

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

If you did not review any reports relevant to the particular question, please fill in "O"—do not leave these spaces blank or enter "N/A". Thank you!

### **FY15 Q2 Trauma Indicator**

Indicator	Pediatric Trauma (8 Years of Age or Younger)		
Purpose	Assess field potential of extremity injuries in pediatric patients		
Rationale	rovide regional assessment of treatment of extremity injuries in the pediatric patient		
Definitions	<u>Incident/Patient ID</u> – Specific incident relevant to this indicator		
Deminitions	Mechanism of Injury – Category for how injury occurred		

TRAUMA - PEDIATRIC (8 Years of Age or Younger)							
Incident/Patient	Mechanism of Injury (MOI)	(1) DID THE PATIENT HAVE POTENTIAL EXTREMITY FRACTURE(s)?	(2) WAS THE EXTREMITY(s) IMMOBILIZED?	(3) DID THE PATIENT RECEIVE PAIN MANAGEMENT?	AIC LEVEL		

CONTINUE ON NEXT PAGE IF NECESSARY.



# Incident/Patient ID Mechanism of Injury (MOI) | Incident/Patient ID | Mechanism of Injury (MOI) | FRACTURE(s)? | IMMOBILIZED? | IMMOBILIZED?

Please continue onto the next page



## FY15 Q2 Medical Indicator

Indicator	Pain Intervention / Management
Purpose	Assess regional pain management effectiveness
Rationale	Pain management involves both pharmacological interventions as well as non-pharmacological procedures. Survey will sample both types of procedures employed for pain management
	<u>Incident/Patient ID</u> – Specific incident relevant to this indicator
	Reason for Pain – Was this a medical or trauma type of patient?
Definitions	<u>Pain scale assessment</u> – Was pain scale assessment used and documented.
	Medication Administration choice, route, and dosage
	Non-Pharmacological Interventions – Indicate if performed, and type of intervention(s) used

	MEDICAL - Patient indications for Pain Management						
Assessment			Pharmacological Treatment		Nonpharmacological Treatment		Outcome
Incident / Patient ID	Reason For Pain (Trauma or Medical)	Pain scale utilized?	Was a medication given for pain management (Y or N)	What medication was administered?	Any nonpharmacological interventions performed?	Type (ex. Ice, Elevation, Immobilization, etc.)	Any noted patient improvement?
	CONTINUE ON NEXT PAGE IF NECESSARY.						



MEDICAL - Patient indications for Pain Management							
Assessment			Pharmacological Treatment		Nonpharmacological Treatment		Outcome
Incident / Patient ID	Reason For Pain (Trauma or Medical)	Pain scale utilized?	Was a medication given for pain management (Y or N)	What medication was administered?	Any nonpharmacological interventions performed?	Type (ex. Ice, Elevation, Immobilization, etc.)	Any noted patient improvement?

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### **FY15 Q2 System Indicator**

Indicator	Mechanical Aids				
Purpose	Assess the agencies that have adopted mechanical aids (CPAP, THUMPER, PACING, etc.), # of cases where they were employed for each device, elapsed time to being employed, and patient outcome.				
Rationale	Provide a regional assessment of mechanical aids in the field, and frequency of usage.				
Definitions	Incident/Patient ID – Specific incident relevant to this indicator  Type of Call – Standard listing for call type  Mechanical Aid Used – The specific mechanical aid that was utilized  Elapsed Time – The approximate amount of time between when call was received and device was utilized.  Improvement in Patient Status – Was there a noted improvement in patient status  AIC Level – Certification level for the Attendant in Charge (i.e. EMT-B, EMT- Advanced, EMT-P, etc.)				

# **SYSTEM - Mechanical Aids Carried By Agency Survey**

Type of Mechanical Aid	Quantity

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SYSTEM - Usage of Mechanical Aids						
Incident/Patient ID	Type of Call	Mechanical Aid Used	Approximate Elapsed Time to Employ the Mechanical Aid	Improvement in Patient Status?	AIC LEVEL	