What is Changing

• Transitioning to a new ImageTrend platform called Elite

• VCEMS data standards are also improving, aligning ourselves with the new National and State requirements.

• While the look and feel of our ePCR will be completely different, the core concepts and intent remain unchanged
Why the Change?

- NEMSIS and CEMSIS standards have changed
- New NEMSIS dataset - Version 3
- More accurate, and complete, patient care record
Implementation Timeline

- September 2016: Pilot Training
- October 3, 2016: Pilot Go-Live
- November 2016: Countywide Training
- December 13, 2016: Countywide Go-Live
Terminology

Version 2 Dataset (Old)

• Service Bridge / Rescue Bridge
  • The website administrators and users access to make changes to agency information, add users, and view or update records

• FieldBridge
  • An installed application the majority of our providers used to document EMS patient care.

Version 3 Dataset (New)

• Elite
  • A website administrators and users will access to make changes to agency information, add users, and add/view/update records.
  • Access to this site requires connection to the internet.

• Elite Field
  • Used to document patient care in the field
  • Can be used with or WITHOUT an internet connection.
What is Different?

- Appearance
- Functionality
- A single system template
- NOT Values (NV) and Pertinent Negatives (PN)
- Assessment and Exams
The Run Form - Elite vs Elite Field

Elite Runform

Elite Field Runform
The Run Form - Sections and Panels

Sections

Panels

Complaint / Impression

Patient Complaints

Add

Chief Complaint Anatomic Location:

Chief Complaint Organ System:

Provider's Primary Impression:

Provider's Secondary Impressions:

Work-Related Illness/Ailment:

No  Unknown  Yes
The Run Form - Buttons and Power Tools

Buttons

Power Tools
The Run Form - Validation and Menu
The Run Form - Incident Timeline

- Timeline tracks various data as it is documented.
- Highlights red if there is something missing
- Allows user to ‘jump’ to specific fields
- Useful when providing a handoff report to another agency or hospital
The Run Form - Pt. Encounter Timeline

- Element of timeline tool that trends patient care data over multiple encounters.
- Useful for patients where trending may aid in clinical decisions (diabetic, pain, etc)
- Can switch between different views such as Blood Glucose, Blood Pressure, Heart Rate, Impression
- Requires multiple data points to trend, ideally 3 or more.
The Run Form - Grids

- Grids are used to organize various data elements
- Used throughout the runform
- For multiple entries, several grids need to be created
  - Chief Complaint
  - Secondary Complaint
VCEMS Data Standards

- Primarily based on the NEMSIS v3 dataset
- Aligns with CEMSIS (State EMSA) requirements
- Includes local elements based on supplemental questions or custom fields
- Provides clarity on certain data elements
- Standardized documentation across disciplines and agencies
Data Standards

NOT Values
- Used to document that data was not applicable to the EMS Response, or could not otherwise be collected or completed.
  - NOT Applicable
  - NOT Recorded
  - Not Reporting
- Not all data elements accept NOT values.

Pertinent Negatives
- Paint a better picture as to why a field could not be documented
- Primarily reserved for assessment and/or treatment related fields (meds, procedures, etc)
- A list of pertinent negatives is available in the VCEMS Data Standards document
Data Standards - NOT Values (NV)

- Not Applicable - The data element is not applicable or pertinent to the EMS event

- Not Recorded - If a data element was unintentionally left blank, the EMS software should auto-populate it with ‘Not Recorded’

- Not Reporting - The data element is not collected by the EMS Agency or the state. This NOT value does not apply to the National elements where “Usage = required”
Data Standards - Pertinent Negatives (PN)

• **Contraindication Noted** - During assessment, a contraindication for a specific procedure/medication/etc. was noted, thus preventing administration or application.

• **Denied by Order** - A specific medication was denied by base hospital (MICN or PLP), or some other entity with the powers to do so.

• **Medication Allergy** - A known allergy (medication or environmental) prevented administration or application of a specific medication.

• **Medication Already Taken** - The medication would have been indicated based on patient presentation or complaint, but was withheld because the patient was already given or self-administered, the medication prior to prehospital providers arriving on scene. An example of this could be Benadryl and/or Epinephrine in an allergic reaction, or perhaps albuterol for shortness of breath or respiratory distress.

• **Medication Not Indicated** - The patient’s presentation or condition does not warrant the administration of ANY medication (including oxygen).

• **Refused** - The patient refused the application or administration of a specific medication/procedure/etc.

• **Unable to Complete** - A specific situation or condition prevented the medication/procedure/etc. from being applied or administered. Entrapment or scene safety issues could be a possible cause for this type of situation.

