

STANDARDIZED CALL REPORT & MEDICAL CONTROL

STANDARDIZED CALL REPORT

- Medic Name & Unit
- Number and Status of Patients
- Medic's Field Diagnosis & General Impression
- Mechanism of Injury or Nature of Illness
- Pertinent Historical and Physical Findings
- Interventions
- Last Set of VS & Trends Noted, including ETCO₂, SpO₂, CBG
- Estimated Time of Arrival
- Request Specific Orders

LERN CALL REPORT-Be prepared to provide the information below

- Current location
- Number of patients
- Age and sex of patient(s)
- Mechanism of injury and patient's chief complaint
- Patient's GCS
- Initial vital signs including B/P, pulse, and respiratory rate
- Entry criteria that the patient met if not provided previously

Pearls:

- Use the Recorded Line and verify that you are calling the correct hospital.
- An abbreviated standardized call report including the medic name & unit, medic's field diagnosis & general impression, and estimated time of arrival is acceptable for Status 4 patients and non-emergencies.
- Early communication with the hospital is important, especially with Status 1 & 2 patients.
- If the ED physician refuses to provide medical control orders, treat according to your protocols, complete an incident report, and contact your Quality Improvement Coordinator after the transport.
- For all scene calls, the medical control contact is the receiving hospital.
- For inter-facility transports, the medical control contact is the sending hospital unless it has been agreed upon by both facilities that the receiving facility will serve as medical control. For stroke and STEMI transfers, the receiving facility will serve as medical control.
- Significant changes in the patient's condition should be relayed to the receiving facility.

Region 1

- University Medical Center-New Orleans (UMC-NO) is considered Medical Control for all scene calls in Region 1. It is only necessary to contact (UMC-NO) via speed dial # 5121 for interventions requiring Medical Control orders.