



State of Maryland  
**Maryland Institute for Emergency Medical Services Systems**

Wes Moore  
Governor

Clay B. Stamp  
Chairman, EMS Board

Theodore R. Delbridge, MD, MPH  
Executive Director



To: EMS Clinicians

From: Theodore Delbridge, MD, MPH  
Executive Director

Timothy Chizmar, MD  
State EMS Medical Director

Date: November 29, 2023

Re: **eMEDS Patient Care Reports**

The timely completion of an eMEDS® patient care report (PCR) is essential for a multitude of reasons. It conveys to subsequent health care personnel information that only you know, what you found, your assessment, and what you did. The value and importance to patients' continuum of health care cannot be overstated. Additionally, the PCR helps to explain rationales for decisions and treatments. It often provides clarity when there is uncertainty. Because PCRs exist as part of patients' permanent health care record, viewable by clinicians in CRISP records, it is crucial that they are accurate, clear, and timely in telling the story they are intended to convey. Quite simply, a call is not finished until the report, your contribution to the patient's medical record, is complete.

Accordingly, the COMAR regulations and *Maryland Medical Protocols for EMS* require the completion of a PCR for each patient within 24 hours of the call's dispatch. Please find the relevant regulations and protocol on the following page.

Thus, we expect EMS quality assurance officers and medical directors to notify the MIEMSS Office of Integrity about clinicians who have habitually late (>24 hours) or incomplete PCRs. EMS clinicians who do not complete reports are subject to suspension, revocation of licensure and other compliance actions as determined by the EMS Board.

As EMS professionals, we are an integral part of the health care system. Our reports are essential to clearly communicate our assessment and treatments with our colleagues. Thank you for your prompt attention to this matter.

CC:  
Highest Jurisdictional Officials  
Quality Assurance Officers  
Medical Directors

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[www.miemss.org](http://www.miemss.org)

#### **COMAR 30.03.04.04**

- A. Each jurisdictional operational program shall, within 24 hours of a call's dispatch, ensure the completion and submission of an eMEDS® patient care report for each unit:
- (1) That responds to a call within the State;
  - (2) That responds to a call from within the State;
  - (3) That provides EMS care;
  - (4) That provides EMS transport; or
  - (5) That applies the Maryland Medical Protocols for Emergency Medical Services
- B. The highest medically licensed or certified EMS clinician on each unit shall ensure the accurate and timely completion of the eMEDS® patient care report.

#### **COMAR 30.02.04.01**

##### **.01. Prohibited Conduct.**

The following conduct is prohibited (excerpt):

- I. Willfully making or filing a false report or record related to the provision of emergency medical services;
- J. Willfully failing to file or record, willfully impeding or obstructing the filing or recording, or willfully destroying a report required to be filed by statute or regulation;
- M. Failing to meet or violating appropriate protocols or standards of care for the delivery of quality emergency medical services;

#### **Maryland Medical Protocols for EMS: General Patient Care (Protocol 2.1)**

##### **K. Documentation**

A patient care report (PCR) will be completed and delivered to the receiving facility as soon as possible, ideally upon transfer of care. If this is not immediately possible, clinicians must provide documentation of the patient's prehospital care on [a MIEMSS-approved short form] for inclusion in the patient care record before leaving the receiving facility. The completed PCR shall be delivered within 24 hours after dispatch in compliance with COMAR 30.03.04.04.