 – Arrest Witnessed By

**Definition**

*Indication of who the cardiac arrest was witnessed by.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E11_04	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

**NEMSIS Associated Performance Measure Initiatives**

*Cardiac Arrest*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 2      maxLength: 255

**Code List**

Code	Description
3004001	Not Witnessed
3004003	Witnessed by Family Member
3004005	Witnessed by Healthcare Provider
3004007	Witnessed by Bystander

**Data Element Comment/Validation Rules**

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.*

## CPR Care Provided Prior to EMS Arrival

NEMESIS ID: eArrest.05 – CPR Care Provided Prior to EMS Arrival

**Definition**

*Documentation of the CPR provided prior to EMS arrival.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

**Cardiac Arrest**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	<u>Description</u>
9923001	No
9923003	Yes

**Data Element Comment/Validation Rules**

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.*

## AED Use Prior to EMS Arrival

NEMESIS ID: eArrest.07 – AED Use Prior to EMS Arrival

**Definition**

*Documentation of AED use prior to EMS arrival.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Cardiac Arrest*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
3007001	No
3007003	Yes, Applied without Defibrillation
3007005	Yes, With Defibrillation

**Data Element Comment/Validation Rules**

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.*

# First Monitored Arrest Rhythm of the Patient

NEMESIS ID: eArrest.11 – First Monitored Arrest Rhythm of the Patient

## Definition

*Documentation of what the first monitored arrest rhythm which was noted.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E11_05	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

## NEMESIS Associated Performance Measure Initiatives

### Cardiac Arrest

#### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Code List

Code	Description
3011001	Asystole
3011003	Bradycardia
3011005	PEA
3011007	Unknown AED Non-Shockable Rhythm
3011009	Unknown AED Shockable Rhythm
3011011	Ventricular Fibrillation
3011013	Ventricular Tachycardia-Pulseless

#### Data Element Comment/Validation Rules

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.*

# Any Return of Spontaneous Circulation

NEMESIS ID: eArrest.12 – Any Return of Spontaneous Circulation

Definition

*Indication whether there was any return of spontaneous circulation.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E11_06	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

NEMESIS Associated Performance Measure Initiatives

*Cardiac Arrest*

Attributes

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

Code List

Code	Description
3012001	No
3012003	Yes, At Arrival at the ED
3012005	Yes, Prior to Arrival at the ED
3012007	Yes, Sustained for 20 consecutive minutes.

Data Element Comment/Validation Rules

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”. This element needs to be documented when the patient has been in cardiac arrest and transported to a healthcare facility to show the change in patient condition, if any. Any ROSC is defined as any brief (approximately >30 seconds) restoration of spontaneous circulation that provides evidence of more than an occasional gasp, occasional fleeting palpable pulse, or arterial waveform.*



## Date/Time of Cardiac Arrest

### NEMESIS ID: eArrest.14 - Date/Time of Cardiac Arrest

#### Definition

*The date/time of the cardiac arrest (if not known, please estimate).*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E11_08	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

#### NEMESIS Associated Performance Measure Initiatives

##### *Cardiac Arrest*

#### Attributes

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

#### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

#### Data Element Comment/Validation Rules

*This element is a component of the Utstein Cardiac Arrest Criteria. This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”. Element changed from estimated time prior to EMS arrival to date/time of cardiac arrest. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*



## Reason CPR/Resuscitation Discontinued

NEMESIS ID: eArrest.16 – Reason CPR/Resuscitation Discontinued

### Definition

*The reason that CPR or the resuscitation efforts were discontinued.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E11_10	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

### NEMESIS Associated Performance Measure Initiatives

#### Cardiac Arrest

#### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Code List

Code	Description
3016001	DNR
3016003	Medical Control Order
3016005	Obvious Signs of Death
3016007	Physically Unable to Perform
3016009	Protocol/Policy Requirements Completed
3016011	Return of Spontaneous Circulation (pulse or BP noted)

### Data Element Comment/Validation Rules

*This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.*

# Cardiac Rhythm on Arrival at Destination

NEMSIS ID: eArrest.17– Cardiac Rhythm on Arrival at Destination

**Definition**

*The patient's cardiac rhythm upon delivery or transfer to the destination.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E11_11	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

**NEMSIS Associated Performance Measure Initiatives**

**Cardiac Arrest**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 2      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
9901001	Agonal/Idioventricular
9901003	Asystole
9901005	Artifact
9901007	Atrial Fibrillation
9901009	Atrial Flutter
9901011	AV Block-1st Degree
9901013	AV Block-2nd Degree-Type 1
9901015	AV Block-2nd Degree-Type 2
9901017	AV Block-3rd Degree
9901019	Junctional
9901021	Left Bundle Branch Block
9901023	Non-STEMI Anterior Ischemia
9901025	Non-STEMI Inferior Ischemia
9901027	Non-STEMI Lateral Ischemia
9901029	Non-STEMI Posterior Ischemia
9901030	Non-STEMI Septal Ischemia

9901031	Other
9901033	Paced Rhythm
9901035	PEA
9901037	Premature Atrial Contractions
9901039	Premature Ventricular Contractions
9901041	Right Bundle Branch Block
9901043	Sinus Arrhythmia
9901045	Sinus Bradycardia
9901047	Sinus Rhythm
9901049	Sinus Tachycardia
9901051	STEMI Anterior Ischemia
9901053	STEMI Inferior Ischemia
9901055	STEMI Lateral Ischemia
9901057	STEMI Posterior Ischemia
9901058	STEMI Septal Ischemia
9901059	Supraventricular Tachycardia
9901061	Torsades De Points
9901063	Unknown AED Non-Shockable Rhythm
9901065	Unknown AED Shockable Rhythm
9901067	Ventricular Fibrillation
9901069	Ventricular Tachycardia (With Pulse)
9901071	Ventricular Tachycardia (Pulseless)

#### Data Element Comment/Validation Rules

***This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”.***

***This element needs to be documented when the patient has been in cardiac or respiratory arrest and transported to a healthcare facility to show the change in patient condition, if any. The cardiac rhythm list has been updated to be the same for eVitals.03 (Cardiac Rhythm Electrocardiography (ECG)). They are using the common type: Cardiac Rhythm. ST segment changes consistent (or not consistent) with STEMI criteria should be documented as Ischemia in the appropriate location.***

## End of EMS Cardiac Arrest Event

NEMSIS ID: eArrest.18 – End of EMS Cardiac Arrest Event

### Definition

*The patient's outcome at the end of the EMS Cardiac Arrest event.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

#### Cardiac Arrest

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	Description
3018001	Expired in ED
3018003	Expired in the Field
3018005	Ongoing Resuscitation in ED
3018007	ROSC in the Field
3018009	ROSC in the ED
3018011	Ongoing Resuscitation by Other EMS

### Data Element Comment/Validation Rules

*This element is required when eArrest.01 (Cardiac Arrest) is marked as “Yes” before or after arrival (codes 3001003, 3001005). Otherwise use “Not Applicable”. A resuscitation event is deemed to have ended when death is declared, or spontaneous circulation is restored and sustained for 20 minutes or longer.*

## Who First Initiated CPR

NEMSIS ID: eArrest.20 – Who First Initiated CPR

### Definition

*Who first initiated CPR for this EMS event.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

**Cardiac Arrest**

#### Attributes

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Code List

Code	Description
3020001	Bystander
3020003	Family Member
3020005	Healthcare Provider (non-911 Responder)
3020007	First Responder (EMS)
3020009	First Responder (Law Enforcement)
3020011	First Responder (non-EMS Fire)
3020013	EMS Responder (transport EMS)

#### Data Element Comment/Validation Rules

*Bystanders are defined as people who are not responding as part of an organized emergency response system to a cardiac arrest. Physicians, nurses, and paramedics may be described as performing bystander CPR if they are not part of the emergency response system involved in the victim's resuscitation. Friends and acquaintances are considered bystanders.*

*Family members are defined as the patient's relatives.*

*Healthcare Provider (non-911 Responder) includes physicians, nurses, paramedics, and other types of healthcare professionals who are not part of the organized emergency response system.*

**First Responders are defined as personnel who are dispatched through the 911 system, respond as part of an organized emergency response system, and have the capability and/or training to provide emergency medical care, but are not the designated transporters of the patient.**

**First Responder (EMS) is defined as EMS personnel who are part of an EMS response agency, respond as part of an organized emergency response system, but are not the designated transporter of the patient. For example, First Responder (EMS) includes EMS personnel who arrive by quick response EMS units, fire apparatus that is part of an EMS response agency, and supervisor/administrative vehicles operated by the transport EMS agency.**

**First Responder (Law Enforcement) is defined as public safety officers who are not part of an EMS response agency and act in an organized, official capacity to enforce the law.**

**First Responder (non-EMS Fire) is defined as fire department personnel who are not part of an EMS response agency and are not the designated transporter of the patient.**

**EMS Responder (transport) is defined as EMS personnel who are the designated transporter of the patient.**

Data Element Comment/Validation Rules		
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<b>Rule ID</b>	<b>Level</b>	<b>Message</b>
nemSch_e001	Error	When Who First Initiated CPR is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Who First Initiated CPR has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
nemSch_e117	Warning	Who First Initiated CPR should be recorded when Resuscitation Attempted by EMS is "Attempted..." or "Initiated..."
nemSch_e118	Warning	Who First Initiated CPR should only be recorded when Cardiac Arrest is "Yes..."

## Who First Applied the AED

NEMSIS ID: eArrest.21 – Who First Applied the AED

**Definition**

*Documentation of who first applied the AED for this EMS event.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Cardiac Arrest*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
3021001	Bystander
3021003	Family Member
3021005	Healthcare Provider (non-911 Responder)
3021007	First Responder (EMS)
3021009	First Responder (Law Enforcement)
3021011	First Responder (non-EMS Fire)
3021013	EMS Responder (transport EMS)

**Data Element Comment/Validation Rules**

*Bystanders are defined as people who are not responding as part of an organized emergency response system to a cardiac arrest. Physicians, nurses, and paramedics may be described as performing bystander CPR if they are not part of the emergency response system involved in the victim's resuscitation. Friends and acquaintances are considered bystanders.*

*Family members are defined as the patient's relatives.*

*Healthcare Provider (non-911 Responder) includes physicians, nurses, paramedics, and other types of healthcare professionals who are not part of the organized emergency response system.*





**First Responders are defined as personnel who are dispatched through the 911 system, respond as part of an organized emergency response system, and have the capability and/or training to provide emergency medical care, but are not the designated transporters of the patient.**

**First Responder (EMS) is defined as EMS personnel who are part of an EMS response agency, respond as part of an organized emergency response system, but are not the designated transporter of the patient. For example, First Responder (EMS) includes EMS personnel who arrive by quick response EMS units, fire apparatus that is part of an EMS response agency, and supervisor/administrative vehicles operated by the transport EMS agency.**

**First Responder (Law Enforcement) is defined as public safety officers who are not part of an EMS response agency and act in an organized, official capacity to enforce the law.**

**First Responder (non-EMS Fire) is defined as fire department personnel who are not part of an EMS response agency and are not the designated transporter of the patient.**

**EMS Responder (transport) is defined as EMS personnel who are the designated transporter of the patient.**

Data Element Comment/Validation Rules		
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<b>Rule ID</b>	<b>Level</b>	<b>Message</b>
nemSch_e001	Error	When Who First Applied the AED is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Who First Applied the AED has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
nemSch_e119	Warning	Who First Applied the AED should be recorded when AED Use Prior to EMS Arrival is "Yes...".
nemSch_e120	Warning	Who First Applied the AED should only be recorded when Cardiac Arrest is "Yes...".

## Who First Defibrillated the Patient

NEMSIS ID: eArrest.22 – Who First Defibrillated the Patient

### Definition

*Documentation of who first defibrillated the patient.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Cardiac Arrest*

### Attributes

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	Description
3022001	Bystander
3022003	Family Member
3022005	Healthcare Provider (non-911 Responder)
3022007	First Responder (EMS)
3022009	First Responder (Law Enforcement)
3022011	First Responder (non-EMS Fire)
3022013	EMS Responder (transport EMS)

### Data Element Comment/Validation Rules

*Bystanders are defined as people who are not responding as part of an organized emergency response system to a cardiac arrest. Physicians, nurses, and paramedics may be described as performing bystander CPR if they are not part of the emergency response system involved in the victim's resuscitation. Friends and acquaintances are considered bystanders.*

*Family members are defined as the patient's relatives.*

*Healthcare Provider (non-911 Responder) includes physicians, nurses, paramedics, and other types of healthcare professionals who are not part of the organized emergency response system.*

**First Responders are defined as personnel who are dispatched through the 911 system, respond as part of an organized emergency response system, and have the capability and/or training to provide emergency medical care, but are not the designated transporters of the patient.**

**First Responder (EMS) is defined as EMS personnel who are part of an EMS response agency, respond as part of an organized emergency response system, but are not the designated transporter of the patient. For example, First Responder (EMS) includes EMS personnel who arrive by quick response EMS units, fire apparatus that is part of an EMS response agency, and supervisor/administrative vehicles operated by the transport EMS agency.**

**First Responder (Law Enforcement) is defined as public safety officers who are not part of an EMS response agency and act in an organized, official capacity to enforce the law.**

**First Responder (non-EMS Fire) is defined as fire department personnel who are not part of an EMS response agency and are not the designated transporter of the patient.**

**EMS Responder (transport) is defined as EMS personnel who are the designated transporter of the patient.**

Data Element Comment/Validation Rules		
Rule ID	Level	Message
nemSch_e001	Error	When Who First Defibrillated the Patient is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Who First Defibrillated the Patient has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
nemSch_e119	Warning	Who First Defibrillated the Patient should be recorded when AED Use Prior to EMS Arrival is "Yes, With Defibrillation".
nemSch_e120	Warning	Who First Defibrillated the Patient should only be recorded when Cardiac Arrest is "Yes...".

# eCrew

## Crew Member ID

**NEMSIS ID: eCrew.01 – Crew Member ID**

**Definition**

*The state certification/licensure ID number assigned to the crew member.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E04_01	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Constraints**

<u>Data Type</u>	<u>minLength</u>	<u>maxLength</u>
String	2	15

**Data Element Comment/Validation Rules**

*Documents the state certification/licensure ID for the state where the event occurred. This element is required for all EMS service calls submitted into OKEMSIS. If a staff member is a student or is not an EMT use the generic codes associated with eCrew.02 (Crew Member Level) as their state certification id (example: student state id would be 2402027).*

OKEMSIS ID: eCrew.02

Oklahoma PCR #: 230

## Crew Member Level

NEMSIS ID: eCrew.02 – Crew Member Level

**Definition**

*The functioning level of the crew member ID during this EMS patient encounter.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E04_03	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

Code	Description
9925001	Advanced Emergency Medical Technician (AEMT)
9925002	Emergency Medical Technician - Intermediate
9925003	Emergency Medical Responder (EMR)
9925005	Emergency Medical Technician (EMT)
9925007	Paramedic
9925023	Other Healthcare Professional
9925025	Other Non-Healthcare Professional
9925027	Physician
9925029	Respiratory Therapist
9925031	Student
9925033	Critical Care Paramedic
9925035	Community Paramedicine
9925037	Nurse Practitioner
9925039	Physician Assistant
9925041	Licensed Practical Nurse (LPN)
9925043	Registered Nurse

**Data Element Comment/Validation Rules**

*The category Intermediate includes EMS professionals with an “85” or “99” certification level. This element is required for all EMS service calls submitted into OKEMSIS.*



# Crew Member Response Role

NEMSIS ID: eCrew.03 – Crew Member Response Role

**Definition**

*The role(s) of the role member during response, at scene treatment, and/or transport.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E04_02	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:M

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**NEMSIS Associated Performance Measure Initiatives**

CorrelationID

Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
2403001	Driver/Pilot-Response
2403003	Driver/Pilot-Transport
2403005	Other (Not Listed)
2403007	Other Patient Caregiver-At Scene
2403009	Other Patient Caregiver-Transport
2403011	Primary Patient Caregiver-At Scene
2403013	Primary Patient Caregiver-Transport

**Data Element Comment/Validation Rules**

*This element has been changed to allow for multiple selections. There must be a driver for response and transport. There must be a primary patient caregiver for scene and transport. In OKEMSIS there must be a Driver and a Primary Patient Giver to satisfy the validation rule. This element is required for all EMS service calls submitted into OKEMSIS.*

# *eDispatch*



## Complaint Reported by Dispatch

NEMSIS ID: eDispatch.01 – Complaint Reported by Dispatch

### Definition

*The complaint dispatch reported to the responding unit.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E03_01	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Code List

<u>Code</u>	<u>Description</u>
2301001	Abdominal Pain/Problems
2301003	Allergic Reaction/Stings
2301005	Animal Bite
2301007	Assault
2301009	Automated Crash Notification
2301011	Back Pain (Non-Traumatic)
2301013	Breathing Problem
2301015	Burns/Explosion
2301017	Carbon Monoxide/Hazmat/Inhalation/CBRN
2301019	Cardiac Arrest/Death
2301021	Chest Pain (Non-Traumatic)
2301023	Choking
2301025	Convulsions/Seizure
2301027	Diabetic Problem
2301029	Electrocution/Lightning
2301031	Eye Problem/Injury
2301033	Falls
2301035	Fire
2301037	Headache
2301039	Healthcare Professional/Admission
2301041	Heart Problems/AICD
2301043	Heat/Cold Exposure

2301045	Hemorrhage/Laceration
2301047	Industrial Accident/Inaccessible Incident/Other Entrapments (Non-Vehicle)
2301049	Medical Alarm
2301051	No Other Appropriate Choice
2301053	Overdose/Poisoning/Ingestion
2301055	Pandemic/Epidemic/Outbreak
2301057	Pregnancy/Childbirth/Miscarriage
2301059	Psychiatric Problem/Abnormal Behavior/Suicide Attempt
2301061	Sick Person
2301063	Stab/Gunshot Wound/Penetrating Trauma
2301065	Standby
2301067	Stroke/CVA
2301069	Traffic/Transportation Incident
2301071	Transfer/Interfacility/Palliative Care
2301073	Traumatic Injury
2301075	Well Person Check
2301077	Unconscious/Fainting/Near-Fainting
2301079	Unknown Problem/Person Down
2301081	Drowning/Diving/SCUBA Accident
2301083	Airmedical Transport
2301085	Altered Mental Status
2301087	Intercept
2301089	Nausea
2301091	Vomiting

#### Data Element Comment/Validation Rules

*This element is required for all EMS service calls submitted into OKEMSIS. Several choices were added including the following: Pandemic/Epidemic/Outbreak, Automated Crash Notification, Healthcare Professional Admission, and Inter-facility/Evaluation/Transfer. Other entries expanded based on current national EMD Dispatch List.*

## **EMD Performed**

NEMESIS ID: *eDispatch.02* – EMD Performed

**Definition**

*Indication of whether Emergency Medical Dispatch was performed for this EMS event.*

<b>NEMESIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	No
<b>NEMESIS State Element</b>	Yes	<b>NOT Values</b>	No
<b>NEMESIS v2 Element</b>	E03_02	<b>Is Nillable</b>	No
<b>OKEMISIS Usage</b>	Mandatory	<b>Recurrence</b>	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

Code	Description
2302001	No
2302003	Yes, With Pre-Arrival Instructions
2302005	Yes, Without Pre-Arrival Instructions
2302007	Yes, Unknown if Pre-Arrival Instructions Given

**Data Element Comment/Validation Rules**

*This element is required for all Incident/Patient Disposition codes, *eDisposition.02*, with patient contact.*

*“Patient Contact” defined in definition section of this document. If EMD is not available or *eDisposition.27* is cancelled, then put “Not Applicable”.*

# *eDisposition*

## *Destination/Transferred To, Code*

NEMESIS ID: *eDisposition.02* – Destination/Transferred To, Code

**Definition**

*The code of the destination the patient was delivered or transferred to.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E20_02	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded      7701005 – Not Reporting

**Constraints**

**Data Type:** string      **minLength:** 2      **maxLength:** 50

**Data Element Comment/Validation Rules**

*The codes for the OKEMSIS destinations are in the appendix attached to this document. All services need to match their destination list with [OKEMSIS](#). Any destination not listed needs to be mapped to the generic codes at the top of the list. Destination/Transferred To Code is required when Transport Disposition (*eDisposition.30*) is 4230001 or 4230003. If your service is the transferring agency, the destination of an intercept should be coded as 444 (2-Care Transfer to Another Ambulance Service). Otherwise use “Not Applicable”. Services who utilize fixed or rotor wing aircraft and transfer a patient at an airport to another ground or air service must also put code 444 (this situation is considered an intercept). If Type of Service Requested (*eResponse.05*) includes the codes 2205005 or 2205015 Transport Disposition (*eDisposition.30*) is 4230001 or 4230003 then both Incident Facility Code and Destination Transferred to Code ARE MANDATORY.*

## Destination ZIP Code

NEMSIS ID: *eDisposition.07* – Destination ZIP Code

**Definition**

*The destination ZIP code in which the patient was delivered or transferred to.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E20_07	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

**Pattern**

[0-9]{5}[[0-9]{5}-[0-9]{4}][0-9]{5}[[A-Z][0-9][A-Z] [0-9][A-Z][0-9]

**Data Element Comment/Validation Rules**

**ZIP Codes Product Website:**

<https://www.zipcodedownload.com/Products/Product/Z5Commercial/Standard/Overview/>

*Product: USA - 5-digit ZIP Code Database, Commercial Edition. Destination/Transferred To Code is required when eDisposition.30 (Incident/Patient Disposition) is 4230001 or 4230003. If your service is the transferring agency, destination zip code of an intercept should be "Not Applicable". Otherwise use "Not Applicable".*

## EMS Transport Mode

NEMESIS ID: eDisposition.16 – EMS Transport Mode

**Definition**

*Mode of Transport for the patient from the point of origination to the final destination (i.e. hospital, PELA site, etc.) by the responding EMS service unit.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	No
NEMESIS v2 Element		Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**Code List**

Code	Description
4216001	Air Medical-Fixed Wing
4216003	Air Medical-Rotor Wing
4216005	Ground-Ambulance
it4216.100	Ground-to-Ground Transfer
it4216.101	Ground- Rescue Vehicle-to-Ground Ambulance Transfer
it4216.102	Ground- Rescue Vehicle-to-Air Ambulance Transfer
it4216.103	Ground-to-Air Transfer
it4216.104	Air-to-Ground Transfer
it4216.105	Air-to-Air Transfer
it4216.106	Ground-to-Air-to-Ground Transfer
it4216.107	No Transport

**Data Element Comment/Validation Rules**

*This element is required for all EMS runs entered into OKEMSIS. If there was no patient contact or the patient was not transported by the EMS unit (look at codes associated with eDisposition.30, Transport Disposition) then choose code it4216.107 (No Transport). "Patient Contact" and the Incident/Patient Disposition codes are defined in the definition section of this document (\*\*Validation Rules: "Patient Contact"). Examples of when to use each code are also found in the definition section. Custom Codes Associated with this element were taken from the v2.2.1 OKEMSIS data dictionary, OKLAHOMA-SPECIFIC FIELDS section. Codes highlighted in yellow are not in the NEMESIS dataset but are custom codes and required in the Oklahoma v3.5 dataset.*

## Transport Mode from Scene

NEMSIS ID: *eDisposition.17* – Transport Mode from Scene

### Definition

*Indicate whether the transport was emergent or non-emergent.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E20_07	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	Description
4217001	Emergent (Immediate Response)
4217003	Emergent Downgraded to Non-Emergent
4217005	Non-Emergent
4217007	Non-Emergent Upgraded to Emergent

### Data Element Comment/Validation Rules

*Transport mode from scene is required when *eDisposition.30* (Transport Disposition) is 4230001 or 4230003. Otherwise put "Not Applicable".*



## Condition of Patient at Destination

NEMSIS ID: *eDisposition.19* – Condition of Patient at Destination

### Definition

*The condition of the patient after care by EMS.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E20_15	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	Description
9916001	Improved
9916003	Unchanged
9916005	Worse

### Data Element Comment/Validation Rules

*This element is required when eDisposition.30 (Transport Disposition) is 4230001 or 4230003. Otherwise put "Not Applicable".*

## Reason for Choosing Destination

NEMSIS ID: *eDisposition.20* – Reason for Choosing Destination

### Definition

*The reason the unit chose to deliver or transfer the patient to the destination.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E20_16	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### CorrelationID

Data Type: string      minLength: 0      maxLength: 255

### Code List

Code	Description
4220001	Closest Facility
4220003	Hospital Diversion
4220005	Family Choice
4220007	Insurance Status/Requirement
4220009	Law Enforcement Choice
4220011	On-Line/On-Scene Medical Direction
4220013	Other (Not Listed)
4220015	Patient's Choice
4220017	Patient's Physician's Choice
4220019	Protocol
4220021	Regional Specialty Center

