		VTR 0615-02 Pennsylvania NEMSIS Elements
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Elements Re	commended for Remov	
	
Element Code	Data Element	Definition
E03_01	Complaint Reported by	The complaint dispatch reported to the responding unit.
	Dispatch	
E03_02	EMD Performed	Indication of whether EMD was performed for this EMS event.
E03_03	EMD Card Number	The EMD card number reported by dispatch, consisting of the card number, dispatch level, and dispatch mode
E05_03	Dispatch Notified Date/Time	The date/time dispatch was notified by the 911 call taker (if a separate entity)
F00 00		The sector de la sector de la facción de la sec
E06_08 E07_15	Patient's Home Zip Code	The patient's home ZIP code of residence
E07_15 E07_34	Work-Related	Indication of whether or not the injury is work related.
	CMS Service Level	The CMS service level for this EMS encounter.
E07_35	Condition Code Number	The condition codes are used to better describe the service and patient care delivery by an EMS service. Please
E08_05	Number of Datianta at Saana	consult CMS documentation for detailed descriptions of these condition codes and their use. Indicator of how many total patients were at the scene
E06_05	Number of Patients at Scene	
E08_06	Mass Casualty Incident	Indicator if this event would be considered a mass casualty incident (overwhelmed existing EMS resources)
E08_07	Incident Location Type	The kind of location where the incident happened
E09_11	Chief Complaint Anatomic	The primary anatomic location of the chief complaint as identified by EMS personnel
_	Location	
E09_12	Chief Complaint Organ	The primary organ system of the patient injured or medically affected. This is to be completed by EMS personnel
	System	with a minimum of an EMT-Paramedic level of credentialing.
E10_02	Intent of the Injury	The intent of the individual inflicting the injury
E14_06	Method of Blood Pressure	Indication of method of blood pressure procedure.
	Measurement	
E14_08	Electronic Monitor Rate	The patient's heart rate as recorded by an electronic monitoring device (ECG, pulse oximetry, etc.)
E15_01	NHTSA Injury Matrix	Type of injury identified and associated with the external body/Skin (including burns)
	External/Skin	
E15_02	NHTSA Injury Matrix Head	Type of injury identified and associated with the Head (excluding face, neck, cervical spine, and ear)
E15_03	NHTSA Injury Matrix Face	Type of injury identified and associated with the Face (including ear)
E15_04	NHTSA Injury Matrix Neck	Type of injury identified and associated with the Neck
E15_05	NHTSA Injury Matrix Thorax	Type of injury identified and associated with the Thorax (excluding the thoracic spine)
E15_06	NHTSA Injury Matrix Abdomen	Type of injury identified and associated with the Abdomen (excluding the lumbar spine)
E15_07	NHTSA Injury Matrix Spine	Type of injury identified and associated with the Spine
E15_07 E15_08	NHTSA Injury Matrix Upper	Type of injury identified and associated with the Upper Extremities
L13_08	Extremities	Type of mild y domined and associated with the opper Externates
E15 09	NHTSA Injury Matrix Pelvis	Type of injury identified and associated with the Pelvis
E15_10	NHTSA Injury Matrix Lower	Type of injury identified and associated with the Lower Extremities
	Extremities	
E15_11	NHTSA Injury Matrix	Type of injury identified and associated with Unspecified
	Unspecified	· · · · · · · · · · · · · · · · · · ·
E18_08	Medication Complication	Any complication (abnormal effect on the patient) associated with the administration of the medication to the
		patient by EMS
E19_07	Procedure Complication	Any complication associated with the performance of the procedure on the patient
E19_10	Procedure Authorization	The type of procedure authorization obtained
E19_12	Successful IV Site	The location of the IV site (if applicable) on the patient
E22_01	Emergency Department	The known disposition of the patient from the Emergency Department (ED)
	Disposition	
E22_02	Hospital Disposition	Indication of how the patient was dispositioned from the hospital, if admitted.

Element Code	Data Element	Definition
E05_01	Incident or Onset Date/Time	The date/time the injury occurred, or the date/time the symptoms or problem started
E08_03	Estimated Date/Time Initial Responder Arrived on Scene	The date/time differential between the initial responder and the EMS unit arriving on the scene, if applicable.
E11_06	Any Return of Spontaneous Circulation	Indication whether or not there was any return of spontaneous circulation at any time during the EMS evert.
E11_08	Estimated Time of Arrest Prior to EMS Arrival	The length of time the patient was down (estimated) before the responding unit arrived at the patient
E11_09	Date/Time Resuscitation Discontinued	The date/time the CPR was discontinued (or could be time of death)
E11 10	Reason CPR Discontinued	The reason that CPR or the resuscitation efforts were discontinued.
E14_01	Date/Time Vital Signs Taken	Date/Time Vital Signs Taken
E14 14	Blood Glucose Level	The patient's blood glucose level
E14_09	Pulse Oximetry	The patient's oxygen saturation
E14 23	Pain Scale	The patient's indication of pain from a scale of 0 -10.
E14 24	Stroke Scale	The patient's Los Angeles or Cincinnati Stroke Scale Results
E16 23	Mental Status Assessment	The assessment of the patient's mental status on examination
E18_01	Date/Time Medication Administered	The date/time medication administered to the patient
E18_02	Medication Administered Prior to this Units EMS Care	Indicates that the medication administration which is documented was administered prior to this EMS unit's care.
E18_04	Medication Administered Route	The route that the medication was administered to the patient.
E18 10	Medication Authorization	The type of treatment authorization obtained
E19_01	Date/Time Procedure Performed Successfully	The date and time the procedure was performed on the patient
E22_06	Patient ID Band/Tag Number	The unique number associated with a patient ID band agency. This is used by a few states as a universal linkage between healthcare data agencies.
E23_08	Required Reportable Conditions	The presence of any condition which is reportable based on federal or state regulations.