

REMS REGIONAL PI COMMITTEE
AGENCY QUARTERLY QUALITY MANAGEMENT REPORT



Agency Number:

Agency Name:

Reporting Period Year:

JUL-SEPT (Q1)

OCT-DEC (Q2)

JAN-MAR (Q3)

APR-JUN (Q4)

REQUIRED DATA (Please complete all sections of this form and submit with additional PI Indicator Forms)

COMMENDATIONS:

Provider(s)

Cert #

Brief Description

RECOMMENDATION(S) FOR IMPROVEMENT IN THE EMS SYSTEM OR PI PROCESS:

Total Number of Patient Care Reports *Filed* This Period:

Total Number of Patient Care Reports *Reviewed* This Period:

Submitted by:

Date:

E-mail Address:

Contact Phone #:

**FAX COMPLETED FORMS TO REMS COUNCIL AT 540-373-0536
OR E-MAIL TO REMS@VAEMS.ORG**



FY2016 Q4 TRAUMA INDICATOR

Agency Name:
Total **TRAUMA** Cases Reviewed:
QA Representative:
Contact E-mail:

If you did not review any reports relevant to the particular question please check the “No Relevant Calls” box at the bottom of the form—this way, we know pages are intentionally left blank. Thank you!

This quarter’s trauma indicator is concerned with the use of Tranexamic Acid (TXA) in trauma patients.

Call Number	TXA used?	Cause of Injury	Time of Injury	Time TXA Administered	Outcome
20156891	Y / N	Cause of Injury	HH:MM:SS	HH:MM:SS	Effective / Non- Effective

NO RELEVANT CALLS



Agency Name:

Rappahannock EMS Council, Inc.
Quality Indicators, 4th Quarter FY2016 (April - May - June)

FY16 Q4 Medical Indicator

This quarter's medical indicator is a survey regarding the use of opioid pain medication.

Drug Administered	Dose	Route	Outcome

NO RELEVANT CALLS



EMS COUNCIL INC.

Agency Name:

Rappahannock EMS Council, Inc.
Quality Indicators, 4th Quarter FY2016 (April - May - June)

FY16 Q4 Medical Indicator

This quarter's medical indicator is a survey regarding the use of opioid pain medication.

Drug Administered	Dose	Route	Outcome

NO RELEVANT CALLS



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EMS COUNCIL INC.

FY16 Q4 System Indicator AIRWAY MANAGEMENT: *Please list all reviewed calls requiring airway management.*

Number of Attempts	Success	Type of Airway	First Choice?

NO RELEVANT CALLS



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Quality Indicators, 4th Quarter FY2016 (April - May - June)

EMS COUNCIL INC.

FY16 Q4 System Indicator *AIRWAY MANAGEMENT*: Please list all reviewed calls requiring airway management.

Number of Attempts	Success	Type of Airway	First Choice?

NO RELEVANT CALLS