### Data Element Comment/Validation Rules

*This element is required when eDisposition.30 (Transport Disposition) is 4230001 or 4230003. Otherwise put "Not Applicable".*

## Type of Destination

NEMESIS ID: *eDisposition.21* – Type of Destination

**Definition**

*The type of destination the patient was delivered or transferred to.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E20_17	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
4221001	Home
4221003	Hospital-Emergency Department
4221005	Hospital-Non-Emergency Department Bed
4221007	Clinic
4221009	Morgue/Mortuary
4221013	Other
4221015	Other EMS Responder (air)
4221017	Other EMS Responder (ground)
4221019	Police/Jail
4221021	Urgent Care
4221023	Freestanding Emergency Department
4221025	Dialysis Center
4221027	Diagnostic Services
4221029	Assisted Living Facility
4221031	Mental Health Facility
4221033	Nursing Home
4221035	Other Recurring Care Center
4221037	Physical Rehabilitation Facility
4221039	Drug and/or Alcohol Rehabilitation Facility



**Data Element Comment/Validation Rules**

***Type of Destination is required when eDisposition.30 (Transport Disposition) is 4230001 or 4230003. Otherwise put "Not Applicable". "Hospital-In Patient Bed" includes any location in the hospital except the Emergency Department.***

# Hospital Designation

NEMSIS ID: *eDisposition.23* – Hospital Designation

**Definition**

*The designation associated with the hospital for this transport (e.g. Trauma, STEMI, Peds, etc.).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Optional	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
9908001	Behavioral Health
9908003	Burn Center
9908005	Critical Access Hospital
9908007	Hospital (General)
9908009	Neonatal Center
9908011	Pediatric Center
9908019	Rehab Center
9908021	Trauma Center Level 1
9908023	Trauma Center Level 2
9908025	Trauma Center Level 3
9908027	Trauma Center Level 4
9908029	Trauma Center Level 5
9908031	Cardiac-STEMI/PCI Capable
9908033	Cardiac-STEMI/PCI Capable (24/7)
9908035	Cardiac-STEMI/Non-PCI Capable
9908037	Stroke-Acute Stroke Ready Hospital (ASRH)
9908039	Stroke-Primary Stroke Center (PSC)
9908041	Stroke-Thrombectomy-Capable Stroke Center (TSC)
9908043	Stroke-Comprehensive Stroke Center (CSC)
9908045	Cancer Center
9908047	Labor and Delivery



#### Data Element Comment/Validation Rules

*This element is required to be in the dataset for your service but there will be no associated validation rule. This element will be added to the state-run form and is optional for the EMS service. This element was added to better describe the patient's destination. Designation can include a national designation (ex. ACS Level 1 trauma center) or a designation recognized by the State of Oklahoma.*

# Destination Team Pre-Arrival Alert/Activation

NEMSIS ID: *eDisposition.24* – Destination Team Pre-Arrival Activation

### Definition

*Indication that an alert (or activation) was called by EMS of the appropriate destination healthcare facility team. The activation should occur prior to EMS unit arrival at the destination with the patient.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	Custom	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Cardiac Arrest STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	Description
4224001	No
4224003	Yes-Adult Trauma
4224005	Yes-Cardiac Arrest
4224007	Yes-Obstetrics
4224009	Yes-Other
4224011	Yes-Pediatric Trauma
4224013	Yes-STEMI
4224015	Yes-Stroke
4224017	Yes-Trauma (General)
4224019	Yes-Sepsis
4224009	Yes-Biological/Infectious Precautions

### Data Element Comment/Validation Rules

*This element is required for STEMI, stroke, cardiac arrest, and trauma patients if eDisposition.30 (Transport Disposition) is 4230001 or 4230003, and First or Second Impression is (I21.0, I21.1, I21.2, I21.3) or eArrest is (3001003, 3001005) or eVitals.29*

***(Stroke Scale Score) is not blank or First or Second Impression is associated with trauma  
(\*Trauma defined in definition section).***



## Date/Time of Destination Pre-arrival Alert or Activation

NEMSIS ID: *eDisposition.25* – Date/Time of Destination Pre-arrival

**Definition**

*Date/Time EMS alerted, notified, or activated the Destination Healthcare Facility Team prior to EMS arrival for acute ill or injured patient.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	Custom	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Cardiac Arrest STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

**Pattern**

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for STEMI, stroke, cardiac arrest, and trauma patients if eDisposition.30 (Transport Disposition) is 4230001, 4230003 and First or Second Impression is (I21.0, I21.1, I21.2, I21.3), or eArrest is (3001003, 3001005), or eVitals.29 (Stroke Scale Score) is not blank, or First or Second Impression is associated with trauma (\*Trauma defined in definition section). Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*



# Unit Disposition

NEMSIS ID: eDisposition.27 – Unit Disposition

### Definition

*The patient disposition for an EMS event identifying whether patient contact was made.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element		Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Code List

Code	Description
4227001	Patient Contact Made
4227003	Cancelled on Scene
4227005	Cancelled Prior to Arrival at Scene
4227007	No Patient Contact
4227009	No Patient Found
4227011	Non-Patient Incident (Not Otherwise Listed)

### Data Element Comment

*Grouped with Incident and Transport dispositions. Who provided care or services is defined in Incident Disposition.*

### Validation Rules

Rule ID	Level	Message
nemSch_e018	Warning	Unit En Route Date/Time should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".
nemSch_e020	Warning	Unit Arrived on Scene Date/Time should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".
nemSch_e023	Warning	Arrived at Patient Date/Time should be recorded when Unit Disposition is "Patient Contact Made".
nemSch_e025	Warning	

- Unit Left Scene Date/Time should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".
- nemSch\_e067 **Warning** Number of Patients at Scene should be "Multiple" or "Single" when Unit Disposition is "Patient Contact Made".
- nemSch\_e070 **Warning** Incident Location Type should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".
- nemSch\_e071 **Warning** Incident State should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".
- nemSch\_e072 **Warning** Incident ZIP Code should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".
- nemSch\_e073 **Warning** Incident County should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene".
- nemSch\_e180 **Warning** Unit Disposition should be "Patient Contact Made" when Patient Evaluation/Care is "Patient Evaluated..." or "Patient Refused Evaluation/Care".
- nemSch\_e181 **Warning** Unit Disposition should be "Patient Contact Made" when Crew Disposition contains "... Primary Care..." or "Provided Care Supporting Primary EMS Crew".
- nemSch\_e182 **Warning** Unit Disposition should be "Patient Contact Made" when Transport Disposition is a value other than "Non-Patient Transport (Not Otherwise Listed)" or "No Transport".
- nemSch\_e183 **Warning** Patient Evaluation/Care should be recorded when Unit Disposition is "Patient Contact Made".
- nemSch\_e185 **Warning** Crew Disposition should be recorded when Unit Disposition is "Patient Contact Made".
- nemSch\_e186 **Warning** Transport Disposition should be recorded when Unit Disposition is "Patient Contact Made".

## *Patient Evaluation/Care*

NEMESIS ID: *eDisposition.28* – Patient Evaluation/Care

*The patient disposition for an EMS event identifying whether a patient was evaluated and care or services were provided.*

Definition			
NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway   Cardiac Arrest   Pediatric   Response   STEMI   Stroke   Trauma*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable   7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
4228001	Patient Evaluated and Care Provided
4228003	Patient Evaluated and Refused Care
4228005	Patient Evaluated, No Care Required
4228007	Patient Refused Evaluation/Care
4228009	Patient Support Services Provided

**Data Element Comment**

*Grouped with Incident and Transport Dispositions. Who provided care or services is defined in Incident Disposition.*

**Validation Rules**

<i>Rule ID</i>	<i>Level</i>	<i>Message</i>
nemSch_e001	<b>Error</b>	When Patient Evaluation/Care is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).



- nemSch\_e002 **Error** When Patient Evaluation/Care has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
- nemSch\_e057 **Warning** Patient's Home County should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e059 **Warning** Patient's Home State should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e060 **Warning** Patient's Home ZIP Code should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e061 **Warning** Gender should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e062 **Warning** Race should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e063 **Warning** Age should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e064 **Warning** Age Units should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e075 **Warning** 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".
- nemSch\_e076 **Warning** Possible Injury should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e078 **Warning** 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".
- nemSch\_e079 **Warning** 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".
- nemSch\_e080 **Warning** Primary Symptom should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e082 **Warning** Provider's Primary Impression should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e084 **Warning** 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".
- nemSch\_e085 **Warning**

- Date/Time Last Known Well should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...".
- nemSch\_e086 **Warning** Date/Time Last Known Well should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Stroke Scale Score is "Positive".
- nemSch\_e087 **Warning** Date/Time Last Known Well should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Rhythm / Electrocardiography (ECG) is "STEMI...".
- nemSch\_e089 **Warning** Cause of Injury should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Possible Injury is "Yes".
- nemSch\_e093 **Warning** Cardiac Arrest Etiology should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...".
- nemSch\_e095 **Warning** Resuscitation Attempted By EMS should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...".
- nemSch\_e100 **Warning** Arrest Witnessed By should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...".
- nemSch\_e103 **Warning** AED Use Prior to EMS Arrival should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...".
- nemSch\_e108 **Warning** Any Return of Spontaneous Circulation should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...".
- nemSch\_e115 **Warning** End of EMS Cardiac Arrest Event should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...".
- nemSch\_e168 **Warning** Final Patient Acuity should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided".
- nemSch\_e180 **Warning** Unit Disposition should be "Patient Contact Made" when Patient Evaluation/Care is "Patient Evaluated..." or "Patient Refused Evaluation/Care".
- nemSch\_e183 **Warning** Patient Evaluation/Care should be recorded when Unit Disposition is "Patient Contact Made".
- nemSch\_e184 **Warning** Patient Evaluation/Care should be "Patient Evaluated and Care Provided" when Crew Disposition contains "... Primary Care..." or "Provided Care Supporting Primary EMS Crew".
- nemSch\_e187 **Warning** 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".



# Crew Disposition

NEMSIS ID: *eDisposition.29* – Crew Disposition

*The crew disposition for this EMS event identifying which crew provided primary patient care or whether support services were required.*

**Definition**

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable 7701003 - Not Recorded

**Code List**

Code	Description
4229001	Initiated and Continued Primary Care
4229003	Initiated Primary Care and Transferred to Another EMS Crew
4229005	Provided Care Supporting Primary EMS Crew
4229007	Assumed Primary Care from Another EMS Crew
4229009	Incident Support Services Provided (Including Standby)
4229011	Back in Service, No Care/Support Services Required
4229013	Back in Service, Care/Support Services Refused

**Data Element Comment**

*Grouped with Patient and Transport Dispositions. Depending on context of the Value, "Unit" could be Vehicle or Service/Agency.*

**Validation Rules**

Rule ID	Level	Message
nemSch_e001	Error	When Crew Disposition is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the

element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).

- nemSch\_e002 **Error** When Crew Disposition has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
- nemSch\_e181 **Warning** Unit Disposition should be "Patient Contact Made" when Crew Disposition contains "... Primary Care..." or "Provided Care Supporting Primary EMS Crew".
- nemSch\_e184 **Warning** Patient Evaluation/Care should be "Patient Evaluated and Care Provided" when Crew Disposition contains "... Primary Care..." or "Provided Care Supporting Primary EMS Crew".
- nemSch\_e185 **Warning** Crew Disposition should be recorded when Unit Disposition is "Patient Contact Made".



## Transport Disposition

NEMESIS ID: *eDisposition.30* – Transport Disposition

*The transport disposition for an EMS event identifying whether a transport occurred and by which unit.*

Definition			
NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable    7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
4230001	Transport by This EMS Unit (This Crew Only)
4230003	Transport by This EMS Unit, with a Member of Another Crew
4230005	Transport by Another EMS Unit
4230007	Transport by Another EMS Unit, with a Member of This Crew
4230009	Patient Refused Transport
4230011	Non-Patient Transport (Not Otherwise Listed)
4230013	No Transport

**Data Element Comment**

*Grouped with Patient and Incident Dispositions. Provides a rapid filter for transport or no transport for incident evaluation, business entry rules and Schematron rules.*

**Validation Rules**



<b>Rule ID</b>	<b>Level</b>	<b>Message</b>
nemSch_e001	Error	When Transport Disposition is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Transport Disposition has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
nemSch_e030	Warning	Patient Arrived at Destination Date/Time should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e036	Warning	Destination Patient Transfer of Care Date/Time should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e066	Warning	Primary Method of Payment should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e113	Warning	Cardiac Rhythm on Arrival at Destination should be recorded when Transport Disposition is "Transport by This EMS Unit..." and Cardiac Arrest is "Yes..."
nemSch_e160	Warning	Destination State should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e161	Warning	Destination County should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e163	Warning	Destination ZIP Code should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e164	Warning	EMS Transport Method should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e165	Warning	EMS Transport Method should not be recorded when Transport Disposition is "Patient Refused Transport" or "No Transport"
nemSch_e166	Warning	Transport Mode from Scene should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e167	Warning	Transport Mode from Scene should not be recorded when Transport Disposition is "Patient Refused Transport" or "No Transport"
nemSch_e169	Warning	Reason for Choosing Destination should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e170	Warning	Type of Destination should be recorded when Transport Disposition is "Transport by This EMS Unit..."
nemSch_e182	Warning	Unit Disposition should be "Patient Contact Made" when Transport Disposition is a value other than "Non-Patient Transport (Not Otherwise Listed)" or "No Transport"
nemSch_e186	Warning	Transport Disposition should be recorded when Unit Disposition is "Patient Contact Made"

## Reason for Refusal/Release

NEMESIS ID: *eDisposition.31* – Reason for Refusal/Release

*Describes reason(s) for the patient's refusal of care/transport OR the EMS clinician's decision to release the patient.*

Definition			
NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element		Is Nillable	No
OKEMISIS Usage	Optional	Recurrence	0:M

NEMESIS Associated Performance Measure Initiatives						
<i>Airway</i>	<i>Cardiac Arrest</i>	<i>Pediatric</i>	<i>Response</i>	<i>STEMI</i>	<i>Stroke</i>	<i>Trauma</i>

### Attributes

CorrelationID

Data Type: String      minLength: 2      maxLength: 255

### Code List

<u>Code</u>	<u>Description</u>
4231001	Against Medical Advice
4231003	Patient/Guardian Indicates Ambulance Transport is Not Necessary
4231005	Released Following Protocol Guidelines
4231007	Released to Law Enforcement
4231009	Patient/Guardian States Intent to Transport by Other Means
4231011	DNR
4231013	Medical/Physician Orders for Life Sustaining Treatment
4231015	Other, Not Listed

### Data Element Comment

*This works in combination with the dispositions and signatures to provide general categories for the patient's refusal. Specific legal refusal language should be developed by the agency's legal counsel and provided to the patient or guardian upon refusal per local policies.*

# *eHistory*

## Barriers to Patient Care

NEMSIS ID: eHistory.01 – Barriers to Patient Care

**Definition**

*Indication of whether there were any patient specific barriers to serving the patient at the scene.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E12_01	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

CorrelationID

Data Type: string      minLength: 2      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
3101001	Cultural, Custom, Religious
3101003	Developmentally Impaired
3101005	Hearing Impaired
3101007	Language
3101009	None Noted
3101011	Obesity
3101013	Physical Barrier (Unable to Access Patient)
3101015	Physically Impaired
3101017	Physically Restrained
3101019	Psychologically Impaired
3101021	Sight Impaired
3101023	Speech Impaired
3101025	Unattended or Unsupervised (including minors)
3101027	Unconscious
3101029	Uncooperative
3101031	State of Emotional Distress
3101033	Alcohol Use, Suspected
3101035	Drug Use, Suspected

9924001 ICD-10  
9924003 RXNorm

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) codes with “Patient Contact Made”. “Patient Contact” is defined in the definition section of this document. Otherwise put “Not Applicable”. Any code highlighted in yellow is not in the NEMSIS dataset but is a custom code and is required to be in the Oklahoma v3.5 dataset.*

# Medication Allergies

NEMESIS ID: eHistory.06 – Medication Allergies

### Definition

*The patient's medication allergies.*

NEMESIS National Element	No	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E12_08	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	0:M

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Pertinent Negatives (PN)

8801013 - No Known Drug Allergy      8801019 - Refused  
 8801023 - Unable to Complete      8801021 - Unresponsive

#### CorrelationID

Data Type: string      minLength: 2      maxLength: 255

#### Code Type

9924001 - ICD10      9924003 - RxNorm

### Constraints

#### Pattern

(Z88\[0-9])([a-zA-Z0-9]{2,7})

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made". Otherwise put the appropriate Pertinent Negative ("Unable to Complete" for cancelled calls/no patient found). A list of Medication Allergies can be found in the appendix: [Medication Allergies Code and Descriptions](#).*

The list of medication allergies is based on RxNorm (RXCUI) Codes. In addition, a specific list of ICD-10 CM codes can be used for medication groups.

Code list is represented in two separate UMLS datasets:

- 1) ICD-10 Codes.
- 2) RxNorm



# Alcohol/Drug Use Indicators

NEMESIS ID: eHistory.17– Alcohol/Drug Use Indicators

**Definition**

*Indicators for the potential use of alcohol or drugs by the patient related to the patient's current illness or injury.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E12_19	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

**NEMESIS Associated Performance Measure Initiatives**

**Trauma**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801015 - None Reported      8801023 - Unable to Complete

**CorrelationID**

Data Type: string      minLength: 2      maxLength: 255

**Code List**

Code	Description
3117001	Alcohol Containers/Paraphernalia at Scene
3117003	Drug Paraphernalia at Scene
3117005	Patient Admits to Alcohol Use
3117007	Patient Admits to Drug Use
3117009	Positive Level known from Law Enforcement or Hospital Record
3117013	Physical Exam Indicates Suspected Alcohol or Drug Use

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put the appropriate Pertinent Negative (“Unable to Complete” for cancelled calls/no patient found).*

# *eInjury*

## Cause of Injury

NEMESIS ID: *eInjury.01* – Cause of Injury

### Definition

*The category of the reported/suspected external cause of the injury.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E10_01	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

### NEMESIS Associated Performance Measure Initiatives

#### Trauma

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable

7701003 - Not Recorded

#### CorrelationID

Data Type: string

minLength: 0

maxLength: 255

### Constraints

#### Pattern

`(([TV-Y][0-9]{2})(\.[0-9A-Z]{1,7})?)`

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) and eSituation.02 (Possible Injury) is 9922005 or Provider First/Second Impression (eSituation.11. eSituation.12) is associated with trauma (defined in definition section of this document). Otherwise put “Not Applicable”. A list for [Cause of Injury](#) can be found in the appendix of this document.*

## Mechanism of Injury

NEMESIS ID: *eInjury.02*– Mechanism of Injury

### Definition

*The mechanism of the event which caused the injury*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E10_03	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	0:M

### NEMESIS Associated Performance Measure Initiatives

#### Trauma

#### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### CorrelationID

Data Type: string      minLength: 0      maxLength: 255

### Code List

Code	Description
2902001	Blunt
2902003	Burn
2902005	Other
2902007	Penetrating

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document) and eSituation.02 (Possible Injury) is 9922005 or Provider First/Second Impression (eSituation.11, eSituation.12) is associated with trauma (defined in definition section of this document). Otherwise put "Not Applicable".*

## Trauma Triage Criteria

NEMESIS ID:

### Definition

*Criteria used to assign priority status (1, 2 or 3) to a patient. The scoring considers the patient's condition, physiological and anatomical injuries and mechanism of injury.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	Yes
NEMESIS v2 Element	Custom	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	Description
2903001	Amputation proximal to wrist or ankle
it2903.100	Blunt trauma / no hemodynamic trauma
it2903.101	BSA < 10%
it2903.102	BSA >= 10%
2903005	Flail chest
2903007	GCS <= 13
it2903.103	GCS improving
it2903.104	Hemodynamic compromise from trauma
it2903.105	Minor injuries
2903009	Open or depressed skull fracture
it2903.106	Other single system injury
2903011	Paralysis resulting from trauma
it2903.107	Penetrating injuries to extremities
2903015	Penetrating injury to trunk, neck, or head
it2903.108	PTS <= 8
2903017	Respiratory compromise resulting from trauma
2903021	Two or more proximal long bone fractures
2903013	Unstable Pelvis
it2903.111	Tender and/or Distended Abdomen
2903003	Crushed, Degloved, or Mangled Extremity
it2903.112	Single System Injury-Neurological
it2903.113	Single System Injury-Orthopedic

it2903.114	Single System Injury-Maxillofacial
it2903.115	Ejection of Patient from Enclosed Vehicle
it2903.116	Auto/Pedestrian. Auto/Bike or Motorcycle Crash with Significant Impact
it2903.117	Falls > 20 Ft or Distance 2-3 Times Height of Patient
it2903.118	Significant Assault or Altercations
it2903.119	High Risk Auto Crash

#### Data Element Comment/Validation Rules

*This element is required if the "Possible Injury" (eSituation.02) is marked as "Yes" or if the "Provider's Impression" (eSituation.11 or eSituation.12) is related to trauma. If neither condition applies, please indicate "Not Applicable."*

*\*Trauma defined in definition section. Any code highlighted in yellow is not in the NEMSIS dataset but is a custom code and is required to be in the Oklahoma v3.5 dataset.*

## Location of Patient in Vehicle

NEMESIS ID: *eInjury.06*– Location of Patient in Vehicle

**Definition**

*The seat row location of the vehicle at the time of the crash with the front seat numbered as 1.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	E10_06	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	0:M

**Code List**

Code	Description
2906001	Front Seat-Left Side (or motorcycle driver)
2906003	Front Seat-Middle
2906005	Front Seat-Right Side
2906007	Passenger in other enclosed passenger or cargo area (non-trailing unit such as a bus)
2906009	Passenger in unenclosed passenger or cargo area (non-trailing unit such as a pickup)
2906011	Riding on Vehicle Exterior (non-trailing unit)
2906013	Second Seat-Left Side (or motorcycle passenger)
2906015	Second Seat-Middle
2906017	Second Seat-Right Side
2906019	Sleeper Section of Cab (truck)
2906021	Third Row-Left Side (or motorcycle passenger)
2906023	Third Row-Middle
2906025	Third Row-Right Side
2906027	Trailing Unit
2906029	Unknown

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” and Cause of Injury is related to a motor vehicle. Otherwise put “Unknown”. Cause of Injury MVC codes: V49.3, V49.9, X82, V69.3, V69.9, V86.31, V86.99, V86.39, V84.9, V83.9, V29.3, V29.9. All Cause of Injury codes are ICD-10 codes.*

# Use of Occupant Safety Equipment

NEMESIS ID: *eInjury.07*– Use of Occupant Safety Equipment

**Definition**

*Safety equipment in use by the patient at the time of the injury*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E10_08	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	0:M

**NEMESIS Associated Performance Measure Initiatives**

**Trauma**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded      7701005 - Not Reporting

**CorrelationID**

Data Type: string      minLength: 2      maxLength: 255

**Code List**

Code	Description
2907001	Child Booster Seat
2907003	Eye Protection
2907005	Helmet Worn
2907007	Infant Car Seat Forward Facing
2907009	Infant Car Seat Rear Facing
2907015	None
2907017	Other
2907019	Personal Floatation Device
2907021	Protective Clothing
2907023	Protective Non-Clothing Gear
2907027	Shoulder and Lap Belt Used
2907029	Lap Belt Only Used
2907031	Shoulder Belt Only Used
2907033	Unable to Determine

**Data Element Comment/Validation Rules**





***This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” and Cause of Injury is related to a motor vehicle. Otherwise put “Not Applicable”. Cause of Injury MVC codes: V49.3, V49.9, X82, V69.3, V69.9, V86.31, V86.99, V86.39, V84.9, V83.9, V29.3, V29.9. All Cause of Injury codes are ICD-10 codes.***

# Airbag Deployment

NEMESIS ID: *eInjury.08*– Airbag Deployment

**Definition**

*Indication of Airbag Deployment.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	E10_09	Is Nillable	No
OKEMESIS Usage	Mandatory	Recurrence	0:M

**Attributes**

CorrelationID

Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
2908001	Airbag Deployed Front
2908003	Airbag Deployed Side
2908005	Airbag Deployed Other (knee, Air belt, etc.)
2908007	No Airbag Deployed
2908009	No Airbag Present

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” and Cause of Injury is related to a motor vehicle. Cause of Injury MVC codes: V49.3, V49.9, X82, V69.3, V69.9, V86.31, V86.99, V86.39, V84.9, V83.9. All Cause of Injury codes are ICD-10 codes. Otherwise leave this element blank.*

# *eMedication*

## ***Date/Time Medication Administered***

NEMSIS ID: *eMedications.01* – Date/Time Medication Administered

**Definition**

*The date/time medication administered to the patient.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E18_01	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