*If/When you have a choice between a Null Value and a Pertinent Negative - use the Pertinent Negative whenever possible and logical.*
Important Points to Remember

• The validity score is not an absolute indicator of a good record
• The narrative section is not an “information landfill”
• The report section is not a one-stop-shop

• Everything about this ePCR system is new
  • Template Workflow
  • Visibility
  • Validity

• Communicate!
  • Things you like
  • Things you don’t like
  • Things that don’t seem to work right
  • Ideas about how to make the process better
Completing an ePCR

• Sections and panels follow “flow” of call
• Validity will help to guide you through report
• Red = required info
• Blue = section is complete
Completing an ePCR - Elite Field

Elite Field URL:

https://www.imagetrendelite.com/Elite/Organizationventuracounty/RunForm/Login
Completing an ePCR - Elite Field

Step 1 - Sign In

If you have permissions to multiple agencies, you will be prompted to select the agency for which you are creating an ePCR.
Completing an ePCR - Elite Field

- Dashboard will display:
  - Crew Info
  - Unit and Shift Info
  - Incidents (Posted and Not)
- Settings
  - Sync Resources - imports any changes to template, agency, crew, etc. - requires internet
- Inbox
  - Manage messages within the ImageTrend Elite system - requires internet
- To Post From Dashboard:
  - Select desired incident(s), and click ‘Post’
  - Or, click the ‘All’ button, then click ‘Post’
    - To clear ‘All’ selection, click ‘None’
Completing an ePCR - Elite Field
Completing an ePCR - Elite Field

Download CAD

Select Your Incident

Internet Connection Required!

Click the ‘down arrow’ symbol to import the desired CAD data.
Completing an ePCR - Assessment Tool

• Assessments can be documented in two different areas:
  • The Assessment Power Tool
  • Within the Assess/Exam Panel

• The ‘All Normals’ button has been removed from the assessment power tool
• Each individual body section now needs to be tagged ‘normal’ if there was a focused exam done on that area, AND nothing abnormal was discovered.
• If exam was not performed on a specific area, section should be tagged ‘Not Done’

See Next Several Slides for Visual on Assessment Power Tool
Completing an ePCR - Assessment Tool

• Step 1 - Complete the date and time of the assessment in the upper right of the tool.

• If you don’t do this, the exam will remain red, and you’ll have to complete the task in the exams grid, outside of the power tool. *Better to do everything all in one stop.*
Completing an ePCR - Assessment Tool

- Step 2 - Tag your ‘not dones’ by selecting ‘Tag Not Done’ at the bottom of the tool, then by selecting the tile(s) that were not assessed.

- When clicked as not done, the tile(s) should be brown with an exclamation point in the upper left corner of each tile.

- Click ‘done tagging’ when you have completed marking your ‘not dones’
Completing an ePCR - Assessment Tool

- Step 3 - Tag your ‘normals’ by clicking the ‘Tag Normals’ button.
- Remember that by clicking this, you are documenting that you have assessed ALL elements of that particular body section, and that ALL elements were within normal limits, based on your exam.
- When clicked as normal, the tile will turn blue with a thumbs up symbol in the upper right corner of each tile.
- Click ‘Done Tagging’ when you’ve completed marking your normals.
Completing an ePCR - Assessment Tool

- The remaining tiles are clicked individually to detail specific findings within each remaining body section.
- If you need to comment on a specific detail within that body section, click the details button and type in your findings.
- Once complete with a specific section, click the next tile.
- DO NOT CLICK OK until you are completely done with the assessment.
  - Clicking OK will exit you out of the power tool before you are complete.
Completing an ePCR - Assessment Tool

- Your assessment should be a combination of brown, blue and green tiles

- Once the assessment is complete, click ‘OK’ to save the assessment and exit the power tool.

- Once saved, this exam will reside as an exam grid in the Assess/Treat Section > Assess/Exam Panel.
Elite Pilot Area - Problems/Suggestions

- Service providers should report issues (validation, form functionality, visibility, etc.) through their normal ePCR chain of command.
  - Main Points of Focus:
    - Validation rules - you’re being asked to document something that you feel you shouldn’t be, based on call information, level of care, etc.
    - Visibility - you don’t see a field you think you should be documenting, based on call conditions, transport status, etc.
    - Form functionality - you’re not able to upload ECG, post a report, print a report, etc.

Please remain open-minded and flexible during the pilot. We will be making changes on the fly, based on discovered problems, etc.
Thank You!

This is a huge change.

Your input and participation is greatly appreciated!!!