**Pattern**

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required if a medication is given (eMedication.03). Otherwise put "Not Applicable". Formatting for date/time elements can be found in this document in the appendix under "[Date/Time Formats in OKEMSIS](#)".*

# Medication Administered Prior to this Unit's EMS Care

NEMSIS ID: eMedications.02 – Medication Administered Prior to this Unit's EMS Care

**Definition**

*Indicates that the medication administration which is documented was administered prior to this EMS units care.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E18_02	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
9923001	No
9923003	Yes

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Otherwise put "Not Applicable".*

## *Medication Administered*

NEMSIS ID: *eMedications.03* – Medication Administered

**Definition**

*The medication given to the patient.*

<b>NEMSIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	Yes
<b>NEMSIS State Element</b>	Yes	<b>NOT Values</b>	Yes
<b>NEMSIS v2 Element</b>	E18_03	<b>Is Nillable</b>	Yes
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable    7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801001 - Contraindication Noted    8801003 - Denied By Order  
 8801007 - Medication Allergy        8801009 - Medication Already Taken  
 8801019 - Refused                      8801023 - Unable to Complete  
 8801027 - Order Criteria Not Met

**Code Type**

9924003 – RxNorm                      9924005 - SNOMED-CT

**Constraints**

**Data Type:** string                      **minLength:** 2                      **maxLength:** 9

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in the definition section of this document). Otherwise put the appropriate pertinent negative (for cancelled/no patient found incidents put “Not Applicable”). All software vendors must match their medications list with the [OKEMSIS list](#) located in the appendix of this document.*



# Medication Administered Route

NEMESIS ID: *eMedications.04* – Medication Administered Route

**Definition**

*The route medication was administered to the patient.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E18_04	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable    7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801023 - Unable to Complete

**Code List**

<u>Code</u>	<u>Description</u>
9927001	Blow-By
9927003	Buccal
9927005	Endotracheal Tube (ET)
9927007	Gastrostomy Tube
9927009	Inhalation
9927011	Intraarterial
9927013	Intradermal
9927015	Intramuscular (IM)
9927017	Intranasal
9927019	Intraocular
9927021	Intraosseous (IO)
9927023	Intravenous (IV)
9927025	Nasal Cannula
9927027	Nasogastric
9927029	Nasotracheal Tube
9927031	Non-Rebreather Mask
9927033	Ophthalmic
9927035	Oral
9927037	Other/miscellaneous
9927039	Otic



9927041	Re-breather mask
9927043	Rectal
9927045	Subcutaneous
9927047	Sublingual
9927049	Topical
9927051	Tracheostomy
9927053	Transdermal
9927055	Urethral
9927057	Ventimask
9927059	Wound
9927061	Portacath
9927063	Auto Injector
9927065	BVM
9927067	CPAP
9927069	IV Pump
9927071	Nebulizer
9927073	Umbilical Artery Catheter
9927075	Umbilical Venous Catheter

#### Data Element Comment/Validation Rules

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Topical (code 9927049) includes substances that affect only the area applied to (ex. Neosporin, Bacitracin, etc.) while Transdermal (code 9927053) includes substances that effect the patient systemically (ex. Nitroglycerin patch/paste).*

*This medication route list represents a sub-group of values from the Data Elements for Emergency Department Systems (DEEDS), pertaining to prehospital care.*

*DEEDS Version 1.0 was utilized for this list:*

*<http://www.sciencedirect.com/science/article/pii/S0196064498703178>. The list can be found on page 152 of 274 of the PDF document in Section 5, 5.13 Current Therapeutic Medication Route.*



# Medication Dosage

NEMESIS ID: eMedications.05 – Medication Dosage

**Definition**

*The dose or amount of the medication given to the patient.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E18_05	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>Total Digits</u>	<u>Fraction Digits</u>
Decimal	9	3

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required.*

# Medication Dosage Units

NEMSIS ID: eMedications.06 – Medication Dosage Units

## Definition

*The unit of medication dosage given to patient.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E18_06	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

## Code List

<u>Code</u>	<u>Description</u>
3706001	Grams (gms)
3706003	Inches (in)
3706005	International Units (IU)
3706007	Keep Vein Open (kvo)
3706009	Liters (l)
3706013	Metered Dose (MDI)
3706015	Micrograms (mcg)
3706017	Micrograms per Kilogram per Minute (mcg/kg/min)
3706019	Milliequivalents (mEq)
3706021	Milligrams (mg)
3706023	Milligrams per Kilogram Per Minute (mg/kg/min)
3706025	Milliliters (ml)
3706027	Milliliters per Hour (ml/hr)
3706029	Other
3706031	Centimeters (cm)
3706033	Drops (gtts)
3706035	Liters Per Minute (LPM [gas])
3706037	Micrograms per Minute (mcg/min)
3706039	Milligrams per Kilogram (mg/kg)
3706041	Milligrams per Minute (mg/min)
3706043	Puffs
3706045	Units per Hour (units/hr)
3706047	Micrograms per Kilogram (mcg/kg)

3706049 Units  
3706051 Units per Kilogram per Hour (units/kg/hr)  
3706053 Units per Kilogram (units/kg)  
3706055 Milligrams per Hour (mg/hr)

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Otherwise put "Not Applicable".*

# Response to Medication

NEMSIS ID: eMedications.07 – Response to Medication

**Definition**

*The patient's response to the medication.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E18_07	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
9916001	Improved
9916003	Unchanged
9916005	Worse

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Otherwise put "Not Applicable".*

# Medication Complication

NEMSIS ID: eMedications.08 – Medication Complication

**Definition**

*Any complication (abnormal effect on the patient) associated with the administration of the medication to the patient by EMS.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E18_08	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

**Attributes**

**NOT Values (NV)**  
 7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**  
 Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
3708001	Altered Mental Status
3708003	Apnea
3708005	Bleeding
3708007	Bradycardia
3708009	Bradypnea
3708011	Diarrhea
3708013	Extravasation
3708015	Hypertension
3708017	Hyperthermia
3708019	Hypotension
3708021	Hypothermia
3708023	Hypoxia
3708025	Injury
3708029	Nausea
3708031	None
3708033	Other (Not Listed)
3708035	Respiratory Distress
3708037	Tachycardia
3708039	Tachypnea



3708043 Itching  
3708045 Urticaria

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Otherwise put "Not Applicable".*

# **Medication Crew (Healthcare Professionals) ID**

NEMESIS ID: *eMedications.09* – Medication Crew (Healthcare Professionals) ID

**Definition**

*The statewide assigned ID number of the EMS crew member giving the treatment to the patient.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E18_09	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

**Data Type:** string      **minLength:** 2      **maxLength:** 15

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (*eMedication.03*) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Otherwise put "Not Applicable".*

## Role/Type of Person Administering Medication

NEMSIS ID: *eMedications.10* – Role/Type of Person Administering Medication

**Definition**

*The type (level) of EMS or Healthcare Professional Administering the Medication. For medications administered prior to EMS arrival, this may be a non-EMS healthcare professional.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
9905001	Advanced Emergency Medical Technician (AEMT)
9905002	Emergency Medical Technician - Intermediate
9905003	Emergency Medical Responder (EMR)
9905005	Emergency Medical Technician (EMT)
9905007	Paramedic
9905019	Other Healthcare Professional
9905021	Other Non-Healthcare Professional
9905025	Physician
9905027	Respiratory Therapist
9905029	Student
9905031	Critical Care Paramedic
9905033	Community Paramedicine
9905035	Nurse Practitioner
9905037	Physician Assistant
9905039	Licensed Practical Nurse (LPN)
9905041	Registered Nurse
9905043	Patient



9905045 Lay Person  
9905047 Law Enforcement  
9905049 Family Member  
9905051 Fire Personnel (non-EMS)

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Otherwise put "Not Applicable".*

## **Medication Authorization**

NEMESIS ID: *eMedications.11* – Medication Authorization

**Definition**

*The type of treatment authorization obtained.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	No
NEMESIS v2 Element	E18_10	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

**Attributes**

**Code List**

<u>Code</u>	<u>Description</u>
9918001	On-Line (Remote Verbal Order)
9918003	On-Scene
9918005	Protocol (Standing Order)
9918007	Written Orders (Patient Specific)

**Data Element Comment/Validation Rules**

*This element is required if Medications Given (eMedication.03) is not a null value (Not Values) or a pertinent negative. In other words, if a medication is given, this element is required. Otherwise leave this element blank. This is one of the NEMESIS Version 3 elements used to document prior aid.*

# *eNarrative*

## Patient Care Report Narrative

NEMSIS ID: eNarrative.01 – Patient Care Report Narrative

**Definition**

*The narrative of the patient care report (PCR).*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E13_01	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

Data Type: string      minLength: 2      maxLength: 10000

**Data Element Comment/Validation Rules**

*This element is required for all runs entered into the OKEMSIS database. More than 25 characters are required for the patient care report narrative.*

# eOther

# Natural, Suspected, Intentional, Unintentional Disaster

NEMESIS ID: eOther.07 - Natural, Suspected, Intentional, Unintentional

**Definition**

*Events caused by natural forces or Suspected and Intentional/Unintentional Disasters (terrorism).*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	No
NEMESIS v2 Element	E23_04	Is Nillable	No
OKEMISIS Usage	Optional	Recurrence	0:M

**Associated Performance Measure Initiatives**

Trauma

**Attributes**

CorrelationID

Data Type: String    minLength: 2    maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
4507001	Biologic Agent
4507003	Building Failure
4507005	Chemical Agent
4507007	Explosive Device
4507009	Fire
4507011	Hostage Event
4507013	Mass Gathering
4507015	Mass Illness
4507017	Nuclear Agent
4507019	Radioactive Device
4507021	Secondary Destructive Device
4507023	Shooting/Sniper
4507025	Vehicular
4507027	Weather (Other)



4507029 Earthquake  
4507031 Flood  
4507033 Land Slide  
4507035 Winter Storm  
4507037 Tornado  
4507039 Hurricane

Data Element Comment

*Based on FEMA website*

# *eOutcome*



# Emergency Department Disposition

NEMESIS ID: eOutcome.01 – Emergency Department Disposition

## Definition

*The known disposition of the patient from the Emergency Department (ED).*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E22_01	Is Nillable	Yes
OKEMISIS Usage	Optional	Recurrence	1:1

## NEMESIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

## Code List

<u>Code</u>	<u>Description</u>
01	Discharged to home or self-care (routine discharge)
02	Discharged/transferred to another short-term general hospital for inpatient care
03	Discharged/transferred to a skilled nursing facility (SNF) {With Medicare certification in anticipation of covered skilled care. See Code 61 below.}
04	Discharged/transferred to an intermediate care facility (ICF)
05	Discharged/transferred to another type of institution not defined elsewhere in this code list
06	Discharged/transferred to home under care of organized home health service organization in anticipation of covered skills care
07	Left against medical advice or discontinued care
09	Admitted as an inpatient to this hospital.
20	Deceased/Expired (or did not recover - Religious Non-Medical Health Care Patient)
21	Discharged/transferred to court/law enforcement.
30	Still a patient or expected to return for outpatient services.
43	Discharged/transferred to a Federal Health Care Facility (e.g. VA or federal health care facility)

- 50 Discharged/transferred to Hospice - home.
- 51 Discharged/transferred to Hospice - medical facility
- 61 Discharged/transferred within this institution to a hospital based Medicare approved swing bed.
- 62 Discharged/transferred to a inpatient rehabilitation facility including distinct part units of a hospital.
- 63 Discharged/transferred to long term care hospitals
- 64 Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare
- 65 Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital.
- 66 Discharged/transferred to a Critical Access Hospital (CAH).
- 70 Discharged/transferred to another type of health care institution not defined elsewhere in the code list.

**Data Element Comment/Validation Rules**

*This element is only required if the EMS service has this information otherwise it can be defaulted to "Not Recorded". The list of values and codes is based on and in compliance with the Medicare Claims Processing Manual Chapter 25*

# Hospital Disposition

NEMESIS ID: eOutcome.02 – Hospital Disposition

**Definition**

*The known disposition of the patient from the hospital, if admitted.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E22_02	Is Nillable	Yes
OKEMISIS Usage	Optional	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
01	Discharged to home or self care (routine discharge)
02	Discharged/transferred to another short term general hospital for inpatient care
03	Discharged/transferred to a skilled nursing facility (SNF) {With Medicare certification in anticipation of covered skilled care. See Code 61 below.}
04	Discharged/transferred to an intermediate care facility (ICF)
05	Discharged/transferred to another type of institution not defined elsewhere in this code list
06	Discharged/transferred to home under care of organized home health service organization in anticipation of covered skills care
07	Left against medical advice or discontinued care
20	Deceased/Expired (or did not recover - Religious Non Medical Health Care Patient)
21	Discharged/transferred to court/law enforcement
30	Still a patient or expected to return for outpatient services.
43	Discharged/transferred to a Federal Health Care Facility (e.g. VA or federal health care facility)
50	Discharged/transferred to Hospice - home.
51	Discharged/transferred to Hospice - medical facility
61	Discharged/transferred within this institution to a hospital based Medicare approved swing bed.
62	Discharged/transferred to a inpatient rehabilitation facility including distinct part units of a hospital.
63	Discharged/transferred to long term care hospitals
64	Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare



- 65 Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital.
- 66 Discharged/transferred to a Critical Access Hospital (CAH).
- 70 Discharged/transferred to another type of health care institution not defined elsewhere in the code list.

**Data Element Comment/Validation Rules**

*This element is only required if the EMS service has this information otherwise it can be defaulted to “Not Recorded”. The list of values and codes is based on and in compliance with the Medicare Claims Processing Manual Chapter 25*

# *ePatient*

# Last Name

NEMSIS ID: ePatient.02 – Last Name

**Definition**

*The patient's last (family) name.*

NEMSIS National Element	No	Pertinent Negatives (PN)	Yes
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E06_01	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801019 – Refused    8801023 - Unable to Complete

**Constraints**

Data Type: string      minLength: 1      maxLength: 50

**Data Element Comment/Validation Rules**

*This element is required for eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section). Otherwise put the appropriate Pertinent Negative. If the EMS service call is cancelled or no patient found, put “Not Applicable”.*

# First Name

NEMESIS ID: ePatient.03 – First Name

## Definition

*The patient's first (given) name.*

NEMESIS National Element	No	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E06_02	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Pertinent Negatives (PN)

8801019 – Refused    8801023 - Unable to Complete

## Constraints

Data Type: string      minLength: 1      maxLength: 50

## Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section). Otherwise put the appropriate Pertinent Negative. If the EMS service call is cancelled or no patient found, put “Not Applicable”.*

## Middle Initial/Name

NEMSIS ID: ePatient.04 – Middle Initial/Name

### Definition

*The patient's middle name (if any).*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	No	NOT Values	Yes
NEMSIS v2 Element	E06_03	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

Data Type: string      minLength: 1      maxLength: 50

### Data Element Comment/Validation Rules

*This element is required as a part of the OKEMSIS version 3 dataset but documentation of the patient's middle initial or name isn't required by the State of Oklahoma. Documentation of this element is optional and up to the discretion of the EMS service.*



## Patient's Home Address

NEMESIS ID: ePatient.05 – Patient's Home Address

### Definition

*The patient's address of residence (home mailing or street address).*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E06_04	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

### Attributes and Constraints (both the same for this element)

**Pertinent Negatives (PN)**  
8801023 - Unable to Complete

**StreetAddress2**  
Data Type: string      minLength: 1      maxLength: 50

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section) otherwise leave it blank. This element allows for a two line documentation of the address. For out of country addresses the second line should be used to document, city, country, postal code and any other pertinent information.*

## Patient's Home City

NEMSIS ID: ePatient.06 – Patient's Home City

### Definition

*The patient's primary city or township of residence.*

NEMSIS National Element	No	Pertinent Negatives (PN)	Yes
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E06_05	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

### Attributes

**Pertinent Negatives (PN)**  
8801023 - Unable to Complete

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section). Otherwise put "Not Applicable". Based on GNIS Civil Code or Populated Place code.*

GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)

## Patient's Home County

NEMESIS ID: ePatient.07 – Patient's Home County

### Definition

*The patient's home county or parish of residence.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E06_06	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMESIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

Data Type: string      Length: 5

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section). Otherwise put "Not Applicable". Based on the ANSI Code Single Choice based on the County Name but stored as the ANSI code (combined 5 digit State and County codes).*

GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)

## Patient's Home State

NEMSIS ID: ePatient.08 – Patient's Home State

### Definition

*The state, territory, or province where the patient resides.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E06_07	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

Data Type: string      Length: 2

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section). Otherwise put "Not Applicable". The ANSI Code Selection by text but stored as ANSI code.*

GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)

## Patient's Home Zip Code

NEMSIS ID: ePatient.09 – Patient's Home Zip Code

### Definition

*The patient's ZIP code of residence.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E06_08	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

**Pattern**

[0-9]{5}||[0-9]{5}-[0-9]{4}||[0-9]{5}-[0-9]{5}||[A-Z][0-9][A-Z] [0-9][A-Z][0-9]

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section). Otherwise put "Not Applicable". ZIP Codes Product Website:*

<https://www.zipcodedownload.com/Products/Product/Z5Commercial/Standard/Overview/>

*Product: USA - 5-digit ZIP Code Database, Commercial Edition*

# Social Security Number

NEMESIS ID: ePatient.12 – Patient's Social Security Number

**Definition**

*The patient's social security number.*

NEMESIS National Element	No	Pertinent Negatives (PN)	Yes
NEMESIS State Element	No	NOT Values	No
NEMESIS v2 Element	E06_10	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**Attributes**

**Pertinent Negatives (PN)**  
8801023 - Unable to Complete

**Constraints**

Data Type: integer      maxInclusive: 999999999      minInclusive: 000000000

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section). If the patients SSN is not known, put 000-00-0000 (which is the null value in this case).*

# Gender

**NEMESIS ID: ePatient.13 – Gender**

**Definition**

*The patient's Gender.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E06_11	Is Nillable	Yes
OKEMSIS Usage	Required	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded      8801023 - Unable to Complete

**Code List**

<u>Code</u>	<u>Description</u>
9906001	Female
9906003	Male
9906007	Female-to-Male, Transgender Male
9906009	Male-to-Female, Transgender Female
9906011	Other, neither exclusively male or female
9906005	Unknown (Unable to Determine)

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put "Not Applicable".*

Code list referenced from: <https://www.healthit.gov/isa/sex-birth-sexual-orientation-and-gender-identity>

# Race

**NEMESIS ID: ePatient.14 – Race**

**Definition**

*The patient's race as defined by the OMB (US Office of Management and Budget).*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E06_12	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

CorrelationID

Data Type: string    minLength: 0    maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
2514001	American Indian or Alaska Native
2514003	Asian
2514005	Black or African American
2514007	Hispanic or Latino
2514009	Native Hawaiian or Other Pacific Islander
2514011	White

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put "Not Applicable".*



# Age

NEMSIS ID: ePatient.15 – Age

**Definition**

*The patient's age (either calculated from date of birth or best approximation).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E06_14	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

Data Type: integer      minInclusive: 1      maxInclusive: 120

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put "Not Applicable".*

# Age Units

**NEMESIS ID: ePatient.16 – Age Units**

**Definition**

*The unit used to define the patient's age.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E06_15	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Code</u>	<u>Description</u>
2516001	Days
2516003	Hours
2516005	Minutes
2516007	Months
2516009	Years

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put "Not Applicable".*

## Date of Birth

### NEMESIS ID: ePatient.17 – Date of Birth

#### Definition

*The patient's date of birth.*

<b>NEMESIS National Element</b>	No	<b>Pertinent Negatives (PN)</b>	Yes
<b>NEMESIS State Element</b>	Yes	<b>NOT Values</b>	Yes
<b>NEMESIS v2 Element</b>	E06_16	<b>Is Nillable</b>	Yes
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	0:1

#### Attributes

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801019 – Refused      8801023 – Unable to Complete

#### Constraints

**Data Type:** date      **minInclusive:** 1890-01-01      **maxInclusive:** 2050-01-01

#### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable” or the appropriate pertinent negative.*

## Patient's Phone Number

NEMESIS ID: ePatient.18 – Patient's Phone Number

### Definition

*The patient's phone number.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	No
NEMESIS v2 Element	E06_17	Is Nillable	Yes
OKEMSIS Usage	Optional	Recurrence	0:M

### Attributes

**Pertinent Negatives (PN)**  
8801023 - Unable to Complete

**CorrelationID**  
Data Type: String      minLength: 2      maxLength: 255

**PhoneNumberType**  
9913001 – Fax              9913003 - Home  
9913005 – Mobile        9913007 - Pager

### Constraints

**Pattern**  
[2-9][0-9][0-9]-[2-9][0-9][0-9]-[0-9][0-9][0-9][0-9]

### Data Element Comment/Validation Rules

*This element contains an attribute to define what type of phone number is being documented (e.g., Fax, Home, Mobile, Pager, and Work).*

## Alternate Home Residence

NEMESIS ID: ePatient.22 - Alternate Home Residence

**Definition**

*Alternate to patient's home residence.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Optional	Recurrence	0:1

**Attributes**

NOT Values (NV)

7701001 - Not Applicable

7701003 - Not Recorded

**Code List**

Code	Description
2522001	Homeless
2522003	Migrant Worker
2522005	Foreign Visitor

**Validation Rules**

Rule ID	Level	Message
nemSch_e001	Error	When Alternate Home Residence is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Alternate Home Residence has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.

# *ePayment*

# Primary Method of Payment

## NEMSIS ID: ePayment.01 – Primary Method of Payment

### Definition

The primary method of payment or type of insurance associated with this EMS encounter.

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E07_01	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measures

Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
2601001	Insurance	2601015	Payment by Facility
2601003	Medicaid	2601017	Contracted Payment
2601005	Medicare	2601019	Community Network
2601007	Not Billed (for any reason)	2601021	No Insurance Identified
2601009	Other Government	2601023	Other payment option
2601011	Self Pay		
2601013	Workers Compensation		
2601011	Self Pay		

### Data Element Comment/Validation Rules

This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put "Not Applicable".

# *eProcedure*



## Date/Time Procedure Performed

NEMESIS ID: eProcedures.01 – Date/Time Procedure Performed

**Definition**

*The date/time the procedure was performed on the patient*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E19_01	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

**Pattern**

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) AND a procedure was performed (eProcedures.03). Otherwise put “Not Applicable”. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMISIS”](#).*

# Procedure Performed Prior to this Unit's EMS Care

NEMSIS ID: *eProcedures.02* – Procedure Performed Prior to this Unit's EMS Care

**Definition**

*Indicates that the procedure which was performed and documented was performed prior to this EMS units care.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E19_02	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
9923001	No
9923003	Yes

**Data Element Comment/Validation Rules**

*This element is required if Procedures (*eProcedures.03*) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise put "Not Applicable". This is the NEMSIS Version 3 method to document prior aid.s*

# Procedure

NEMSIS ID: eProcedures.03 – Procedure

## Definition

*The procedure performed on the patient.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E19_03	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

## NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Pertinent Negatives (PN)

8801001 - Contraindication Noted      8801003 - Denied By Order      8801019 - Refused  
 8801023 - Unable to Complete      8801027 - Order Criteria Not Met

## Constraints

Data Type: integer      minInclusive: 10000      maxInclusive: 999999999999999

## Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put the appropriate Pertinent Negative. For cancelled/no patient found or patient refusals put "Not Applicable". Procedures which are recorded as a Vital Sign do not have to be documented in the Procedure Section. All software vendors must match their procedure code list with the [OKEMSIS procedures](#) located in the appendix of this document.*

## *Number of Procedure Attempts*

**NEMSIS ID: eProcedures.05 – Number of Procedure Attempts**

**Definition**

*The number of attempts taken to complete a procedure or intervention regardless of success.*

<b>NEMSIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	No
<b>NEMSIS State Element</b>	Yes	<b>NOT Values</b>	Yes
<b>NEMSIS v2 Element</b>	E19_05	<b>Is Nillable</b>	Yes
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

**Data Type: integer      minInclusive: 1      maxInclusive: 10**

**Data Element Comment/Validation Rules**

*This element is required if Procedures (eProcedures.03) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise put "Not Applicable".*

# Procedure Successful

NEMESIS ID: *eProcedures.06* – Procedure Successful

**Definition**

*Indicates that this procedure attempt which was performed on the patient was successful.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E19_06	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
9923001	No
9923003	Yes

**Data Element Comment/Validation Rules**

*This element is required if Procedures (*eProcedures.03*) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise put "Not Applicable".*

# Procedure Complication

NEMESIS ID: eProcedures.07 – Procedure Complication

**Definition**

*Any complication (abnormal effect on the patient) associated with the performance of the procedure on the patient.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E19_07	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:M

**NEMESIS Associated Performance Measure Initiatives**

*Airway Pediatric Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
3907001	Altered Mental Status
3907003	Apnea
3907005	Bleeding
3907007	Bradypnea
3907009	Diarrhea
3907011	Esophageal Intubation-immediately
3907013	Esophageal Intubation-other
3907015	Extravasation
3907017	Hypertension
3907019	Hyperthermia
3907021	Hypotension
3907023	Hypothermia
3907025	Hypoxia
3907027	Injury
3907029	Itching/Urticaria
3907031	Nausea



3907033	None
3907035	Other (Not Listed)
3907037	Portacath
3907039	Respiratory Distress
3907041	Tachycardia
3907043	Tachypnea
3907045	Vomiting
3907047	Bradycardia

#### Data Element Comment/Validation Rules

*This element is required if Procedures (eProcedures.03) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise put "Not Applicable".*

## Response to Procedure

NEMESIS ID: *eProcedures.08* – Response to Procedure

**Definition**

*The patient's response to the procedure.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E19_08	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
9916001	Improved
9916003	Unchanged
9916005	Worse

**Data Element Comment/Validation Rules**

*This element is required if Procedures (*eProcedures.03*) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise put "Not Applicable".*



## Procedure Crew Members ID

NEMSIS ID: *eProcedures.09* – Procedure Crew Members ID

**Definition**

*The statewide assigned ID number of the EMS crew member performing the procedure on the patient.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E19_09	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded      7701005 – Not Reporting

**Constraints**

Data Type: string      minLength: 2      maxLength: 15

**Data Element Comment/Validation Rules**

*This element is required if Procedures (*eProcedures.03*) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise put “Not Applicable”. For an incident that occurs in multiple states, the certification ID number the EMS agency would typically use is based on the EMS agency's state license specific to each EMS professional. If the incident needs to be reported to each state, then the EMS Agency Number for each state should be submitted as well as the certification ID numbers for each EMS professional on the unit.*

# Role/Type of Person Performing the Procedure

NEMESIS ID: eProcedures.10 – Role/Type of Person Performing the Procedure

**Definition**

*The type (level) of EMS or Healthcare Professional Performing the Procedure. For procedures performed prior to EMS arrival, this may be a non-EMS healthcare professional.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

Code	Description
9905001	Advanced Emergency Medical Technician (AEMT)
9905002	Emergency Medical Technician - Intermediate
9905003	Emergency Medical Responder (EMR)
9905005	Emergency Medical Technician (EMT)
9905007	Paramedic
9905019	Other Healthcare Professional
9905021	Other Non-Healthcare Professional
9905025	Physician
9905027	Respiratory Therapist
9905029	Student
9905031	Critical Care Paramedic
9905033	Community Paramedicine
9905035	Nurse Practitioner
9905037	Physician Assistant
9905039	Licensed Practical Nurse (LPN)
9905041	Registered Nurse
9905043	Patient



9905045 Lay Person  
9905047 Law Enforcement  
9905049 Family Member  
9905051 Fire Personnel (non EMS)

**Data Element Comment/Validation Rules**

*This element is required if Procedures (eProcedures.03) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise put "Not Applicable".*

# Procedure Authorization

NEMSIS ID: eProcedures.11 – Procedure Authorization

## Definition

*The type of procedure authorization obtained.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	No	NOT Values	No
NEMSIS v2 Element	E19_10	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

## Attributes

## Code List

<u>Code</u>	<u>Description</u>
9918001	On-Line (Remote Verbal Order)
9918003	On-Scene
9918005	Protocol (Standing Order)
9918007	Written Orders (Patient Specific)

## Data Element Comment/Validation Rules

*This element is required if Procedures (eProcedures.03) is not a null value (Not Values) or a pertinent negative. In other words, if a procedure is performed, this element is required. Otherwise leave this element blank.*

# *eRecord*

# Patient Care Report Number

NEMSIS ID: eRecord.01 – Patient Care Report Number

## Definition

*The unique number automatically assigned by the EMS agency for each Patient Care Report (PCR). This should be a unique number for the EMS agency for all of time.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E01_01	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

## NEMSIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

## Constraints

Data Type: string    minLength: 3    maxLength: 32

## Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMSIS (XML header and EMS incident). For agencies who import to the state, this number can be auto-generated by their software vendor. If an agency enters their data through the web forms on the state database, they can use the auto-generated number on the form or create your own using the following format: the first 3 numbers should be the EMS license number for that agency (example: 41 should be entered as "041" and 100 entered as "100"). The second 4 numbers should be the year of the incident. After the license number and year, it is up to the EMS service what to put as the rest of the Patient Care Report Number (as long as it doesn't exceed 32 characters). If the incident is a mass casualty incident or there are several patients at the scene and that unit treats them, each person has to have a separate run sheet with a unique Patient Care Report Number.*

# Software Creator

NEMSIS ID: eRecord.02 – Software Creator

## Definition

*The name of the vendor, manufacturer, and developer who designed the application that created this record.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E01_02	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

## Constraints

Data Type: string    minLength: 1    maxLength: 50

## Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMSIS (header of xml file). This is required to document the software used to generate the Patient Care Report. This is not the last software which aggregated/stored the Patient Care Report after it was sent from another software.*

## Software Name

NEMSIS ID: eRecord.03 – Software Name

### Definition

*The name of the application used to create this record.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E01_03	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### Constraints

Data Type: string    minLength: 1    maxLength: 50

### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMSIS (header of xml file). This is the EMS Agency's software, not the state or other level software which electronically received the data from the local EMS Agency.*



## Software Version

NEMESIS ID: eRecord.04 – Software Version

### Definition

*The version of the application used to create this record.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	E01_04	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

### Constraints

Data Type: string    minLength: 1    maxLength: 50

### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMISIS (header of xml file). This is the EMS Agency's software version, not the state or other level software which electronically received the data from the local EMS Agency.*

# *eResponse*

## EMS Agency Number

NEMSIS ID: eResponse.01 – EMS Agency Number

### Definition

*The state-assigned provider number of the responding agency.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E02_01	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Constraints

Data Type: string    minLength: 1    maxLength: 15

### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMSIS. The EMS Agency Number in eResponse.01 can auto-populate from dAgency.02 EMS Agency Number in the demographic section.*

# EMS Response Number

NEMSIS ID: eResponse.04 – EMS Response Number

### Definition

*The internal EMS response number which is used for each EMS Vehicle's (Unit) response to an incident within an EMS Agency.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E02_03	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Constraints

Data Type: string    minLength: 3    maxLength: 32

### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMSIS. This number is assigned by the EMS agency and can be a unique number or auto-populated from eResponse.01 (Patient Care Report Number). This element can have any format the EMS service needs as long as it fits the parameters above. If the incident is a mass casualty incident or there are several patients at the scene and that individual unit treats them, each person can have the same EMS Response Number as long as there is a unique Patient Care Report Number and run sheet for each patient.*

## Type of Service Requested

NEMESIS ID: eResponse.05 – Type of Service Requested

**Definition**

*The type of service or category of service requested of the EMS Agency responding for this specific EMS event.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	E02_04	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

Code	Description
2205001	Emergency Response (Primary Response Area)
2205003	Emergency Response (Intercept)
2205009	Emergency Response (Mutual Aid)
2205005	Hospital-to-Hospital Transfer
2205015	Hospital to Non-Hospital Facility Transfer
2205017	Non-Hospital Facility to Non-Hospital Facility Transfer
2205019	Non-Hospital Facility to Hospital Transfer
2205007	Other Routine Medical Transport
2205011	Public Assistance
2205013	Standby
2205021	Support Services
2205023	Non-Patient Care Rescue/Extrication
2205025	Crew Transport Only
2205027	Transport of Organs or Body Parts
2205029	Mortuary Services
2205031	Mobile Integrated Health Care Encounter
2205033	Evaluation for Special Referral/Intake Programs
2205035	Administrative Operations

**Data Element Comment/Validation Rules**

*Values for "911 Response (Scene)", "Intercept", and "Mutual Aid" have been relabeled to start with "Emergency Response" to more easily identify these options. "Interfacility*



***Transport" was relabeled to "Hospital-to-Hospital Transfer" to be more accurate; options for "Sending Hospital Staff" and "Critical or Specialty Care" were added to better track resource utilization at local and state levels and support reimbursement levels. "Medical Transport" was relabeled to "Other Medical Needs Transport" to cover any other medical transports such as transports to and from dialysis, doctor appointments, return home, or nursing homes. Values added to consolidate types of service previously captured in "Primary Role of Unit" and eDisposition.12 as found in V3.4.0. Additional values added to reflect emerging service types.***

# Standby Purpose

NEMSIS ID: eResponse.06 – Standby Purpose

**Definition**

*The main reason the EMS unit is on standby as the Type of Service Requested for the EMS event.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	No	NOT Values	No
NEMSIS v2 Element		Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

**Code List**

<u>Code</u>	<u>Description</u>
2206001	Disaster Event-Drill/Exercise
2206003	Disaster Event-Live Staging
2206005	Education
2206007	EMS Staging-Improve Coverage
2206009	Fire Support-Rehab
2206011	Fire Support-Standby
2206013	Mass Gathering-Concert/Entertainment Event
2206015	Mass Gathering-Fair/Community Event
2206017	Mass Gathering-Sporting Event
2206019	Other
2206021	Public Safety Support

**Data Element Comment/Validation Rules**

*This element is required if the Type of Service Requested (eResponse.05) is "Standby" (code 2205013). Added to better document the reason for a "Standby". This information will assist in the analysis of EMS service delivery, special event coverage, etc.*

## Primary Role of the Unit

NEMSIS ID: eResponse.07 – Unit Transport and Equipment Capability

**Definition**

*The transport and equipment capabilities of the EMS Unit which responded to this specific EMS event.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E02_05	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

Code	Description
2207011	Air Transport-Helicopter
2207013	Air Transport-Fixed Wing
2207015	Ground Transport (ALS Equipped)
2207017	Ground Transport (BLS Equipped)
2207019	Ground Transport (Critical Care Equipped)
2207021	Non-Transport-Medical Treatment (ALS Equipped)
2207023	Non-Transport-Medical Treatment (BLS Equipped)
2207025	Wheel Chair Van/Ambulette
2207027	Non-Transport-No Medical Equipment

**Data Element Comment/Validation Rules**

*Element relabeled from "Primary Role of Unit" to "Unit Transport and Equipment Capability" to better reflect its new defined purpose and allow the deprecation of eResponse.15 "Level of Care of This Unit". v3.4.0 Non-Transport values deprecated as these are types of service and were moved to eResponse.05 "Type of Service Requested". Values have been added to better capture transport capability and available equipment. These values should be tied to the capabilities and role of the unit, and not reflect the level of providers responding to an event.*



## Type of Dispatch Delay

NEMSIS ID: eResponse.08 – Type of Dispatch Delay

**Definition**

*The dispatch delays, if any, associated with the dispatch of the EMS unit to the EMS event. A dispatch delay is any time delay that occurs from the time of PSAP call (eTimes.01) to the time the unit is notified by dispatch (eTimes.03).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E02_06	Is Nillable	No
OKEMSIS Usage	Required	Recurrence	1:M

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

NOT Values (NV)

7701001 - Not Applicable

7701003 - Not Recorded

CorrelationID

Data Type: String    minLength: 2    maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
2208001	Caller (Uncooperative)
2208003	Diversion/Failure (of previous unit)
2208005	High Call Volume
2208007	Language Barrier
2208009	Location (Inability to Obtain)
2208011	No EMS Vehicles (Units) Available
2208013	None/No Delay
2208015	Other
2208017	Technical Failure (Computer, Phone etc.)
2208019	Communication Specialist-Assignment Error
2208021	No Receiving MD, Bed, Hospital
2208023	Specialty Team Delay

**Data Element Comment/Validation Rules**

***A dispatch delay is any time delay that occurs from the time of PSAP call (eTimes.01) to the time the unit is notified by dispatch (eTimes.03).***

# Type of Response Delay

NEMSIS ID: eResponse.09 – Type of Response Delay

**Definition**

*The response delays, if any, of the EMS unit associated with the EMS event. A response delay is any time delay that occurs from the time the unit is notified by dispatch (eTimes.03) to the time the unit arrived on scene (eTimes.06).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E02_07	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:M

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

CorrelationID

Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
2209001	Crowd
2209003	Directions/Unable to Locate
2209005	Distance
2209007	Diversion (Different Incident)
2209009	HazMat
2209011	None/No Delay
2209013	Other (Not Listed)
2209015	Rendezvous Transport Unavailable
2209017	Route Obstruction (e.g., train)
2209019	Scene Safety (Not Secure for EMS)
2209021	Staff Delay
2209023	Traffic
2209025	Vehicle Crash Involving this Unit
2209027	Vehicle Failure of this Unit
2209029	Weather
2209031	Mechanical Issue-Unit, Equipment, etc.
2209033	Flight Planning



### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMISIS. "Rendezvous Transport Unavailable" added for situations where there is a wait for an EMS Transport Unit, a Ferry, Air Medical, etc to return to service.*

# Type of Scene Delay

NEMSIS ID: eResponse.10 – Type of Scene Delay

**Definition**

*The scene delays, if any, of the EMS unit associated with the EMS event. Scene delay is any time delay that occurs from the time the unit arrived on scene (eTimes.06) to the time the unit left the scene (eTimes.09).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E02_08	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

**Code List**

Code	Description
2210001	Awaiting Air Unit
2210003	Awaiting Ground Unit
2210005	Crowd
2210007	Directions/Unable to Locate
2210009	Distance
2210011	Extrication
2210013	HazMat
2210015	Language Barrier
2210017	None/No Delay
2210019	Other (Not Listed)
2210021	Patient Access
2210023	Safety-Crew/Staging
2210025	Safety-Patient
2210027	Staff Delay
2210029	Traffic



2210031 Triage/Multiple Patients  
2210033 Vehicle Crash Involving this Unit  
2210035 Vehicle Failure of this Unit  
2210037 Weather  
2210039 Mechanical Issue-Unit, Equipment, etc.

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”.*

## Type of Transport Delay

NEMSIS ID: eResponse.11 – Type of Transport Delay

**Definition**

*The transport delays, if any, of the EMS unit associated with the EMS event. A transport delay is any time delay that occurs from the time the unit left the scene (eTimes.09) to the time the patient arrived at the destination (eTimes.10).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E02_09	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

**Code List**

<u>Code</u>	<u>Description</u>
2211001	Crowd
2211003	Directions/Unable to Locate
2211005	Distance
2211007	Diversion
2211009	HazMat
2211011	None/No Delay
2211013	Other (Not Listed)
2211015	Rendezvous Transport Unavailable
2211017	Route Obstruction (e.g., Train)
2211019	Safety
2211021	Staff Delay
2211023	Traffic
2211025	Vehicle Crash Involving this Unit
2211027	Vehicle Failure of this Unit
2211029	Weather



2211031 Patient Condition Change (e.g. Unit Stopped)

**Data Element Comment/Validation Rules**

*This element is required if eDisposition.30 (Transport Disposition) includes the codes 4230001, 4230003. "Rendezvous Transport Unavailable" added for situations where there is a wait for an EMS Transport Unit, a Ferry, Air Medical, etc.*



## Type of Turn-Around Delay

NEMSIS ID: eResponse.12 – Type of Turn-Around Delay

**Definition**

*The turn-around delays, if any, of the EMS unit associated with the EMS event. Turn-around delay is any time delay that occurs from the time the patient arrived at the destination (eTimes.10) until the time the unit is back in service (eTimes.13) or unit back at the home location (eTimes15) [whichever is the greater of the two times].*

<b>NEMSIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	No
<b>NEMSIS State Element</b>	Yes	<b>NOT Values</b>	Yes
<b>NEMSIS v2 Element</b>	E02_10	<b>Is Nillable</b>	Yes
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	1:M

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

**Code List**

Code	Description
2212001	Clean-up
2212003	Decontamination
2212005	Distance
2212007	Documentation
2212009	ED Overcrowding / Transfer of Care
2212011	Equipment Failure
2212013	Equipment/Supply Replenishment
2212015	None/No Delay
2212017	Other (Not Listed)
2212019	Rendezvous Transport Unavailable
2212021	Route Obstruction (e.g. Train)
2212023	Staff Delay
2212025	Traffic

2212027 Vehicle Crash of this Unit  
2212029 Vehicle Failure of this Unit  
2212031 Weather  
2212033 EMS Crew Accompanies Patient for Facility Procedure

**Data Element Comment/Validation Rules**

*This element is required if eDisposition.30 (Transport Disposition) includes the codes 4230001, 4230003. Otherwise put "Not Applicable". "Rendezvous Transport Unavailable" added for situations where there is a wait for an EMS Transport Unit, a Ferry, Air Medical, etc.*

## EMS Vehicle (Unit) Number

NEMISIS ID: eResponse.13 – EMS Vehicle (Unit) Number

### Definition

*The unique physical vehicle number of the responding unit.*

NEMISIS National Element	Yes	Pertinent Negatives (PN)	No
NEMISIS State Element	Yes	NOT Values	No
NEMISIS v2 Element	E02_11	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	1:1

### Constraints

Data Type: string      minLength: 1      maxLength: 25

### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMISIS. This is recommended to be the State Vehicle Permit Number if unique to the vehicle. If the vehicle is not licensed by the state, this should be a unique number only associated with a specific vehicle. This element can be populated from dVehicle.01 - Unit/Vehicle Number if available.*

# EMS Unit Call Sign

NEMSIS ID: eResponse.14 – EMS Unit Call Sign

### Definition

*The EMS unit number used to dispatch and communicate with the unit. This may be the same as the EMS Unit/Vehicle Number in many agencies.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E02_12	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### Constraints

Data Type: string      minLength: 1      maxLength: 50

### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMSIS. This element could be populated from a list created in dVehicle.03 EMS Unit Call Sign or dConfiguration.16 (Crew Call Sign).*

## Level of Care of This Unit

### NEMSIS ID: eResponse.15 – Level of Care of This Unit

#### Definition

*The level of care (BLS or ALS) the unit is able to provide based on the units' treatment capabilities for this EMS response.*

<b>NEMSIS National Element</b>	Yes	<b>Pertinent Negatives (PN)</b>	No
<b>NEMSIS State Element</b>	Yes	<b>NOT Values</b>	No
<b>NEMSIS v2 Element</b>		<b>Is Nillable</b>	No
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	1:1

#### NEMSIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

#### Code List

Code	Description
2215001	BLS-EMR
2215003	BLS-EMT
2215009	ALS-AEMT
2215011	ALS-Intermediate
2215013	ALS-Paramedic
2215015	ALS-Community Paramedicine
2215017	ALS-Nurse
2215019	ALS-Physician
2215021	Specialty Critical Care

#### Data Element Comment/Validation Rules

*This element is required for all EMS runs entered into OKEMSIS. Added to identify the level of care (license level) the EMS unit/crew can provide regardless of patient need, based on this unit's capabilities.*

# Response Mode to Scene

NEMSIS ID: eResponse.23 – Response Mode to Scene

**Definition**

*The indication whether the response was emergent or non-emergent. An emergent response is an immediate response (typically using lights and sirens).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E02_20	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Code List**

<u>Code</u>	<u>Description</u>
2223001	Emergent (Immediate Response)
2223003	Emergent Downgraded to Non-Emergent
2223005	Non-Emergent
2223007	Non-Emergent Upgraded to Emergent

**Data Element Comment/Validation Rules**

*This element is required for all EMS runs entered into OKEMSIS.*

# eScene

## Number of Patients at Scene

NEMESIS ID: eScene.06 – Number of Patients at Scene

### Definition

*Indicator of how many total patients were at the scene.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E08_05	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

<u>Code</u>	<u>Description</u>
2707001	Multiple
2707003	None
2707005	Single

### Data Element Comment/Validation Rules

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). This element is not required for the eDisposition.27 codes 4227005 or 4227011 (put “Not Applicable” for those codes).*



# Mass Casualty Incident

NEMSIS ID: eScene.07 – Mass Casualty Incident

**Definition**

*Indicator if this event would be considered a mass casualty incident (overwhelmed existing EMS resources).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E08_06	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

**Trauma**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
9923001	No
9923003	Yes

**Data Element Comment/Validation Rules**

*This element is required for all eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). This element is not required for the eDisposition.27 codes 4227005 or 4227011 (put “Not Applicable” for those codes).*

## Incident Location Type

**NEMSIS ID: eScene.09 – Incident Location Type**

**Definition**

*The kind of location where the incident happened.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E08_07	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Constraints**

Pattern

Y92\[0-9]{1,3}

**Data Element Comment/Validation Rules**

*This element is required for all EMS service runs. A list of [Incident location types](#) can be found in the appendix of this document.*

# Incident Facility Code

NEMSIS ID: eScene.10 – Incident Facility Code

**Definition**

*The state, regulatory, or other unique number (code) associated with the facility if the Incident Location is a Healthcare Facility.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E08_08	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

Data Type: string      minLength: 2      maxLength: 50

**Data Element Comment/Validation Rules**

*This element is mandatory if the incident location type is a hospital or healthcare facility (including nursing homes, codes Y92.12, Y92.23, Y92.53, Y92.530, Y92.532). If Type of Service Requested (eResponse.05) includes the codes 2205005 or 2205015 and Incident/Patient Disposition includes codes 4212033, 4212031, or 4212013 then both Incident Facility Code and Destination Transferred To Code ARE MANDATORY. A list of [incident facility codes](#) can be found in the appendix of this document. A list of [Incident location types](#) and codes can also be found in the appendix of this document.*

## Scene GPS Location

NEMSIS ID: eScene.11 – Scene GPS Location

**Definition**

*The GPS coordinates associated with the Scene.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E08_10	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Constraints**

Pattern

`(\+|-)?(90(\.[0]{1,6})?|([1-8][0-9]||[0-9])(\.[0-9]{1,6})?),(\+|-)?(180(\.[0]{1,6})?|(1[0-7][0-9]||[1-9][0-9]||[0-9])(\.[0-9]{1,6})?)`

**Data Element Comment/Validation Rules**

*This element is mandatory in the OKEMSIS dataset but can be left blank if the EMS service does not have the capability to collect this data. The pattern for GPS location is in the format "latitude,longitude" where:*

- latitude has a minimum of -90 and a maximum of 90 with up to 6 decimal places
- longitude has a minimum of -180 and a maximum of 180 with up to 6 decimal places

# Incident Street Address

NEMESIS ID: eScene.15 – Incident Street Address

**Definition**

*The street address where the patient was found, or, if no patient, the address to which the unit responded.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	No
NEMESIS v2 Element	E08_11	Is Nillable	No
OKEMISIS Usage	Mandatory	Recurrence	0:1

**Attributes**

StreetAddress2

Data Type: string          minLength: 1    maxLength: 55

**Constraints**

Data Type: string          minLength: 2    maxLength: 55

**Data Element Comment/Validation Rules**

*This element is required for all EMS service runs.*

# Incident City

NEMSIS ID: eScene.17 – Incident City

**Definition**

*The city or township (if applicable) where the patient was found or to which the unit responded (or best approximation).*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E08_12	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	0:1

**Data Element Comment/Validation Rules**

*This element is required for all EMS service runs. Incident City based on GNIS Civil Code or Populated Place code.*

GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm)

# Incident State

NEMSIS ID: eScene.18 – Incident State

### Definition

*The state, territory, or province where the patient was found or to which the unit responded (or best approximation).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E08_14	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Constraints

Data Type: string      Length: 2

### Data Element Comment/Validation Rules

*This element is required for all EMS service runs. Incident State is based on the ANSI State Code.*

*GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm) .*

# Incident Zip Code

NEMSIS ID: eScene.19 – Incident Zip Code

**Definition**

*The ZIP code of the incident location.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E08_15	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Constraints**

Pattern

[0-9]{5}[[0-9]{5}-[0-9]{4}][0-9]{5}-[0-9]{5}][A-Z][0-9][A-Z] [0-9][A-Z][0-9]

**Data Element Comment/Validation Rules**

*This element is required for all EMS service runs. ZIP Codes Product Website: <https://www.zipcodedownload.com/Products/Product/Z5Commercial/Standard/Overview/> Product: USA - 5-digit ZIP Code Database, Commercial Edition.*



# Incident County

NEMSIS ID: eScene.21 – Incident County

**Definition**

*The county or parish where the patient was found or to which the unit responded (or best approximation).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E08_13	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Constraints**

Data Type: string      Length: 5

**Data Element Comment/Validation Rules**

*This element is required for all EMS service runs. Incident County is based on the ANSI Code Single Choice based on the County Name but stored as the ANSI code (combined 5 digit State and County codes).*

GNIS Codes Website: [http://geonames.usgs.gov/domestic/download\\_data.htm](http://geonames.usgs.gov/domestic/download_data.htm) .

# *eSituation*

# Date/Time of Symptom Onset/Last Normal

NEMESIS ID: eSituation.01 – Date/Time of Symptom Onset/Last Normal

**Definition**

*The date and time the symptom began as it relates to this EMS event. This is described or estimated by the patient, family, and/or healthcare professionals.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E05_01	Is Nillable	Yes
OKEMISIS Usage	Required	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable                      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801023 - Unable to Complete                      8801029 - Approximate

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”. For stroke related events, this is the date and time the patient was last seen normal. For cardiac or respiratory arrest related events, this is the date and time the patient was last known to have a pulse or when interaction was had with the patient. For drowning related events, this is the date and time the patient was last seen. The intent of this element is to document the estimate date and time the patient was last known to be*



*in their normal state. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMISIS”](#).*



# Possible Injury

NEMESIS ID: eSituation.02 – Possible Injury

**Definition**

*Indication whether or not there was an injury (based off external mechanism of injury).*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E09_04	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
9922001	No
9922003	Unknown
9922005	Yes

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) AND a primary or secondary provider impression of “Trauma” (\* Trauma defined in definition section). Otherwise put “Not Applicable”. This data element provides documentation to classify the EMS Reason for Encounter as either injury or non-injury related based on external mechanism and not on actual injury.*

# Complaint

NEMSYS ID: eSituation.04 – Complaint

**Definition**

*The statement of the problem by the patient or the history provider.*

NEMSYS National Element	No	Pertinent Negatives (PN)	No
NEMSYS State Element	Yes	NOT Values	Yes
NEMSYS v2 Element	E09_05	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	0:1

**NEMSYS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

Data Type: string      minLength: 1      maxLength: 255

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”.*

# Duration of Complaint

NEMESIS ID: eSituation.05 – Duration of Complaint

**Definition**

*The duration of the complaint.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E09_06	Is Nillable	Yes
OKEMISIS Usage	Recommended	Recurrence	0:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway      Cardiac Arrest      Pediatric      STEMI      Stroke      Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded      7701005 - Not Reporting

**Constraints**

Data Type: integer      minLength: 1      maxLength: 255

**Data Element Comment/Validation Rules**

*Associated with eSituation.06 (Time Units of Duration of the Complaint).*

**Associated Validation Rules**

Rule ID	Level	Message
nemSch_e001	Error	When Duration of Complaint is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Duration of Complaint has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.

# Time Units of Duration of Complaint

NEMESIS ID: eSituation.06 – Time Units of Duration of Complaint

**Definition**

*The time units of the duration of the patient's complaint.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E09_07	Is Nillable	Yes
OKEMISIS Usage	Recommended	Recurrence	0:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway      Cardiac Arrest      Pediatric      STEMI      Stroke      Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded      7701005 - Not Reporting

**Code List**

<u>Code</u>	<u>Description</u>
2806001	Seconds
2806003	Minutes
2806005	Hours
2806007	Days
2806009	Weeks
2806011	Months
2806013	Years

**Data Element Comment/Validation Rules**

*Associated with eSituation.05 (Duration of the Complaint).*

**Associated Validation Rules**

<i>Rule ID</i>	<i>Level</i>	<i>Message</i>
nemSch_e001	Error	When Time Units of Duration of Complaint is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).



nemSch\_e002 **Error** When Time Units of Duration of Complaint has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.

**OKEMSIS ID: eSituation.07**

**Oklahoma PCR #: 70**

## Chief Complaint Anatomic Location

NEMESIS ID: eSituation.07 – Chief Complaint Anatomic Location

### Definition

*The primary anatomic location of the chief complaint as identified by EMS personnel.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E09_11	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMESIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

<u>Code</u>	<u>Description</u>
2807001	Abdomen
2807003	Back
2807005	Chest
2807007	Extremity-Lower
2807009	Extremity-Upper
2807011	General/Global
2807013	Genitalia
2807015	Head
2807017	Neck

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”.*

# Chief Complaint Organ System

NEMESIS ID: eSituation.08 – Chief Complaint Organ System

**Definition**

*The primary organ system of the patient injured or medically affected.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E09_12	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
2808001	Behavioral/Psychiatric
2808003	Cardiovascular
2808005	CNS/Neuro
2808007	Endocrine/Metabolic
2808009	GI
2808011	Global/General
2808013	Lymphatic/Immune
2808015	Musculoskeletal/Skin
2808017	Reproductive
2808019	Pulmonary
2808021	Renal

**Data Element Comment/Validation Rules**

*This element is required for eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”.*

# Primary Symptom

NEMESIS ID: eSituation.09 – Primary Symptom

**Definition**

*The primary sign and symptom present in the patient or observed by EMS personnel.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E09_13	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

**Pattern**

**(R[0-6][0-9](\.[0-9]{1,4})?(R73\9)(R99))([A-QSTZ][0-9]{2})(\.[0-9A-Z]{1,4})?**

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”. A list of [Symptoms](#) accepted by OKEMISIS can be found in the appendix of this document. Code list is represented in ICD-10-CM Diagnosis Codes. Reference the NEMESIS Suggested Lists at: <http://nemsis.org/v3/resources.html>*

## Other Associated Symptoms

NEMESIS ID: eSituation.10 – Other Associated Symptoms

**Definition**

*Other symptoms identified by the patient or observed by EMS personnel.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E09_14	Is Nillable	Yes
OKEMISIS Usage	Required	Recurrence	1:M

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801031 - Symptom Not Present

**CorrelationID**

Data Type: string      minLength: 0      maxLength: 255

**Constraints**

Pattern

**(R[0-6][0-9](\.[0-9]{1,4})?(R73\.[9])(R99))([A-QSTZ][0-9]{2})(\.[0-9A-Z]{1,4})?**

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”. A list of [Symptoms](#) accepted by OKEMISIS can be found in the appendix of this document.*

## Provider's Primary Impression

NEMSIS ID: eSituation.11 – Provider's Primary Impression

### Definition

*The EMS personnel's impression of the patient's primary problem or most significant condition which led to the management given to the patient (treatments, medications, or procedures).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E09_15	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

#### Pattern

**(R[0-6][0-9](\.[0-9]{1,3})?(R73\9)(R99))([A-QSTZ][0-9]{2})(\.[0-9A-Z]{1,4})?**

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put "Not Applicable". A list of [impressions](#) accepted by OKEMSIS can be found in the appendix of this document. For inter-facility transports put the condition of the patient, as assessed by medical personnel, as the first impression. If a medical assessment is not available, put the EMT's impression as your primary impression.*

## Provider's Secondary Impressions

NEMSIS ID: eSituation.12 – Provider's Secondary Impressions

### Definition

The EMS personnel's impression of the patient's secondary problem or most significant condition which led to the management given to the patient (treatments, medications, or procedures).

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E09_16	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

### NEMSIS Associated Performance Measure Initiatives

Airway Cardiac Arrest Pediatric STEMI Stroke Trauma

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### CorrelationID

Data Type: string      minLength: 0      maxLength: 255

### Constraints

#### Pattern

(R[0-6][0-9](\.[0-9]{1,3})?|(R73\.[9])(R99))|([A-QSTZ][0-9]{2})(\.[0-9A-Z]{1,4})?

### Data Element Comment/Validation Rules

This element is required for any eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). Otherwise put "Not Applicable". A list of [Impressions](#) accepted by OKEMSIS can be found in the appendix of this document.

# Patient Priority Status

NEMSIS ID: eSituation.13 – Initial Patient Acuity

### Definition

A number (Priority 1, 2 or 3) assigned to a patient that is a score summarizing the patient status. Scoring based on Custom.01 (Trauma Triage Criteria).

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	No	NOT Values	Yes
NEMSIS v2 Element	Custom	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### Attributes

#### NOT Values (NV)

7701003 - Not Applicable      7701001 - Not Recorded

### Code List

Code	Description
it2813.100	Priority 1
it2813.101	Priority 2
it2813.102	Priority 3

### Data Element Comment/Validation Rules

This element is required if Possible Injury is “Yes” or Provider Impression is associated with trauma. Otherwise put “Not Applicable”.

*\*Trauma and priority status are defined in definition section of this document.*

# Work-Related Illness/Injury

NEMESIS ID: eSituation.14 – Work-Related Illness/Injury

**Definition**

*Indication of whether or not the illness or injury is work related as reported by the Patient at the time of incident.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E07_15	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	0:1

**Attributes**

**NOT Values (NV)**  
 7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
9922001	No
9922003	Unknown
9922005	Yes

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”.*



# Reason for Interfacility Transfer/Medical Transport

NEMESIS ID: eSituation.20 – Reason for Interfacility Transfer/Medical

**Definition**

*The general categories of the reason for an interfacility transfer/medical transport.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
2820001	Cardiac Specialty
2820003	Convenience Transfer (Patient Request)
2820005	Diagnostic Testing
2820007	Dialysis
2820009	Drug and/or Alcohol Rehabilitation Care
2820011	Extended Care
2820013	Maternal/Neonatal
2820015	Medical Specialty Care (Other, Not Listed)
2820017	Neurological Specialty Care
2820019	Palliative/Hospice Care (Home or Facility)
2820021	Pediatric Specialty Care
2820023	Psychiatric/Behavioral Care
2820025	Physical Rehabilitation Care
2820027	Return to Home/Residence
2820029	Surgical Specialty Care (Other, Not Listed)
2820031	Trauma/Orthopedic Specialty Care



## Data Element Comment/Validation Rules

*This supports and works in combination with eSituation.19 Justification for Transfer or Encounter to provide defined categories for an interfacility transfer or other medical transport. This documentation provides support for reimbursement and a means for regions and states to evaluate transfer patterns and types.*

## Associated Validation Rules

<b>Rule ID</b>	<b>Level</b>	<b>Message</b>
nemSch_e001	Error	When Reason for Interfacility Transfer/Medical Transport is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Reason for Interfacility Transfer/Medical Transport has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
nemSch_e088	Warning	Reason for Interfacility Transfer/Medical Transport should only be recorded when Type of Service Requested is "... Transfer" or "Other Routine Medical Transport".

# *eTimes*

## PSAP Call Date/Time

NEMSIS ID: eTimes.01 – PSAP Call Date/Time

### Definition

The date/time the phone rings (911 call to public safety answering point or other designated entity) requesting EMS services.

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E05_02	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

### Data Element Comment/Validation Rules

This element is required for any eDisposition.27 (Unit Disposition) code with "Patient Contact Made" or eResponse.05 (Type of Service Requested) is 2205003, 2205005, 2205009, or 2205015. Otherwise put "Not Applicable". This date/time might be the same as Dispatch Notified Date/Time (eTimes.02). Formatting for date/time elements can be found in this document in the appendix under ["Date/Time Formats in OKEMSIS"](#).

## ***EMS Dispatch Notified Date/Time***

NEMSIS ID: eTimes.02 – Dispatch Notified Date/Time

**Definition**

*The date/time the phone rings at the EMS service dispatch requesting EMS services.*

<b>NEMSIS National Element</b>	No	<b>Pertinent Negatives (PN)</b>	No
<b>NEMSIS State Element</b>	No	<b>NOT Values</b>	No
<b>NEMSIS v2 Element</b>	E05_03	<b>Is Nillable</b>	No
<b>OKEMSIS Usage</b>	Mandatory	<b>Recurrence</b>	0:1

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for all EMS service runs. This date/time might be the same as PSAP Call Date/Time (eTimes.01). Formatting for date/time elements can be found in this document in the appendix under ["Date/Time Formats in OKEMSIS"](#).*

## Unit Notified by Dispatch Date/Time

NEMSIS ID: eTimes.03 – Unit Notified by Dispatch Date/Time

### Definition

*The date/time the responding unit was notified by dispatch.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E05_04	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

### Data Element Comment/Validation Rules

*This element is required for all EMS service runs. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*

## Unit En Route Date/Time

NEMSIS ID: eTimes.05 – Unit En Route Date/Time

### Definition

*The date/time the unit responded; that is, the time the vehicle started moving.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E05_05	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

`[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}`

### Data Element Comment/Validation Rules

*This element is required for all EMS service runs. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*

## Unit Arrived on Scene Date/Time

NEMSIS ID: eTimes.06 – Unit Arrived on Scene Date/Time

### Definition

*The date/time the responding unit arrived on the scene; that is, the time the vehicle stopped moving at the scene.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E05_06	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”. If the EMS service call is cancelled prior to arrival on scene put “Not Applicable”. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*



## Arrived at Patient Date/Time

NEMSIS ID: eTimes.07 – Arrived at Patient Date/Time

**Definition**

*The date/time the responding unit arrived at the patient's side.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E05_07	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

**Pattern**

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable”. If the EMS service call is cancelled prior to arrival on scene or there is no patient found put “Not Applicable”. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*

## Transfer of EMS Patient Care Date/Time

NEMSIS ID: eTimes.08 – Transfer of EMS Patient Care Date/Time

### Definition

The date/time the patient was transferred from this EMS agency to another EMS agency for care.

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E05_08	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

### NEMSIS Associated Performance Measure Initiatives

Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

### Data Element Comment/Validation Rules

This element is required for all EMS service calls where the primary EMS service transfers care of the patient to another EMS service. This element will be mandatory for any call with a Type of Service Requested (eResponse.05) of "Intercept (code: 2205003)" or "Mutual Aid (code: 2205009)", or Transport Disposition (eDisposition.30) is "Transport by another EMS Unit (code: 4230005)" or "Transport by another EMS Unit, with a Member of This Crews (code: 4230007)". If the EMS service call is cancelled/no patient found/patient refusal put "Not Applicable". Formatting for date/time elements can be found in this document in the appendix under ["Date/Time Formats in OKEMSIS"](#).

## Unit Left Scene Date/Time

NEMSIS ID: *eTimes.09* – Unit Left Scene Date/Time

### Definition

*The date/time the responding unit left the scene with a patient (started moving).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E05_09	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

### Data Element Comment/Validation Rules

*This element is required if eDisposition.30 (Transport Disposition) is 4230001, 4230003. Otherwise put "Not Applicable". If the EMS service call is cancelled/no patient found/patient refusal put "Not Applicable". Formatting for date/time elements can be found in this document in the appendix under ["Date/Time Formats in OKEMSIS"](#).*

## Patient Arrived at Destination Date/Time

NEMSIS ID: eTimes.11 – Patient Arrived at Destination Date/Time

### Definition

The date/time the responding unit arrived with the patient at the destination or transfer point.

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E05_10	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

### Data Element Comment/Validation Rules

This element is required if eDisposition.30 (Transport Disposition) is 4230001, 4230003. Otherwise put "Not Applicable". If the EMS service call is cancelled/no patient found/patient refusal put "Not Applicable". Formatting for date/time elements can be found in this document in the appendix under ["Date/Time Formats in OKEMSIS"](#).

## Destination Patient Transfer of Care Date/Time

NEMSIS ID: eTimes.13 – Destination Patient Transfer of Care  
Date/Time

**Definition**

*The date/time that patient care was transferred from the EMS crew/staff to the destination healthcare facilities staff .*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMSIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric Response STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

**Pattern**

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required if eDisposition.30 (Transport Disposition) is 4230001, 4230003. If the EMS service call is cancelled/no patient found/patient refusal put “Not Applicable”. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#). This element was added to better document transfer of care to determine best practices and identify points of improvement.*

## Unit Back in Service Date/Time

NEMSIS ID: eTimes.13 – Unit Back in Service Date/Time

### Definition

*The date/time the unit back was back in service and available for response (finished with call, but not necessarily back in home location).*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	No
NEMSIS v2 Element	E05_11	Is Nillable	No
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

#### Response

### Constraints

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

### Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

### Data Element Comment/Validation Rules

*This element is required if eDisposition.27 (Unit Disposition) is required for all ems runs. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*

# *eVitals*

## Date/Time Vital Signs Taken

NEMESIS ID: eVitals.01 – Date/Time Vital Signs Taken

**Definition**

*The date/time vital signs were taken on the patient.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_01	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measure Initiatives**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Constraints**

<u>Data Type</u>	<u>minInclusive</u>	<u>maxInclusive</u>
Date/time	1950-01-01T00:00:00-00:00	2050-01-01T00:00:00-00:00

Pattern

[0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the EMS service call is cancelled, no patient found, or a patient refusal put “Not Applicable”. Formatting for date/time elements can be found in this document in the appendix under [“Date/Time Formats in OKEMSIS”](#).*



## Obtained Prior to this Unit's EMS Care

NEMSIS ID: *eVitals.02* – Obtained Prior to this Unit's EMS Care

### Definition

*Indicates that the information which is documented was obtained prior to the documenting EMS units care.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E14_02	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

<u>Code</u>	<u>Description</u>
9923001	No
9923003	Yes

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with "Patient Contact Made" (defined in definition section of this document). If the EMS service call is cancelled, no patient found, or a patient refusal put "Not Applicable". Formatting for date/time elements can be found in this document in the appendix under ["Date/Time Formats in OKEMSIS"](#).*

# Cardiac Rhythm / Electrocardiography (ECG)

NEMESIS ID: eVitals.03 – Cardiac Rhythm / Electrocardiography (ECG)

## Definition

The cardiac rhythm / ECG and other electrocardiography findings of the patient as interpreted by EMS personnel.

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_03	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

## NEMESIS Associated Performance Measure Initiatives

Cardiac Arrest STEMI

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Pertinent Negatives (PN)

8801019 – Refused      8801023 - Unable to Complete

### CorrelationID

Data Type: string      minLength: 2      maxLength: 255

## Code List

Code	Description
9901001	Agonal/Idioventricular
9901003	Asystole
9901005	Artifact
9901007	Atrial Fibrillation
9901009	Atrial Flutter
9901011	AV Block-1st Degree
9901013	AV Block-2nd Degree-Type 1
9901015	AV Block-2nd Degree-Type 2
9901017	AV Block-3rd Degree
9901019	Junctional
9901021	Left Bundle Branch Block
9901023	Non-STEMI Anterior Ischemia

9901025	Non-STEMI Inferior Ischemia
9901027	Non-STEMI Lateral Ischemia
9901029	Non-STEMI Posterior Ischemia
9901030	Non-STEMI Septal Ischemia
9901031	Other
9901033	Paced Rhythm
9901035	PEA
9901037	Premature Atrial Contractions
9901039	Premature Ventricular Contractions
9901041	Right Bundle Branch Block
9901043	Sinus Arrhythmia
9901045	Sinus Bradycardia
9901047	Sinus Rhythm
9901049	Sinus Tachycardia
9901051	STEMI Anterior Ischemia
9901053	STEMI Inferior Ischemia
9901055	STEMI Lateral Ischemia
9901057	STEMI Posterior Ischemia
9901058	STEMI Septal Ischemia
9901059	Supraventricular Tachycardia
9901061	Torsades De Points
9901063	Unknown AED Non-Shockable Rhythm
9901065	Unknown AED Shockable Rhythm
9901067	Ventricular Fibrillation
9901069	Ventricular Tachycardia (With Pulse)
9901071	Ventricular Tachycardia (Pulseless)

#### Data Element Comment/Validation Rules

***This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) or “Yes” is indicated for Cardiac Arrest (eArrest.01). Also required if “STEMI” is indicated for Provider First or Second Impression. If the EMT cannot interpret the ECG then put “Unable To Complete”. Otherwise put the appropriate pertinent negative (“Refused” for patient refusals). For situations where there is patient contact and the ECG is not performed, put “Not Recorded”.***

# ECG Type

NEMESIS ID: eVitals.04 – ECG Type

## Definition

*The type of ECG associated with the cardiac rhythm.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

## NEMESIS Associated Performance Measure Initiatives

### STEMI

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

## Code List

Code	Description
3304000	2 Lead ECG (pads or paddles)
3304001	3 Lead
3304003	4 Lead
3304005	5 Lead
3304007	12 Lead-Left Sided (Normal)
3304009	12 Lead-Right Sided
3304011	15 Lead
3304013	18 Lead
3304015	Other

## Data Element Comment/Validation Rules

*This element is required if eVitals.03 (Cardiac Rhythm/Electrocardiography) is not a null value or pertinent negative (ECG was performed). This element replaces the custom elements in version 2 for STEMI. Otherwise put "Not Applicable". For situations where there is patient contact and the ECG is not performed, put "Not Recorded".*

## Method of ECG Interpretation

NEMESIS ID: eVitals.05– Method of ECG Interpretation

### Definition

*The method of ECG interpretation.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

### NEMESIS Associated Performance Measure Initiatives

#### STEMI

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### CorrelationID

Data Type: string      minLength: 0      maxLength: 255

### Code List

Code	Description
3305001	Computer Interpretation
3305003	Manual Interpretation
3305005	Transmission with No Interpretation
3305007	Transmission with Remote Interpretation

### Data Element Comment/Validation Rules

*This element is required if eVitals.03 (Cardiac Rhythm/Electrocardiography) is not a null value or pertinent negative (ECG was performed). "Transmission with no interpretation" may be used by EMS Agency Personnel that are not trained to interpret cardiac rhythms.. Otherwise put "Not Applicable". This element ss the custom elements in version 2 for STEMI. For situations where there is patient contact and the ECG is not performed, put "Not Recorded".*

# SBP (Systolic Blood Pressure)

NEMESIS ID: eVitals.06 – SBP (Systolic Blood Pressure)

### Definition

*The patient's systolic blood pressure.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_04	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMESIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Pertinent Negatives (PN)

8801005 – Exam Finding Not Present      8801019 – Refused      8801023 - Unable to Complete

### Constraints

Data Type: integer      minInclusive: 0      maxInclusive: 500

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable” or appropriate pertinent negative (“Refused” for refusals). If the patient was dead at scene, put 0. For situations where there is patient contact and the SBP is not taken, put “Not Recorded”.*

## DBP (Diastolic Blood Pressure)

NEMESIS ID: eVitals.07 – DBP (Diastolic Blood Pressure)

### Definition

*The patient's diastolic blood pressure.*

NEMESIS National Element	Nonnnnm	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_05	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

### NEMESIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Pertinent Negatives (PN)

8801005 – Exam Finding Not Present      8801019 – Refused      8801023 - Unable to Complete

### Constraints

#### Pattern

[5][0][0][1-4][0-9][0-9][0][1-9][0-9]P|p

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). Otherwise put “Not Applicable” or appropriate pertinent negative (“Refused” for refusals). If the patient was dead at scene, put 0. Diastolic blood pressure pattern allows for the following values in OKEMSIS: 1) A number 0 through 500 (NO LETTERS). For situations where there is patient contact and the DBP is not taken, put “Not Recorded”.*

# Method of Blood Pressure Measurement

NEMSIS ID: eVitals.08 – Method of Blood Pressure Measurement

### Definition

*Indication of the method of blood pressure measurement.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E14_06	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded      7701005 - Not Reporting

### Code List

<u>Code</u>	<u>Description</u>
3308001	Arterial Line
3308003	Doppler
3308005	Cuff-Automated
3308007	Cuff-Manual Auscultated
3308009	Cuff-Manual Palpated Only
3308011	Venous Line

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) and a blood pressure was taken. If the EMS service call is cancelled, no patient found, or a patient refusal put “Not Applicable”.*



# Heart Rate

NEMESIS ID: eVitals.10 – Heart Rate

**Definition**

*The patient's heart rate expressed as a number per minute.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_07	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801005 – Exam Finding Not Present      8801019 – Refused      8801023 - Unable to Complete

**Constraints**

Data Type: integer      minInclusive: 0      maxInclusive: 500

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the heart rate cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). For situations where there is patient contact and the Heart Rate is not taken, put “Not Recorded”. Otherwise put “Not Applicable”.*

# Pulse Oximetry

NEMESIS ID: eVitals.12 – Pulse Oximetry

## Definition

*The patient's oxygen saturation.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_09	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

## NEMESIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Pertinent Negatives (PN)

8801005 – Exam Finding Not Present      8801019 – Refused      8801023 - Unable to Complete

## Constraints

Data Type: integer      minInclusive: 0      maxInclusive: 100

## Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the oxygen saturation cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. For situations where there is patient contact and the Pulse Oximetry is not taken, put “Not Recorded”.*

# Pulse Rhythm

NEMSIS ID: eVitals.13 – Pulse Rhythm

**Definition**

*The clinical rhythm of the patient's pulse.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	No	NOT Values	No
NEMSIS v2 Element	E14_10	Is Nillable	No
OKEMSIS Usage	Optional	Recurrence	0:1

**Code List**

<u>Code</u>	<u>Description</u>
3313001	Irregularly Irregular
3313003	Regular
3313005	Regularly Irregular

# Respiratory Rate

NEMESIS ID: eVitals.14 – Respiratory Rate

**Definition**

*The patient's respiratory rate expressed as a number per minute.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_11	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801005 – Exam Finding Not Present      8801019 – Refused      8801023 - Unable to Complete

**Constraints**

Data Type: integer      minInclusive: 0      maxInclusive: 300

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the respiratory rate cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. For situations where there is patient contact and the Respiratory Rate is not taken, put “Not Recorded”.*

## End Tidal Carbon Dioxide (ETCO2)

NEMESIS ID: eVitals.16 – End Tidal Carbon Dioxide (ETCO2)

### Definition

The numeric value of the patient's exhaled end tidal carbon dioxide (ETCO2) level measured as a unit of pressure in millimeters of mercury (mmHg), percentage or, kilopascal (kPa).

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_13	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMESIS Associated Performance Measures

Airway Cardiac Arrest Pediatric STEMI Stroke Trauma

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

#### Pertinent Negatives (PN)

8801019 – Refused      8801023 - Unable to Complete

#### ETCO2Type

3340001 – mmHg      3340003 – Percentage      3340005 - kPa

### Constraints

Data Type: decimal Total Digits: 4 FractionDigits: 1 minInclusive: 0  
maxInclusive: 760

### Data Element Comment/Validation Rules

This element is required if eProcedures.03 includes the codes 429705000, 427753009, 424979004, 232679009, 232674004, or a King Airway (code itSNOMED.001). If the CO2 level cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. Generally the numeric CO2 level is measured in millimeters of mercury (mmHg). End-tidal is the same as exhaled.

# Blood Glucose Level

NEMESIS ID: eVitals.18 – Blood Glucose Level

**Definition**

*The patient's blood glucose level.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_14	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Pediatric Stroke*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801019 – Refused      8801023 - Unable to Complete

**Constraints**

**Pattern**

[2][0][0][0][1][0-9][0-9][0-9][1-9][0-9][0-9][1-9][0-9][0-9]High|Low

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) and a first or second impression of Hyperglycemia-Diabetes or Hypoglycemia-Diabetes. If the blood glucose level cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). sOtherwise put “Not Applicable”.*

## Glasgow Coma Score-Eye

NEMESIS ID: eVitals.19 – Glasgow Coma Score-Eye

**Definition**

*The patient's Glasgow Coma Score Eye opening.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_15	Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801019 – Refused      8801023 - Unable to Complete

**Code List**

Code	Description
1	No eye movement when assessed (All Age Groups)
2	Opens Eyes to painful stimulation (All Age Groups)
3	Opens Eyes to verbal stimulation (All Age Groups)
4	Opens Eyes spontaneously (All Age Groups)

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the GCS cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. Definitions now based on the National Trauma Data Standard (NTDS). For situations where there is patient contact and the GCS is not calculated put “Not Recorded”.*

# Glasgow Coma Score-Verbal

NEMESIS ID: eVitals.20 – Glasgow Coma Score-Verbal

**Definition**

*The patient's Glasgow Coma Score Verbal.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_16	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801019 – Refused      8801023 - Unable to Complete

**Code List**

<u>Code</u>	<u>Description</u>
1	No verbal/vocal response (All Age Groups)
2	Incomprehensible sounds (>2 Years); Inconsolable, agitated
3	Inappropriate words (>2 Years); Inconsistently consolable, moaning
4	Confused (>2 Years); Cries but is consolable, inappropriate interactions
5	Oriented (>2 Years); Smiles, oriented to sounds, follows objects, interacts

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the GCS cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. Definitions now based on the National Trauma Data Standard (NTDS). For situations where there is patient contact and the GCS is not calculated put “Not Recorded”.*



# Glasgow Coma Score-Motor

NEMESIS ID: eVitals.21 – Glasgow Coma Score-Motor

## Definition

*The patient's Glasgow Coma Score Motor.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_17	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

## NEMESIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Pertinent Negatives (PN)

8801019 – Refused      8801023 - Unable to Complete

## Code List

<u>Code</u>	<u>Description</u>
1	No Motor Response (All Age Groups)
2	Extension to pain (All Age Groups)
3	Flexion to pain (All Age Groups)
4	Withdrawal from pain (All Age Groups)
5	Localizing pain (All Age Groups)
6	Obeys commands (>2Years); Appropriate response to stimulation

## Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the GCS cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. Definitions based on the National Trauma Data Standard (NTDS). For situations where there is patient contact and the GCS is not calculated put “Not Recorded”.*

# Glasgow Coma Score-Qualifier

NEMSIS ID: eVitals.22 – Glasgow Coma Score-Qualifier

## Definition

*Documentation of factors which make the GCS score more meaningful.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E14_18	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:M

## NEMSIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### CorrelationID

Data Type: string      minLength: 0      maxLength: 255

## Code List

Code	Description
3322001	Eye Obstruction Prevents Eye Assessment
3322003	Initial GCS has legitimate values without interventions such as intubation and sedation
3322005	Patient Chemically Paralyzed
3322007	Patient Chemically Sedated
3322009	Patient Intubated

## Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) and a total GCS Score is calculated. If the EMS service call is cancelled, no patient found, or a patient refusal put “Not Applicable”. Definitions based on the National Trauma Data Standard (NTDS).*

# Total Glasgow Coma Score

NEMESIS ID: eVitals.23 – Total Glasgow Coma Score

## Definition

*The patient's total Glasgow Coma Score.*

NEMESIS National Element	No	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_19	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

## NEMESIS Associated Performance Measures

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

## Attributes

### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Pertinent Negatives (PN)

8801019 – Refused      8801023 - Unable to Complete

## Constraints

Data Type: integer      minInclusive: 3      maxInclusive: 15

## Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the GCS cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. Can be documented or calculated from eVitals.19 (GCS-Eye), eVitals.20 (GCS-Verbal), and eVitals.21 (GCS-Motor). For situations where there is patient contact and the GCS is not calculated put “Not Recorded”.*

# Temperature

NEMESIS ID: *eVitals.24* – Temperature

**Definition**

*The patient's body temperature in degrees Celsius/centigrade.*

NEMESIS National Element	No	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_20	Is Nillable	Yes
OKEMISIS Usage	Recommended	Recurrence	0:1

**NEMESIS Associated Performance Measures**

*Pediatric*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded      7701005 - Not Reporting

**Pertinent Negatives (PN)**

8801019 – Refused      8801023 - Unable to Complete

**Constraints**

Data Type	totalDigits	fractionDigits	minInclusive	maxInclusive
Decimal	3	1	0	50

**Associated Validation Rules**

Rule ID	Level	Message
nemSch_e001	Error	When Temperature is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional).
nemSch_e002	Error	When Temperature has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty.
nemSch_e088	Error	When Temperature has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting).

## Level of Responsiveness (AVPU)

NEMSIS ID: eVitals.26 – Level of Responsiveness (AVPU)

### Definition

*The patient's highest level of responsiveness.*

NEMSIS National Element	Yes	Pertinent Negatives (PN)	No
NEMSIS State Element	Yes	NOT Values	Yes
NEMSIS v2 Element	E14_22	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### NEMSIS Associated Performance Measure Initiatives

*Airway Cardiac Arrest Pediatric STEMI Stroke Trauma*

### Attributes

#### NOT Values (NV)

7701001 - Not Applicable      7701003 - Not Recorded

### Code List

Code	Description
3326001	Alert
3326003	Verbal
3326005	Painful
3326007	Unresponsive

### Data Element Comment/Validation Rules

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the EMS service call is cancelled, no patient found, or a patient refusal put “Not Applicable”. For situations where there is patient contact and AVPU is not taken put “Not Recorded”.*

# Pain Scale Score

NEMESIS ID: eVitals.27– Pain Scale Score

**Definition**

*The patient's indication of pain from a scale of 0-10.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_23	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	0:1

**NEMESIS Associated Performance Measures**

*Pediatric STEMI Trauma*

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801019 – Refused      8801023 - Unable to Complete

**Constraints**

Data Type: integer      minInclusive: 0      maxInclusive: 10

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document). If the pain score cannot be obtained, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”. The Pain Score can be obtained from several pain measurement tools or pain scale types. The pain scale type used should have a numeric value associated with each diagram as appropriate. If the pain scale type utilizes multiple indicators/categories the total should be calculated and entered for the pain score associated with the patient assessment. For situations where there is patient contact and the Pain Scale Score is not calculated put “Not Recorded”.*

# Stroke Scale Score

NEMESIS ID: eVitals.29 – Stroke Scale Score

**Definition**

*The findings or results of the Stroke Scale Type (eVitals.30) used to assess the patient exhibiting stroke-like symptoms.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	Yes
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element	E14_24	Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

**Stroke**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Pertinent Negatives (PN)**

8801019 – Refused      8801023 - Unable to Complete

**Code List**

<u>Code</u>	<u>Description</u>
3329001	Negative
3329003	Non-Conclusive
3329005	Positive

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) AND Provider Primary or Secondary Impression is stroke (code I63.9). If the Stroke Scale cannot be assessed, use the appropriate Pertinent Negative (“Refused” for refusals). Otherwise put “Not Applicable”.*



# Stroke Scale Type

NEMESIS ID: eVitals.30 – Stroke Scale Type

**Definition**

*The type of stroke pain scale used.*

NEMESIS National Element	Yes	Pertinent Negatives (PN)	No
NEMESIS State Element	Yes	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**NEMESIS Associated Performance Measures**

**Stroke**

**Attributes**

**NOT Values (NV)**

7701001 - Not Applicable      7701003 - Not Recorded

**Code List**

<u>Code</u>	<u>Description</u>
3330001	Cincinnati Prehospital Stroke Scale (CPSS)
3330004	Los Angeles Prehospital Stroke Screen (LAPSS)
3330005	Massachusetts Stroke Scale (MSS)
3330007	Miami Emergency Neurologic Deficit Exam (MEND)
3330009	NIH Stroke Scale (NIHSS)
3330011	Other Stroke Scale Type
3330013	FAST-ED
3330015	Boston Stroke Scale (BOSS)
3330017	Ontario Prehospital Stroke Scale (OPSS)
3330019	Melbourne Ambulance Stroke Screen (MASS)
3330021	Rapid Arterial occlusion Evaluation (RACE)
3330023	Los Angeles Motor Score (LAMS)

**Data Element Comment/Validation Rules**

*This element is required for any eDisposition.27 (Unit Disposition) code with “Patient Contact Made” (defined in definition section of this document) AND Provider Primary or Secondary Impression is stroke (code I63.9). Otherwise put “Not Applicable”.*





# **State Mandatory Elements (Custom)**

## Custom Elements in NEMSIS v3

Custom Elements in NEMSIS v3 are collectively grouped into eight Custom Configuration elements (.01 to .08, see below table). The next section will describe each custom element in v3 of OKEMSIS that has to be formatted into these eight elements (some elements will not require all 8 fields).

<u>Element</u>	<u>Usage</u>	<u>Recurrence</u>
dCustomConfiguration.01 - Custom Data Element Title	Mandatory	1:1
dCustomConfiguration.02 - Custom Definition	Mandatory	1:1
dCustomConfiguration.03 - Custom Data Type	Mandatory	1:1
dCustomConfiguration.04 - Custom Data Element Recurrence	Mandatory	1:1
dCustomConfiguration.05 - Custom Data Element Usage	Mandatory	1:1
dCustomConfiguration.06 - Custom Data Element Potential	Optional	0:M
dCustomConfiguration.07 - Custom Data Element Potential NOT Values (NV)	Optional	0:M
dCustomConfiguration.08 - Custom Data Element Potential Pertinent Negative Values	PN	0:M

## Trauma Referral Center (TreC) Notified



### Definition

*The notification of TReC by EMS personnel of the Triage Level of the transported/transferred patient.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMISIS Usage	Mandatory	Recurrence	1:1

### Attributes

### Code List

<u>Code</u>	<u>Description</u>
itOutcome.001.101	Yes
itOutcome.001.100	No

### Data Element Comment/Validation Rules

*This element is required if Possible Injury is “Yes” or Provider Impression is associated with trauma. Otherwise leave it blank. All ambulance services transporting injured patients on a pre-hospital basis, or transferring patients from hospitals outside Regions 7 & 8, to hospitals within Regions 7 & 8, shall contact the Trauma Transfer and Referral Center (TReC) before entering the region. (Regulation 310:641-3-130(d)).*

*\*Trauma defined in definition section*

## TreC Tracking Number



### Definition

*The number assigned to the patient by TreC.*

NEMSIS National Element	No	Pertinent Negatives (PN)	No
NEMSIS State Element	No	NOT Values	Yes
NEMSIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

### Attributes

### Constraints

Data Type: string      minLength: 0      maxLength: 5

### Data Element Comment/Validation Rules

*This element is required if Trauma Referral Center (TreC) Notified is "Yes" otherwise leave it blank. All ambulance services transporting injured patients on a pre-hospital basis, or transferring patients from hospitals outside Regions 7 & 8, to hospitals within Regions 7 & 8, shall contact the Trauma Transfer and Referral Center (TReC) before entering the region. (Regulation 310:641-3-130(d)). When you contact the TReC, the TReC personnel will assign a unique number for each patient.*

*\*Trauma defined in definition section*

## Destination on Current Run Form Referred by TreC

**NEMESIS ID:**

**Definition**

*This element asks whether or not the receiving hospital (destination hospital) for the patient was referred by TreC.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**Code List**

<u>Code</u>	<u>Description</u>
itDisposition.041.100	Yes
itDisposition.041.101	No

**Data Element Comment/Validation Rules**

*This element is required when eDisposition.30 (Transport Disposition) is 4230001, 4230003. Otherwise leave it blank. For treated and transported patients, put "No" if TreC was not used. All ambulance services transporting injured patients on a pre-hospital basis, or transferring patients from hospitals outside Regions 7 & 8, to hospitals within Regions 7 & 8, shall contact the Trauma Transfer and Referral Center (TReC) before entering the region. (Regulation 310:641-3-130(d)).*

*\*Trauma defined in definition section.*

## Intercept Recipient Agency

**NEMESIS ID:**

**Definition**

*The EMS provider of the advanced life support EMS unit the patient was transferred to.*

NEMESIS National Element	No	Pertinent Negatives (PN)	No
NEMESIS State Element	No	NOT Values	Yes
NEMESIS v2 Element		Is Nillable	Yes
OKEMSIS Usage	Mandatory	Recurrence	1:1

**Attributes**

**Constraints**

Data Type: string      minLength: 0      maxLength: 15

**Data Element Comment/Validation Rules**

*This element is required if a patient is transferred from the primary EMS service to another EMS service. If Type of Service Requested (eResponse.05) includes the codes 2205003 or 2205009 and Incident/Patient Disposition includes codes 4212033, 4212031, or 4212013 then this element is required. Otherwise leave it blank. This element now applies to all runs that are treated and transported, not just trauma. The agency code list can be found in the appendix under [Intercept Recipient Agency Code List](#).*

# *Appendix*

## Incident/Destination Codes and Descriptions

Name	NPI Number	Name	NPI Number
3-Clinics or Doctor's Offices	888	Medical City Hosp-Dallas, TX	1689628984
4-Nursing Home/Rest Home	777	Memorial Hospital - Stilwell	1790753358
6-Out of State Facility Not Listed	222	Memorial Hospital & Physician Group	1588667554
7-Private Residence	111	Memorial Hospital of Texas County	1144205360
8-Medical Examiner/Morgue	333	Mena Regional Health System	1861449639
9-Care Transfer to Another Ambulance Service-Air	444	Mercy Emergency Department - Edmond	707
10-Care Transfer to Another Ambulance Service-Ground	666	Mercy Health Love County Health Center	1649221557
11- PELA Site/Airport	000	Mercy Hospital - Ardmore	1386741635
12-LongTerm Care	555	Mercy Hospital - Fort Smith	1568433480
13-Street/Intersection	999	Mercy Hospital - OKC	1184721722
14-School/Public Building	100	Mercy Hospital- Ada (Valley View Regional Hospital)	1487813978
15-Oklahoma Veterans Center - Ardmore	342	Mercy Hospital- Hot Springs (Hot Springs Reg.)	1689628232
16-Oklahoma Veterans Center (ltc) - Claremore	261	Mercy Hospital Oklahoma City - South	1184721722a
17-Oklahoma Veterans Center (ltc) - Clinton	328	Mercy Hospital-Healdton	1568615656
18-Oklahoma Veterans Center (ltc) - Norman	729	Mercy Hospital-Joplin, Missouri	1508192543
19-Oklahoma Veterans Center (ltc) - Talihina	687	Mercy Hospital-Kingfisher	1083048417
20-Jail/Prison	1500	Mercy Hospital-Logan County	1306126818
Ambulatory Surgery Center	615	Mercy hospital-Tishomingo	1932404431
Mental Health Facility	21031	Mercy Hospital-Watonga(Watonga Municipal Hospital)	1437598984
Physical Rehabilitation Facility	1037	Mercy Rehabilitation Hospital Oklahoma City	1649802117
Drug and/or Alcohol Rehabilitation Facility	1039	Mesquite Reg Hosp-Mesquite, TX	1851347835
Urgent Care	1021	Methodist Hosp-Dallas, TX	1225383524
Alliance Health- Durant	1770522906	Methodist McKinney Hospital-McKinney, TX	1952538431
Alliance Health- Madill	1467476556	Moore Medical Center	1942258777
Alliance Health- Midwest	1730128836	Morton County Hospital - Elkhart	1770511297
Alliance Health- Seminole	1891980124	Muskogee VA Medical Center	1598714925
Alliance Health- Woodward	1558312553	Newman Memorial Hospital - Shattuck	1083617807
Altus AFB Clinic (97th Medical Group)	1093782880	Norman Regional Healthplex	1245530674
Arbuckle Memorial Hospital	1700869492	Norman Regional Hospital	1922273937
Ardmore Regional Surgery Center	1922079896	Norman Regional Nine	1922273937a





Name	NPI Number	Name	NPI Number
Arkansas Children's Hospital	1598773079	Norman Specialty Hospital	1962457861
Arkansas Children's NorthWest	1255875746	North Texas Med Ctr (Gainesville Memorial)	1922009331
Atoka Memorial Hospital	1508896499	Northeastern Health System	1003865999
Bailey Medical Center, LLC	1205846037	Northwest Arkansas Hospitals, LLC	1699726695
Baptist Medical Center-AR	1043240682	Northwest Center for Behavioral Health (NCBH)	1922171701
Baptist Saint Anthony's Health System-	1982671491	Northwest Hospital - Amarillo	1467442418
Baylor Heart Hospital	1962504340	Northwest Medical Center - Bentonville	1417900713
Baylor University Hospital	1447250253	Northwest Surgical Hospital - OKC	1942260971
Baylor-Garland, TX	1134127749	Ochiltree County Hospital - Perryton	1245237593
Baylor-Grapevine, TX	1073511762	OKC Cntr for Orthopedic & Multi-Specialty Surgery	1063489458
Beaver County Memorial Hospital	1487631156	Okeene Municipal Hospital	1336142033
Bone and Joint Hospital	1811931686	Oklahoma ER and Hospital	1821565961
Bristow Medical Center	1518932342	Oklahoma Heart Hospital - OKC	1083617005
Brookhaven Hospital	1023064300	Oklahoma Heart Hospital - South	1841442274
Carl Albert Community Mental Health Center	1205873098	Oklahoma Neuro Specialty Hospital - Tulsa	1508913336
Carnegie Tri-County Municipal Hospital	1043323447	Oklahoma Spine Hospital, LLC - OKC	1699745893
Carrus Rehabilitation Hospital	1861710238	Oklahoma Surgical Hospital, LLC - Tulsa	1487651857
Cedar Ridge Residential Treatment Center	1669681060	Okmulgee Memorial Hospital (Muscoogie (Creek) Nation Med Ctr)	1083616221
Centennial Med Ctr	1801826839	Oncordis Clinic at Cancer Treatment Ctrs of America Tulsa	1831576834
Center for Orthopaedic Reconstruction and Excellence	1114435666	Orthopedic Hospital - OKC	1851344188
Cherokee Nation - Hastings Hospital	1003807827	OSU Medical Center	1194701516
Cherokee Nation Outpatient Health Center	1326294968	OSU Student Health Center	1134280381
Chickasaw Nation Medical Center	1255364923	OU Health University of Oklahoma Medical Center	1780631390
Childrens Hosp-Dallas, TX (Medical City)	1194743013	OU MED CTR-Children's Hospital	1508144411
Childrens Hosp-Fort Worth, TX (Cook Med CTR)	1891765178	OU MED CTR-Edmond Campus	1205887916
Childrens Hosp-Plano, TX	1457443095	Pam Rehabilitation Hospital Of Tulsa	1730635301
Children's Medical Center, The	1740395409	Paris Reg Med Cntr/McCuiston Hospital	1063411767
Choctaw Memorial Hospital	1881689289	Parkland Trauma Center Dallas	1932123247
Choctaw Nation Health Care Center (I.H.S.)	1659347623	Parkside Tulsa	1851327464



Name	NPI Number	Name	NPI Number
Christus Saint Michael Rehab Hospital	1467453902	Pauls Valley General Hospital	1932169950
Christus St. Joseph Hospital	1003819327	Pawhuska Hospital, Inc.	1174521991
CHRISTUS St. Michael Hospital of Texarkana	1295736734	Perry Memorial Hospital	1245236652
Cimarron Memorial Hospital	1073584819	Plano Rehabilitation Hospital	1194974733
Cleveland Area Hospital	1427295872	Prague Municipal Hospital	1851537096
Clinton Hospital Authority	1942921929	Presbyterian Hosp-Dallas, TX	1396779948
Coffeyville Regional Medical Center	1285600379	Purcell Municipal Hospital	1851669865
Comanche County Memorial Hospital	1871513804	Pushmataha County Hospital, Antlers, OK	1144212556
Community Hospital	1275593337	Regency Hospital-North Dallas	1013075167
Community Specialty Hospital	1619071313	Reynolds Army Community Hospital	1487752960
Cordell Memorial Hospital	1750384426	Roger Mills Memorial Hospital	1497857437
Cornerstone Hospital of Oklahoma-Shawnee	1205881125	Rolling Hills Hospital Ada	1720085178
Cornerstone- Muskogee (formerly Solara Hospital-Muskogee)	1518980978	Saint Francis Hospital- Muskogee	1104968916
Creek Nation Community Hospital	1700890530	Saint Francis Hospital- Muskogee East	1417193293
Denton Regional Hospital	1306897277	Saint Francis Hospital- Vinita	1306886866
DeQueen Medical Center	1851657415	Sayre Memorial Hospital	1053381947
Drumright Regional Hospital	1396988903	Seiling Municipal Hospital	1598993453
Duncan Regional Hospital, Inc.	1851396394	Select Specialty Hospital - OKC	1659371268
East Freeman Hospital & Health System	1083728026	Select Specialty Hospital - Tulsa	1780684175
Eastern Oklahoma Medical Center	1396767158	Sequoyah Co City of Sallisaw Hospital Authority	1972539567
Edmond-AMG Specialty Hosp	1235226416	Shadow Mountain Behavioral Health System	1124037288
Elkview General Hospital	1699758086	Shamrock General Hospital- TX	1538150370
Fairfax Community Hospital	1134451396	Share Memorial Hospital Alva	1679684682
Fairview Regional Medical Center	1033153309	Siloam Springs Memorial Hospital	1265430508
Fort Smith HMA,LLC (Baptist Health Medical Center)	1578555736	South Central Kansas Medical Center	1447516190
Freeman-Oak Hill Health System	1265546048	Southwest Medical Center Liberal	1144493040
George Nigh Long Term Acute Care Hospital (Muskogee(Creek) Nation Phy. Rehab. Ctr.)	1912158098	Southwestern Medical Center Lawton	1952359986
Grady Memorial Hospital	1538169198	Southwestern Regional Medical Center Tulsa	1073500419
Gravette Medical Center	1124068705	Specialty Hospital of Midwest City	1508177767
Gravette Medical Center	1134128499	SSM Health St. Anthony Healthplex El Reno	1184945644
Gravette Medical Center	1184639122	SSM Health St. Anthony Hospital - Shawnee, Seminole Campus	1134123193
Gravette Medical Center	1194816074	St. Anthony Hospital OKC(Main Campus)	1366545311



Name	NPI Number	Name	NPI Number
Gravette Medical Center	1295735991	St. Anthony South (Behavioral)	705
Gravette Medical Center	1295893220	St. Anthony(Healthplex)- East	701
Gravette Medical Center	1477551745	St. Anthony(Healthplex)- Mustang	703
Health South Rehabilitation - Fort Smith	1639142342	St. Anthony(Healthplex)- North	704
HealthSouth-Plano, TX	1144294893	St. Anthony(Healthplex)- South	702
Hillcrest Hospital-Claremore	1023398807	St. Francis Hospital South Tulsa	1376561944
Hillcrest Hospital-Cushing	1801867643	St. Francis Hospital, Inc. Tulsa	1144228487
Hillcrest Hospital-Henryetta	1720053556	St. Francis Hospital-Glenpool	706
Hillcrest Hospital-Pryor	1780125005	St. John Medical Center, Inc. Tulsa	1154417368
Hillcrest Hospital-South	1023069028	St. John Owasso Medical Center	1144231432
Hillcrest Medical Center Tulsa	1629057229	St. John Rehabilitation Hospital	1073995056
Hillcrest Specialty Hospital Tulsa	1427154178	St. John Sapulpa, Inc.	1861794448
Holdenville General Hospital	1144339193	St. Johns-Broken Arrow	1497988596
INTEGRIS Baptist Medical Center, Inc. - OKC	1831103654	St. Joseph Medical Center Wichita	1720380322
INTEGRIS Baptist Regional Health Center - Miami	1114931342	St. Mary's Regional Medical Center Enid	1417947466
INTEGRIS Bass Baptist Health Center	1144236571	St. Mary's Rogers Memorial Hospital Rogers AR	1437266152
INTEGRIS Bass Pavilion/Enid Regional Hospital	1730193202	Stevens County Hospital - Hugoton, KS	1093774762
INTEGRIS Canadian Valley Regional Hospital	1306865357	Stillwater Medical Center	1164494027
Integrus Community Hospital - Council Crossing	1194209155	Stillwater Medical Center - Blackwell	1790706851
Integrus Community Hospital - Del City	1942784715	Stroud Regional Medical Center	1164625117
Integrus Community Hospital - Moore	1447734272	Summit Medical Center	1356574560
Integrus Community Hospital - OKC West	1336623198	Surgical Hospital of Oklahoma	1033229240
Integrus Deaconess	1740231752	Texas Health Presbyterian (Wilson & Jones) -TX	1013957836
Integrus Grove General Hospital	1467473579	Texoma Medical Center - Denison	1477553113
Integrus Health Ponca City	1225077035	The Physicians' Hospital Anadarko	1710165626
Integrus Health Woodward Hospital	1558148627	Tulsa ER and Hospital	1386101202
INTEGRIS Southwest Medical Center	1457372625	Tulsa Spine & Specialty Hospital	1033185293
INTEGRIS-Edmond	1720373103	University Behavioral Health-Denton, TX	1851346407
Jackson County Memorial Hospital	1023272945	USPHS Indian Hospital - Claremore (I.H.S.)	1588962989
Jane Phillips Medical Center	1215914254	USPHS Indian Hospital - Clinton (I.H.S.)	1205923448
Jane Phillips Nowata Health Center	1548247489	USPHS Indian Hospital - Lawton (I.H.S.)	1215253455



Name	NPI Number	Name	NPI Number
JD McCarty Center For Children With Dev Disabilities	1609972058	USPHS Indian Hospital - Pawnee (I.H.S.)	1629174081
Jeay Medical Services, LLC. (Epic Med Ctr)	1245519651	UTSW-Dallas, TX	1073651840
Jefferson County Healthcare Authority	1144245655	VA Hospital - Amarillo	1225087794
Jim Taliaferro Community Mental Health Center	1760481899	VA Hospital - Bonham	1558314948
Kindred Hospital - Oklahoma City	1407934680	VA Hospital - Dallas	1174572416
Lakeside Women's Hospital	1639170699	VA Hospital - Fayetteville	1003867326
Landmark Hospital	1972633410	VA Hospital - Oklahoma City (DOD)	1083925358
Lane Frost Health and Rehabilitation Center	1285626424	Valir Rehabilitation Hospital of OKC	1750379558
Latimer County General Hospital	1053353631	Via Christi, St. Francis campus-Wichita, KS	1154314789
Laureate Psychiatric Clinic and Hospital	1710985064	Wadley's Hospital Texarkana	1114903523
Lindsay Municipal Hospital	1144268723	Wagoner Community Hospital	1386611580
Mangum Regional Medical Center	1992737613	Washington Regional Hospital Fayetteville	1083609150
Mary Hurley Hospital	1629077227	Weatherford Regional Hospital	1639175185
McAlester Regional Health Center	1316940034	Wesley Medical Center Wichita KS	1447299649
McBride Clinic Orthopedic Hospital, LLC	1932145505	Wichita General Hospital Wichita Falls (Bethania Regional Healthcare Center)	1023013448
McCurtain Memorial Hospital	1629020177	William Newton Hospital	1548229149
MeadowBrook Specialty Hospital of Tulsa	1699110155	Willow Crest Hospital	1770599268
Medical Center of McKinney-McKinney, TX	1437102639	ZALE-LIPSHY	1417010653
Medical Center of Plano, TX	1396798518		

- 1. Highlighted codes are special/generic codes. If a destination is not on this list, please use one of generic codes.**
- 2. Codes 444 and 666 need to be used when transfer of patient occurs to another ambulance service.**

## Medication Given Codes and Descriptions

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
83929	Abciximab	6185	Labetalol
161	Acetaminophen	35629	Lactated Ringer's Solution
272	Activated Charcoal	237159	Levalbuterol
296	Adenosine	6387	Lidocaine
828529	Albumin Human, USP	377965	Lidocaine Topical Gel
435	Albuterol	6470	Lorazepam
8410	Alteplase	6585	Magnesium Sulfate
703	Amiodarone	6628	Mannitol
1191	Aspirin	6754	Meperidine
1223	Atropine	6902	Methylprednisolone
1399	Benzocaine	6915	Metoclopramide
itRX.001	Blood Products	6918	Metoprolol
1808	Bumetanide	6960	Midazolam
1841	Butorphanol	7052	Morphine
1901	Calcium Chloride	237372	NaCl 0.0769 MEQ/ML Injectable Solution
1908	Calcium Gluconate	313002	NaCl 0.154 MEQ/ML Injectable Solution
1998	Captopril	730781	NaCl 0.513 MEQ/ML Injectable Solution
59038	Chitosan	7238	Nalbuphine
2599	Clonidine	7242	Naloxone
32968	clopidogrel	7396	Nicardipine
3264	Dexamethasone	4917	Nitroglycerin
237648	dextrose 10 % Injectable Solution	7476	Nitroprusside
260258	dextrose 250 MG/ML Injectable Solution	7486	Nitrous Oxide
309778	dextrose 5 % Injectable Solution	7512	Norepinephrine
237653	dextrose 50 % Injectable Solution	125464	Normal saline
3322	Diazepam	26225	Ondansetron
3443	Diltiazem	7806	Oxygen
3498	Diphenhydramine	7812	Oxymetazoline
3616	Dobutamine	7824	Oxytocin
3628	Dopamine	7883	Pancuronium
3648	Droperidol	8134	Phenobarbital
3827	Enalapril	8163	Phenylephrine
317361	Epinephrine 0.1 MG/ML	8183	Phenytoin
328316	Epinephrine 1 MG/ML	33835	plasma protein fraction
314610	EPINEPHRINE,RACEMIC HYDROCHLORIDE	8591	Potassium Chloride
75635	eptifibatide	8597	Potassium Iodide

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
49737	esmolol	34345	pralidoxime
4177	Etomidate	8640	Prednisone
4249	Factor IX	8700	Procainamide
4256	Factor VIIa	8704	Prochlorperazine
4278	Famotidine	8745	Promethazine
4337	Fentanyl	227778	Proparacaine hydrochloride
4457	Flumazenil	8782	Propofol
72236	fosphenytoin	8787	Propranolol
4603	Furosemide	9068	Quinidine
4832	Glucagon	9143	Ranitidine
4850	Glucose	76895	Reteplase
5093	Haloperidol	68139	Rocuronium
5224	Heparin	36676	Sodium Bicarbonate
5531	Hetastarch	107129	sterile water
214615	Hydralazine	10154	Succinylcholine
3423	Hydromorphone	259280	Tenecteplase
5514	Hydroxocobalamin	10368	Terbutaline
5553	Hydroxyzine	10391	Tetracaine
5640	Ibuprofen	10454	Thiamine
5856	Insulin	73137	tirofiban
5975	Ipecac	11149	Vasopressin (USP)
7213	Ipratropium	71535	Vecuronium
6054	Isoproterenol	11170	Verapamil
6130	Ketamine	115698	ziprasidone
35827	Ketorolac		

**\*Blood Products is a custom code not in the NEMSIS suggested list but is required to be in OKEMSIS v3 dataset. NOTE: Codes have been added since implementation of v3.5 in Oklahoma. An updated list of codes can be found here: [OSDH EMS Website](#)**



## Procedure Codes and Descriptions

<b>Code</b>	<b>Description</b>	<b>Code</b>	<b>Description</b>
268400002	12 lead ECG	56620000	Delivery of placenta following delivery of infant outside of hospital
241741007	Active cooling of patient	18723003	Demand pacing
241740008	Active warming of patient	182531007	Dressing of wound
241726007	Airway- Application of cricoid pressure	243142003	Dual pressure spontaneous ventilation support
232706008	Airway- Clearance by finger sweep	36708009	External fetal monitor surveillance
428482009	Airway- Colorimetric respired carbon dioxide monitoring	426220008	External ventricular defibrillation
78121007	Airway- Direct laryngoscopy	49077009	Flexible fiberoptic laryngoscopy
250784008	Airway- End tidal carbon dioxide concentration	33747003	Glucose measurement, blood
429705000	Airway- Insertion of esophageal tracheal combitube	23690002	Heimlich maneuver
427753009	Airway- Insertion of esophageal tracheal double lumen supraglottic airway	430189000	Hypothermia induction therapy
7443007	Airway- Insertion of oropharyngeal airway	441893003	impedance threshold device
424979004	Airway- Laryngeal mask airway insertion	433295009	Infusion pump for enteral feeding
182692007	Airway- Nasopharyngeal airway insertion	433296005	Infusion pump for intravenous fluids
232679009	Airway- Nasotracheal intubation	410024004	Insertion of catheter into urinary bladder
232673005	Airway- Obturator airway insertion	87750000	Insertion of nasogastric tube
232692007	Airway- Open cricothyroidotomy	235425002	Insertion of orogastric tube
232674004	Airway- Orotracheal intubation	19861002	Intermittent positive pressure breathing treatment with nebulized medication
232689008	Airway- Percutaneous cricothyroidotomy	34475007	Intraaortic balloon pump maintenance
232711005	Airway- Removal of airway device	430824005	Intraosseous cannulation
271280005	Airway- Removal of endotracheal tube	67889009	Irrigation
232707004	Airway- Removal of foreign body from airway	40174006	Isolation procedure
230040009	Airway- Suction technique	353008	IV monitoring
385857005	Airway- Ventilator care and adjustment	226005007	Maintenance of central line
49689007	Application of cervical collar	55628002	Maintenance of thoracic drain
372045002	Application of chemical hemostatic agents	59900003	Manual and mechanical traction

<b>Code</b>	<b>Description</b>	<b>Code</b>	<b>Description</b>
26906007	Application of dressing, pressure	232664002	Manual establishment of airway
448970001	Application of pressure trouser	429283006	Mechanically assisted chest compression
79321009	Application of splint	52260009	Nasogastric tube maintenance
20655006	Application of tourniquet	56251003	Nebulizer therapy
422744007	Arterial catheter maintenance	91161007	Pedal pulse taking
423401003	Assessment- Pediatric pain	182556001	Pelvic sling
423184003	Assessment-Adult	309849004	Pericardiocentesis
233169004	Automatic defibrillator procedure	233526002	Peripheral venous cannula insertion - scalp
425447009	Bag valve mask ventilation	396540005	Phlebotomy
		386423001	Physical restraint
133901003	Burn care(Initial)	274475000	Pneumatic splinting
19821003	Carboxyhemoglobin measurement	45851008	Positive end expiratory pressure ventilation therapy, initiation and management
23852006	Cardiac monitoring	225708008	Precordial thump
18590009	Cardiac pacing	252465000	Pulse oximetry
89666000	Cardiopulmonary resuscitation	405677002	Rapid infusion device
250980009	Cardioversion	424287005	Removal of peripheral intravenous catheter
405427009	Catheterization of external jugular vein	34955007	Revision of automatic implantable cardioverter/defibrillator
42550007	Catheterization of umbilical vein	426498007	Stabilization of spine
392230005	Catheterization of vein	425058005	Taking orthostatic vital signs
398041008	Cervical spine immobilization	182705007	Tension pneumothorax relief
2267008	Changing tracheostomy tube	233519002	Umbilical artery cannula insertion
406164000	Chemical restraint	128968000	Vagal stimulation
47545007	Continuous positive airway pressure ventilation treatment	22633006	Vaginal delivery, medical personnel present
409530006	Decontamination	itSNOMED.001	Airway-King

**\*Airway-King is a custom code not in the NEMSIS suggested list but is required to be in OKEMSIS v3 dataset. NOTE: Codes have been added since implementation of v3.5 in Oklahoma. An updated list of codes can be found here: [OSDH EMS Website](#)**



## Incident Location Type Codes and Descriptions

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
Y92.520	Airport	Y92.26	Movie house or cinema
Y92.53	Ambulatory health services establishments	Y92.251	Museum
Y92.530	Ambulatory surgery center	Y92.12	Nursing home
Y92.831	Amusement park	Y92.65	Oil/Natural Gas rig
Y92.03	Apartment	Y92.29	Other specified public building
Y92.31	Athletic court(Indoor)	Y92.481	Parking lot
Y92.32	Athletic field(Outdoor)	Y92.412	Parkway(Turnpike)
Y92.482	Bike path	Y92.242	Post office
Y92.521	Bus station	Y92.14	Prison
Y92.833	Campsite	Y92.51	Private commercial establishments
Y92.11	Children's home or orphanage	Y92.0	Private Residence
Y92.243	City hall	Y92.830	Public park
Y92.214	College/University	Y92.85	Railroad track
Y92.210	Daycare center	Y92.522	Railway station
Y92.62	Dock or shipyard	Y92.83	Recreation area
Y92.211	Elementary school	Y92.15	Reform school
Y92.7	Farm	Y92.22	Religious institution
Y92.531	Health care provider office(Doctor's Office)	Y92.331	Roller skating rink
Y92.213	High school	Y92.513	Shop (commercial)
Y92.523	Highway rest stop	Y92.480	Sidewalk
Y92.23	Hospital	Y92.413	State road
Y92.330	Ice skating rink (indoor) (outdoor)	Y92.4	Street , highway and other paved roadways
Y92.6	Industrial or construction area	Y92.34	Swimming pool (public)
Y92.1	Institutional (nonprivate) residence	Y92.016	Swimming-pool in Private Residence
Y92.411	Interstate highway	Y92.254	Theater (live)
itICD.01	Lake/River	Y92.5	Trade and service area
Y92.241	Library	Y92.215	Trade school
Y92.414	Local residential or business street	Y92.410	Unspecified street and highway (includes unpaved)
Y92.212	Middle school	Y92.532	Urgent care center
Y92.13	Military base	Y92.82	Wilderness area
Y92.64	Mine or pit	Y92.834	Zoological garden (Zoo)
Y92.02	Mobile home		

**\*Lake/River is a custom code not in the NEMSIS suggested list but is required to be in OKEMSIS v3 dataset.**

## Medication Allergies Codes and Descriptions

<b>Code</b>	<b>Code Description</b>
Z88.1	Allergy status to other antibiotic agents status
Z88.2	Allergy status to sulfonamides status
Z88.4	Allergy status to anesthetic agent status
Z88.5	Allergy status to narcotic agent status
Z88.7	Allergy status to serum and vaccine status
Z88.9	Allergy status to unspecified drugs, medicaments and biological substances status
Z88.0	Allergy status to penicillin
Z88.3	Allergy status to other anti-infective agents status
Z88.6	Allergy status to analgesic agent status
Z88.8	Allergy status to other drugs, medicaments and biological substances status

NOTE: Codes have been added since implementation of v3.5 in Oklahoma. An updated list of codes can be found here: [OSDH EMS Website](#)

## Provider Impression Codes and Descriptions

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
I21.0	1-STEMI-ST elevation myocardial infarction of anterior wall	S39.91	Injury- Abdomen
I21.1	2-STEMI-ST elevation myocardial infarction of inferior wall	S90	Injury- Ankle, Foot, and Toes
I21.2	3-STEMI-ST elevation myocardial infarction of other sites	S59.9	Injury- Elbow and Forearm
I21.4	4-NSTEMI-Non-ST elevation myocardial infarction	S39.94	Injury- External Genitals
J05.1	Acute epiglottitis	S05	Injury- Eye and orbit
J06.9	Acute upper respiratory infection	S09.9	Injury- Face and Head
F10.9	Alcohol use	S79.9	Injury- Hip and Thigh
T78.40	Allergy	S06.9	Injury- Intracranial
T78.2	Anaphylactic shock	S39.92	Injury- Lower Back
D64.9	Anemia	S89.9	Injury- Lower Leg
I20.9	Angina pectoris	S19.9	Injury- Neck
J45.901	Asthma, (acute) exacerbation	T14.90	Injury- Not otherwise specified
Z74.01	Bedridden	S39.93	Injury- Pelvis
F99	Behaviorial / psychiatric disorder	S49.9	Injury- Shoulder and Upper Arm
J20.9	Bronchitis- Acute	S29.9	Injury- Thorax
T30.0	Burn	S69.9	Injury- Wrist, Hand, and finger
D49	Cancer	P15.9	Injury-[to newborn]
I46.9	Cardiac arrest	O80	Labor and Delivery, uncomplicated delivery
I49.9	Cardiac Arrhythmia/Dysrhythmia	O75	Labor and Delivery, with complications
I31.4	Cardiac tamponade	P24.0	Meconium aspiration
F14	Cocaine related disorders	K92.1	Melena
J95.85	Complication of respirator [ventilator]	E88.9	Metabolic disorder
S06.0X9A	Concussion with loss of consciousness	G43.9	Migraine
S06.0X0A	Concussion without loss of consciousness	G98.8	Neurological disorders
Q89.9	Congenital malformation,	P08.21	Newborn- Post-term
K59.00	Constipation	P07.3	Newborn- Preterm
J44.1	COPD	F13	Non-specified Sedative, hypnotic or anxiolytic related disorders
J05.0	Croup	E66.9	Obesity
E86.0	Dehydration	F11	Opioid related disorders
K59.1	Diarrhea	Z74.09	Other reduced mobility
T70	Effects of air pressure and water pressure	M54.9	Pain- Back non-traumatic

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
T18.9	Foreign body- Digestive system, part	K08.8	Pain- tooth
T16	Foreign body- Ear	G89.1	Pain-Acute
T19.9	Foreign body- Genitourinary tract	G89.2	Pain-Chronic
T15	Foreign body- On external eye	H57.10	Pain-Ocular, eye
T17.9	Foreign body- Respiratory tract, part	G82.20	Paraplegia
T33.90	frostbite- Superficial	J18.9	Pneumonia
T34.90	frostbite- With Necrosis	J93.9	Pneumothorax
K21	GERD-Gastro-esophageal reflux disease	O14.9	Pre-Eclampsia
F16	Hallucinogen related disorders	O60.1	Preterm labor with preterm delivery
Z77.9	Health hazard contact	O60.0	Preterm labor without delivery
I50.9	Heart failure	F19	Psychoactive substance related disorders
T67.5	Heat exhaustion	J81.0	pulmonary edema, acute
T67.0	Heatstroke and sunstroke	I26	Pulmonary embolism
G81.90	Hemiplegia- affecting side	G82.50	Quadriplegia
S06.4	hemorrhage- epidural	J68.9	Respiratory condition due to chemicals, gases, fumes and vapors
K92.2	hemorrhage- GI	J98.9	Respiratory disorder-
I62.9	Hemorrhage- Intracranial, nontraumatic	P22	Respiratory distress- newborn
S06.6	hemorrhage- subarachnoid	J96.9	Respiratory failure
S06.5	hemorrhage- subdural	B97.4	RSV
N93.9	hemorrhage- Vaginal(abnormal)	G40.89	Seizures- Other
O72	Hemorrhage-Postpartum	G40.901	Seizures- With status epilepticus
J94.2	Hemothorax	G40.909	Seizures- Without status epilepticus
E13.65	Hyperglycemia- Diabetes	A41.9	Sepsis
I10	Hypertension	D57.0	Sickle Cell Crisis
E16.2	Hypoglycemia	O03	Spontaneous abortion
E13.64	Hypoglycemia- Diabetes	P95	Stillbirth
I95.9	Hypotension	I63.9	Stroke
T68	Hypothermia	T71.9	Suffocation / Asphyxia
E86.1	Hypovolemia	L55.0	Sunburn of first degree
B99.9	Infectious Disease	L55.1	Sunburn of second degree
J11	Influenza	L55.2	Sunburn of third degree
F15	Inhalant Disorders- Non-specific	G45.9	Transient cerebral ischemic attack-
F18	Inhalant related disorders	H53.9	visual disturbance
R41.0	Excited(Agitated) Delirium	Z00.00	Encounter, Adult, No Findings or Complaints

<i>Code</i>	<i>Code Description</i>	<i>Code</i>	<i>Code Description</i>
R99	Obvious Death	Z00.129	Encounter, Child, No Findings or Complaints

## Symptom Codes and Descriptions

<i>Code</i>	<i>Code Description</i>	<i>Code</i>	<i>Code Description</i>
R14.0	Abdominal- Distension	R69	Illness
R19.30	Abdominal rigidity	G47.00	Insomnia
R10.81	Abdominal- Tenderness	R19.0	Intra-abdominal and pelvic swelling, mass and lump
R06	Abnormal- breathing	N92.6	Irregular menstruation
R26.9	Abnormal- Of gait and mobility	R45.4	Irritability and anger
R29.2	Abnormal- reflex	L29.9	Itching
R09.3	Abnormal- sputum	R17	Jaundice
N93.9	Abnormal- uterine and vaginal bleeding	R27.9	Lack of coordination
R63.5	Abnormal- weight gain	R25.3	Muscle Twitch
R63.4	Abnormal- weight loss	R09.81	Nasal congestion
R25.0	Abnormal- head movements	R11.0	Nausea
R25.9	Abnormal- Involuntary Movements	R11.2	Nausea- With vomiting
R19.11	Absent bowel sounds	R45.0	Nervousness
R10.0	Acute abdomen	R03.1	Nonspecific low blood-pressure reading
R41.82	Altered mental status	R06.01	Orthopnea
R41.3	amnesia	R07.82	Pain- Intercostal (rib)
R63.0	Anorexia	R30.9	Pain- Micturition
R13.0	Aphagia (related to swallowing)	R10.84	Pain- Abdominal (general)
R47.01	Aphasia(related to speech and language)	R10	Pain- Abdominal and Pelvic
R49.1	Aphonia (Loss of Voice)	R07.9	Pain- Chest
R06.81	Apnea	R07.1	Pain- Chest, upon breathing
R18.8	ascites	H92.09	Pain- Ear
R09.01	Asphyxia	R10.13	Pain- Epigastric
R27.0	Ataxia	R68.84	Pain- Jaw
R04.2	Blood in sputum	R10.32	Pain- Left lower quadrant
R00.1	Bradycardia	R10.12	Pain- Left upper quadrant
R64	Cachexia(wasting)	R10.30	Pain- Lower abdominal
R01.1	Cardiac murmur	H57.10	Pain- Ocular, eye
R57.0	Cardiogenic shock	R10.2	Pain- Pelvic and perineal
R68.83	Chills	R10.31	Pain- Right lower quadrant
R53.82	Chronic fatigue	R10.11	Pain- Right upper quadrant

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
R68.3	Clubbing of fingers	R07.0	Pain- throat
R10.83	Colic	R52	Pain- Not specified
R40.20	coma	R10.10	Pain- Upper abdominal
K59.00	Constipation	R23.1	Pallor
R56.9	convulsions	R00.2	Palpitations
R05	Cough	R06.3	Periodic breathing
R25.2	Cramp and spasm	R09.1	Pleurisy
R23.0	Cyanosis	R07.81	Pleurodynia
E86.0	Dehydration	R63.2	Polyphagia
R19.7	Diarrhea	R56.1	Post traumatic seizures
R41.0	Disorientation	R07.2	Precordial pain
R42	Dizziness	N48.3	Priapism
R40.0	Drowsiness	G44.53	Primary thunderclap headache
R68.2	Dry mouth	R10.82	Rebound abdominal tenderness
R13.10	Dysphagia (related to Swallowing)	N23	Renal Colic
R47.02	Dysphasia(related to Speech or comprehension)	R29.6	Repeated falls
R06.00	Dyspnea	R09.2	Respiratory arrest
R30.0	Dysuria	R45.1	Restlessness and agitation
R60.1	Edema- Generalized	R57.9	Shock-
R60.0	Edema- Localized	R57.1	Shock- Hypovolemic
R60.9	Edema,	R65.21	Shock- Sepsis
R03.0	Elevated blood-pressure reading- Non-Hypertensive	R65.20	Shock- Without Sepsis
R04.0	Epistaxis	R06.02	Shortness of breath
R14.2	Eructation(indigestion)	R20.2	Skin- Burning, Prickly, Tingling Sensation.
R61	Excessive Sweating	R20.1	Skin- Decreased Sensation
R63.1	Excessive Thirst	R21	Skin- Rash
R29.810	Facial Droop	R23.9	Skin- Changes
R53.83	fatigue	R22	Skin-Swelling, Mass, or Lump
R50.9	Fever	R46.4	Slowness and poor responsiveness
R14.3	Flatulence	R47.81	Slurred speech
R23.2	Flushing	R06.7	Sneezing
R35.0	Frequency of micturition	R06.83	Snoring
R68.12	Fussy infant (baby)	R47.9	speech disturbances
R26.0	Gait- Ataxic	R23.3	Spontaneous ecchymoses
R26.1	Gait- Paralytic	R45.7	State of emotional shock and stress
R26.2	Gait, Limp Gait or Difficulty Walking	R06.1	Stridor
R14.1	Gas pain	R40.1	Stupor

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
K92.2	Gastrointestinal hemorrhage	R45.851	Suicidal ideations
R44.3	Hallucinations	R55	Syncope and collapse
R44.0	Hallucinations, Auditory	R00.0	Tachycardia
R51	Headache	R06.82	Tachypnea
H91.90	Hearing loss- ear	K08.8	Toothache
R12	Heartburn	R40.4	Transient- Alteration of awareness
R31	Hematuria	R29.5	Transient- Paralysis
G81	Hemiplegia and hemiparesis	R25.1	Tremor, involuntary
R58	Hemorrhage	R26.81	Unsteadiness on feet
R04.9	Hemorrhage- Respiratory Passages,	R32	urinary incontinence
R04.1	Hemorrhage- Throat	R45.6	Violent behavior
R06.6	Hiccough	H53.9	visual disturbance
R49.0	Hoarseness	R44.1	Visual hallucinations
R45.850	Homicidal ideations	H54.7	visual loss
R19.12	Hyperactive bowel sounds	R11.10	Vomiting
R20.3	Hyperesthesia	K92.0	Vomiting- Blood
R73.9	Hyperglycemia	R11.13	Vomiting- Of fecal matter
G47.10	Hypersomnia	R11.11	Vomiting- Without Nausea
R06.4	Hyperventilation	R11.12	Vomiting- Projectile
R09.02	Hypoxemia	R53.1	Weakness
R99	Obvious Death	R06.2	Wheezing
Z00.00	Encounter, Adult, No Findings or Complaints	Z00.129	Encounter, Child, No Findings or Complaints

NOTE: Codes have been added since implementation of v3.5 in Oklahoma. An updated list of codes can be found here: [OSDH EMS Website](#)

## Cause of Injury Codes and Descriptions

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
V00.8	Accident on pedestrian conveyance	X01.1	Exposure to smoke in uncontrolled fire, not in building or structure
W65	Accidental drowning and submersion while in bath-tub	Y26	Exposure to smoke, fire and flames, undetermined intent
W69	Accidental drowning and submersion while in natural water	X32	Exposure to sunlight
W67	Accidental drowning and submersion while in swimming-pool	X00	Exposure to uncontrolled fire in building or structure
W32	Accidental handgun discharge and malfunction	X01	Exposure to uncontrolled fire, not in building or structure
W50	Accidental hit, strike, kick, twist, bite or scratch by another person	W89.9	Exposure to unspecified man-made visible and ultraviolet light
W33	Accidental rifle, shotgun and larger firearm discharge and malfunction	W10.9	Fall (on) (from) stairs and steps
V97	Air transport accident	W00.9	Fall due to ice and snow
V80.9	Animal-rider or occupant of animal-drawn vehicle injured in other and transport accidents	W06	Fall from bed
V91	Any injury except drowning and submersion as a result of an accident to watercraft	W07	Fall from chair
T71.9	Asphyxiation not otherwise stated	W15	Fall from cliff
T71.29	Asphyxiation due to being trapped in other low oxygen environment	W05	Fall from non-moving wheelchair, nonmotorized scooter and motorized mobility scooter
T71.1	Asphyxiation due to mechanical threat to breathing	W17	fall from one level to another
X96.9	Assault by explosive	W18.1	Fall from or off toilet
X95.9	Assault by firearm discharge	W08	Fall from other furniture
X98.9	Assault by hot objects	W14	Fall from tree
X99.9	Assault by sharp object	W13.9	Fall from, out of or through building, not otherwise specified
Y03.0	Assault by being hit or run over by motor vehicle	W13.2	Fall from, out of or through roof
Y00	Assault by blunt object	W13.4	Fall from, out of or through window
Y04	Assault by bodily force	W18.2	Fall in (into) shower or empty bathtub
Y03	Assault by crashing of motor vehicle	W11	Fall on and from ladder
X92.9	Assault by drowning and submersion,	W09	Fall on and from playground equipment
Y04.1	Assault by human bite	W12	Fall on and from scaffolding
Y01	Assault by pushing from high place	W01	Fall on same level from slipping, tripping and stumbling



<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
Y02	Assault by pushing or placing victim in front of moving object	W16	Fall, jump or diving into water
X97	Assault by smoke, fire and flames	Y30	Falling, jumping or pushed from a high place, undetermined intent
Y09	Assault by unspecified means	Y31	Falling, lying or running before or into moving object, undetermined intent
X36	Avalanche, landslide and other earth movements	Y24.9	Firearm discharge, undetermined intent
V79.3	Bus occupant (driver) (passenger) injured in nontraffic accident	X38	Flood
V79.9	Bus occupant (driver) (passenger) injured in traffic accident	W45	Foreign body or object entering through skin
V49.3	Car occupant (driver) (passenger) injured in nontraffic accident	X74.9	Intentional self-harm by firearm discharge
V49.9	Car occupant (driver) (passenger) injured in traffic accident	X77.9	Intentional self-harm by hot objects
W23	Caught, crushed, jammed or pinched in or between objects	X78.9	Intentional self-harm by sharp object
W30.9	Contact with agricultural machinery	X79	Intentional self-harm by blunt object
Y27.9	Contact with hot objects, undetermined intent	X82	Intentional self-harm by crashing of motor vehicle
Y28.9	Contact with sharp object, undetermined intent	X71.9	Intentional self-harm by drowning and submersion,
Y29	Contact with blunt object, undetermined intent	X75	Intentional self-harm by explosive material
W54	Contact with dog	X80	Intentional self-harm by jumping from a high place
Y25	Contact with explosive material, undetermined intent	X81	Intentional self-harm by jumping or lying in front of moving object
X14	Contact with hot air and other hot gases	X76	Intentional self-harm by smoke, fire and flames
X10	Contact with hot drinks, food, fats and cooking oils	W49.0	Item causing external constriction
X17	Contact with hot engines, machinery and tools	T76.9	Maltreatment, suspected
X16	Contact with hot heating appliances, radiators and pipes	V29.3	Motorcycle rider (driver) (passenger) injured in nontraffic accident
X15	Contact with hot household appliances	V29.9	Motorcycle rider (driver) (passenger) injured in traffic accident
X11	Contact with hot tap-water	V69.3	Occupant (driver) (passenger) of heavy transport vehicle injured in nontraffic accident
W26	Contact with knife, sword or dagger	V69.9	Occupant (driver) (passenger) of heavy transport vehicle injured in traffic accident
W27	Contact with nonpowered hand tool	V86.31	Occupant of ambulance or fire engine injured in traffic accident

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
W60	Contact with nonvenomous plant thorns and spines and sharp leaves	V86.99	Occupant of all-terrain or other off-road motor vehicle injured in nontraffic accident
X12	Contact with other hot fluids	V86.39	Occupant of all-terrain or other off-road motor vehicle injured in traffic accident
X18	Contact with other hot metals	V81.9	Occupant of railway train or railway vehicle injured in railway accident
W55	Contact with other mammals	V84.9	Occupant of agricultural vehicle injured in nontraffic accident
W29	Contact with powered hand tools and household machinery	V83.9	Occupant of industrial vehicle injured in nontraffic accident
W25	Contact with sharp glass	Y37.9	Other and unspecified military operations
X13	Contact with steam and other hot vapors	V93	Other injury due to accident on board watercraft, without accident to watercraft
W31.9	Contact with unspecified machinery	V97.2	Parachutist accident
W52	Crushed, pushed or stepped on by crowd or human stampede with or without fall	V19.3	Pedal cyclist (driver) (passenger) injured in nontraffic accident
W39	Discharge of firework	V19.9	Pedal cyclist (driver) (passenger) injured in traffic accident
V92	Drowning and submersion due to accident on board watercraft, without accident to watercraft	V09.9	Pedestrian injured in transport accident
V90	Drowning and submersion due to accident to watercraft	V00.0	Pedestrian injured in collision with non-motorized conveyance
Y21.9	Drowning and submersion, undetermined intent	V01	Pedestrian injured in collision with pedal cycle
X34	Earthquake	T50.90	Poisoning by, adverse effect of and underdosing of drugs, medicaments and biological substances
T75.0	Effects of lightning	W28	Powered lawn mower (commercial) (residential)
W38	Explosion and rupture of pressurized devices	V00.1	Rolling-type pedestrian conveyance accident
W40.9	Explosion of explosive materials	T75.4	Shock from electric current
X02	Exposure to controlled fire in building or structure	V00.13	Skateboard accident
X03	Exposure to controlled fire, not in building or structure	W18.4	Slipping, tripping and stumbling without falling
W85	Exposure to electric transmission lines	W21	Striking against or struck by sports equipment
W93	Exposure to excessive cold of man-made origin	W20	Struck by thrown, projected or falling object
W92	Exposure to excessive heat of man-made origin	Y38	Terrorism
X31	Exposure to excessive natural cold	Y38.6	Terrorism involving biological weapons
X30	Exposure to excessive natural heat	Y38.7	Terrorism involving chemical weapons

<b>Code</b>	<b>Code Description</b>	<b>Code</b>	<b>Code Description</b>
X04	Exposure to ignition of highly flammable material	X37.1	Tornado
X06	Exposure to ignition or melting of other clothing and apparel	T51.9	Toxic effect of alcohol
W88	Exposure to ionizing radiation	T59.9	Toxic effect of gases, fumes and vapors
W42	Exposure to noise	T60.9	Toxic effect of pesticide
W64	exposure to nonvenomous animal NOS	T58.9	Toxic effect of carbon monoxide from source
W99	Exposure to other man-made environmental factors	T63	Toxic effect of contact with venomous animals and plants
W90	Exposure to other nonionizing radiation	T65.9	Toxic effect of unspecified substance
X02.1	Exposure to smoke in controlled fire in building or structure	X37.9	Unspecified cataclysmic storm
X03.1	Exposure to smoke in controlled fire, not in building or structure		
X00.1	Exposure to smoke in uncontrolled fire in building or structure		

## Intercept Recipient Agency Code List

Code	Agency Name	Code	Agency Name
557	Adair County EMS	11	Konawa EMS
399	AEL 36-Cushing	118	Laverne EMS
502	Aerocare-Joplin	113	Leedey Ambulance
503	Aerocare-Kansas	75	Life EMS
499	Air EMS, Inc	354	Life EMS of Hennessey
540	Air Evac Lifeteam - Seminole	549	Lifeguard Ambulance Service LLC, Tulsa
555	Air Evac EMS Inc dba Air Evac Lifeteam Durant	515	Lifeguard Ambulance Service Weatherford
550	Air Evac EMS Inc dba Air Evac Lifeteam Grove	458	LifeNet Inc.
516	Air Evac EMS inc dba Air Evac Lifeteam	348	Lifenet Inc. dba ARCH/MedFlight
525	Air Evac EMS, Inc - Ft. Smith, AR	343	Lindsay EMS
525	Air Evac Lifeteam - Fort Smith	54	Major County EMS
396	Air Evac Lifeteam - Ada	93	Mannford Ambulance
473	Air Evac Lifeteam - Altus	127	Marshall County EMS District
491	Air Evac Lifeteam - Ardmore	265	Mayes Emergency Svc Trust Auth
397	Air Evac Lifeteam - Claremore	311	McAlester Army Ammunition Plant
430	Air Evac Lifeteam - DeQueen	80	McAlester Fire Department EMS
401	Air Evac Lifeteam - Duncan	489	McAlester Regional Air Care
412	Air Evac Lifeteam - Elk City	222	McClain Grady EMS District #1
500	Air Evac Lifeteam - Henryetta	124	McCurtain County EMS
494	Air Evac Lifeteam - Idabel	36	Medford Ambulance
492	Air Evac Lifeteam - Kingfisher	445	Medic West, LLC
433	Air Evac Lifeteam - Muskogee	407	MediFlight SC
395	Air Evac Lifeteam - Paris, AR	533	Med-Trans Corporation - HART
495	Air Evac Lifeteam - Ponca City	477	Med-Trans Corporation dba AirMed Regional-Houston
400	Air Evac Lifeteam - Springdale	514	Med-Trans Corporation dba LifeStar
482	Air Evac Lifeteam - Weatherford	312	Mercy Health- Love County
402	Air Evac Lifeteam - Wichita Falls	475	Mercy Hospital Ada EMS
429	Air Evac Lifeteam - Woodward	506	Mercy Life Line 5
428	Air Evac Lifeteam	422	Mercy Regional of Oklahoma
451	Air Kids One(Air) SC	520	Miller EMS - Cashion/Crescent
504	AirMed- McAlester	536	Miller EMS - Garfield County
239	Alfalfa County EMS	534	Miller EMS - Kingfisher
26	Alva Ambulance Service	537	Miller EMS - Lincoln County
315	American Medical Response-Duncan	528	Miller EMS - Osage County
337	American Medical Response-Marlow	519	Miller EMS - Owasso
88	Anadarko Fire Department EMS	521	Miller EMS- Fairfax



<b>Code</b>	<b>Agency Name</b>	<b>Code</b>	<b>Agency Name</b>
270	Antlers(city of) EMS	436	Miller EMS, LLC
210	Apache Ambulance	332	Murray County EMS
465	Apollo MedFlight (Reciprocity)	78	Muskogee County EMS
466	Apollo MedFlight, LLC	108	Newkirk Fire Dept EMS
28	Atoka County EMS	176	Noble Fire Department
77	Bartlesville Ambulance	65	Northeastern Health System
29	Beaver County EMS	432	Nowata EMS
31	Blackwell Fire EMS Ambulance	8	Okeene EMS
23	Broken Arrow Fire Department EMS	512	Oklahoma Critical Care Transport- BLS
128	Bryan County EMS	76	Okmulgee County EMS
255	Buffalo EMS District	356	Oologah-Talala Emergency Medical Service District
84	Burns Flat Ambulance	6	Owasso Fire Department EMS
355	Butler EMS	190	Pafford Air Medical Services - Fixed Wing
111	Canton-Longdale EMS	517	Pafford EMS - Yukon
435	CareFlite	527	Pafford EMS Bethany/Warr Acres
471	Carnegie EMS	416	Pafford EMS of Oklahoma (Claremore)
32	Chandler Ambulance	532	Pafford EMS of Oklahoma (El Reno)
174	Checotah EMS	553	Pafford EMS of Oklahoma (Hinton)
263	Cherokee Nation EMS	481	Pafford EMS of Oklahoma (McAlester)
213	Cheyenne & Arapaho EMS	487	Pafford EMS of Oklahoma (Stilwell)
300	Chickasaw Nation EMS	562	Pafford Med Serv. Of OK, Inc. Childrens Transport Team-Ground
7	Chickasha Fire Dept EMS	561	Pafford Med. Serv. Of OK, Inc. Childrens Transport Team-AIR
319	Childrens Hosp. At St. Francis	551	Pafford Medical Services - Del City
227	Choctaw County Ambulance Auth.	530	Pauls Valley Ambulance Authority
523	Choctaw Nation EMS	464	Pawhuska EMS
1	Cimarron County EMS	187	Pawnee Ambulance
375	Coalgate Fire Department EMS	59	Perry Fire Department EMS
125	Colbert EMS	535	PHI Health, LLC dba PHI Air Medical
33	Collinsville Fire Department	160	Ponca City Fire Department Ambulance
314	Comanche Co. Memorial Hosp EMS	61	Pond Creek Fire and Ambulance
179	Community Ambulance	437	Quapaw Nation Fire/EMS
563	Community EMS - Fairfax	325	React EMS
564	Community EMS - Savanna	369	Rocky Mountain Holdings LLC dba LifeSave
484	Cordell EMS	461	Rocky Mountain Holdings, DBA Mediflight of OK
462	Country Corner Fire District	456	Rocky Mountain TLF(SC)
131	Coweta Fire Department EMS	63	Roger Mills Ambulance



Code	Agency Name	Code	Agency Name
83	Creek County Emergency Ambulance Service District	229	Rush Springs Fire/EMS
219	Creek Nation EMS	480	Samaritan EMS- Tinker AFB
39	Cushing Fire Department	468	Samaritan EMS-Stroud
526	Dale Aviation, Inc. dba Medical Air Rescue	126	Seminole Fire -Rescue
498	EagleMed - Kansas	89	Shidler Ambulance
546	Eldorado EMS	171	Sinor EMS- Clinton
383	Elk City Fire Department/EMS	145	Sinor EMS -Hobart
42	Ellis County EMS	275	Sinor EMS- Sayre
186	Elmore City EMS	410	Sinor EMS- Thomas
303	EMS of LeFlore County	24	Skiatook Fire And EMS
44	EMSA -East Division	64	Southern Oklahoma Ambulance Service
296	EMSA-West Division	117	Southwest Okla. Ambulance Auth
322	EMSSTAT-Norman Regional EMS	55	SSM Health St. Anthony
34	Erick Ambulance	522	SSM Health St. Anthony Hospital-Oklahoma City EMS
505	First Flight (Tahlequah, OK)	529	Stratford Response Area
457	Fort Sill EMS	513	Survival Flight - OK
15	Freedom Volunteer Fire and Ambulance	560	Survival Flight EMS - Kiowa County
141	Goodwell Ambulance	545	Survival Flight EMS LLC
30	Grandfield Ambulance	115	Tillman County EMS District
107	Greer County Special Ambulance Service	161	Tonkawa Fire Dept Ambulance
136	Grove EMS	444	Tulsa Life Flight
556	GTG EMS	68	Tuttle Fire
152	Guthrie Fire EMS	518	United EMS Lincoln County
173	Guymon Fire Department Ambulance	302	Velma Fire & EMS
543	Hasting EMS	441	Vici-Camargo EMS
421	Hominy EMS	541	Wadleys EMS Inc - Stratford
50	Hooker Municipal Ambulance	538	Wadleys EMS Inc (Wynnewood)
51	Hughes County EMS	384	Wadley's EMS, Inc
94	INTEGRIS Miami EMS	14	Wagoner EMS
228	International Paper EMS	501	Watonga EMS
238	Jackson County EMS	501	Watonga Fire and EMS
200	Jay EMS	485	Waurika EMS
79	Johnston County EMS	4	Waynoka Ambulance Service
347	Keyes EMS	539	Weleetka Graham EMS
147	Kingfisher Fire Department	184	Wewoka Fire Department
3	Kirks Emergency Service	119	Woodward County EMS

**1. Agency List is subject to change and will be updated at least once a year.**





## Date/Time Formats in OKEMSIS

**Services are required to use the below format for all date/times in OKEMSIS. DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)**

yyyy	a four-digit numeral that represents the year
'-'	separators between parts of the date portion
mm	a two-digit numeral that represents the month
dd	a two-digit numeral that represents the day
T	separator that indicates time-of-day follows
hh	a two-digit numeral that represents the hour
':'	a separator between parts of the time-of-day portion
mm	a two-digit numeral that represents the minute
ss	a two-integer-digit numeral that represents the whole seconds
'.' s+	(not required) represents the fractional seconds
zzzzzz	(required) represents the timezone (as described below)

**Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm**

hh	a two-digit numeral (with leading zeros as required) that represents the hours
mm	a two-digit numeral that represents the minutes
'+'	a nonnegative duration
'-'	a nonpositive duration

## Assessments (eExam) Section

<b>Legend</b>	Dataset Level: <span style="background-color: red; color: white; padding: 0 2px;">N</span> National <span style="background-color: yellow; color: black; padding: 0 2px;">S</span> State
	Usage: <span style="background-color: gray; color: white; padding: 0 2px;">M</span> = Mandatory, <span style="background-color: gray; color: white; padding: 0 2px;">R</span> = Required, <span style="background-color: gray; color: white; padding: 0 2px;">E</span> = Recommended, or <span style="background-color: gray; color: white; padding: 0 2px;">O</span> = Optional
	Attributes: <span style="background-color: yellow; color: black; padding: 0 2px;">N</span> = Not Values, <span style="background-color: yellow; color: black; padding: 0 2px;">P</span> = Pertinent Negatives, <span style="background-color: yellow; color: black; padding: 0 2px;">L</span> = Nillable, and/or <span style="background-color: yellow; color: black; padding: 0 2px;">C</span> = Correlation ID

### eExam

0:1	eExam.01 - Estimated Body Weight in Kilograms	<span style="background-color: yellow; color: black; padding: 0 2px;">S</span>	<span style="background-color: gray; color: white; padding: 0 2px;">E</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">N</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">L</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>
0:1	eExam.02 - Length Based Tape Measure	<span style="background-color: yellow; color: black; padding: 0 2px;">S</span>	<span style="background-color: gray; color: white; padding: 0 2px;">E</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">N</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">L</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>
0:M	eExam.AssessmentGroup					<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>
0:1	eExam.03 - Date/Time of Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>			
0:M	eExam.04 - Skin Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.05 - Head Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.06 - Face Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.07 - Neck Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.08 - Chest/Lungs Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.09 - Heart Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.AbdomenGroup					<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>
0:1	eExam.10 - Abdominal Assessment Finding Location		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>			
0:M	eExam.11 - Abdomen Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.12 - Pelvis/Genitourinary Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.SpineGroup					<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>
0:1	eExam.13 - Back and Spine Assessment Finding Location		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>			
0:M	eExam.14 - Back and Spine Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.ExtremityGroup					<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>
0:1	eExam.15 - Extremity Assessment Finding Location		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>			
0:M	eExam.16 - Extremities Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.EyeGroup					<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>
0:1	eExam.17 - Eye Assessment Finding Location		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>			
0:M	eExam.18 - Eye Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.19 - Mental Status Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	
0:M	eExam.20 - Neurological Assessment		<span style="background-color: gray; color: white; padding: 0 2px;">O</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">P</span>	<span style="background-color: yellow; color: black; padding: 0 2px;">C</span>	



## Sample Custom Element/Code Configuration

<!------->

<!-- eCustomConfiguration section -->

<!------->

```
<eCustomConfiguration>
  <eCustomConfiguration.CustomGroup CustomElementID="itRecord.001">
    <eCustomConfiguration.01>itRecord.001</eCustomConfiguration.01>
    <eCustomConfiguration.02>Incident ID (Export Only)</eCustomConfiguration.02>
    <eCustomConfiguration.03>9902005</eCustomConfiguration.03>
    <eCustomConfiguration.04>9923001</eCustomConfiguration.04>
    <eCustomConfiguration.05>9903007</eCustomConfiguration.05>
  </eCustomConfiguration.CustomGroup>
  <eCustomConfiguration.CustomGroup CustomElementID="eSituation.13">
    <eCustomConfiguration.01
nemsisElement="eSituation.13">eSituation.13</eCustomConfiguration.01>
      <eCustomConfiguration.02>The acuity of the patient's condition upon EMS arrival at
the scene.</eCustomConfiguration.02>
      <eCustomConfiguration.03>9902009</eCustomConfiguration.03>
      <eCustomConfiguration.04>9923001</eCustomConfiguration.04>
      <eCustomConfiguration.05>9903003</eCustomConfiguration.05>
      <eCustomConfiguration.06 nemsisCode="2813003" customValueDescription="Priority
2">it2813.101</eCustomConfiguration.06>
    </eCustomConfiguration.CustomGroup>
  </eCustomConfiguration>
```

<!------->

<!-- PatientCareReport section -->

<!-- NOTE: because eSituation.13 is a Nationally-required element in the XML you must provide a "real" value here. Upon import, if a value is found in eCustomResults for this element, the value provided here will get "overwritten" -->

<!------->

```
<eSituation.13>2813003</eSituation.13>
```

<!------->

<!-- eCustomResults section -->

<!------->

```
<eCustomResults>
  <eCustomResults.ResultsGroup>
    <eCustomResults.01>122416</eCustomResults.01>
    <eCustomResults.02>itRecord.001</eCustomResults.02>
  </eCustomResults.ResultsGroup>
  <eCustomResults.ResultsGroup>
    <eCustomResults.01>it2813.101</eCustomResults.01>
    <eCustomResults.02>eSituation.13</eCustomResults.02>
  </eCustomResults.ResultsGroup>
</eCustomResults>
```

## Contacts

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Phone: (405) 426-8480

OSDH OKEMISIS Website

[OKEMISIS - Oklahoma Emergency Medical Services Information System](#)

ImageTrend Support

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Support Website: <https://support.imagetrend.com>

NEMISIS Website

<http://www.nemisis.org>

