



## Maryland Institute for Emergency Medical Services Systems

### COVID-19 Follow-Up Documentation Guidance

Friday, March 20, 2020

The administrative guidance released, regarding the emergency protocol entitled, “Viral Syndrome Pandemic Triage Protocol”, states the following:

*5. The EMSOP should develop a process to make a follow-up phone call or visit within 24 hours for every patient who is not transported to the ED using this protocol. Follow-up calls or visits should be documented under “Call Type: Mobile Integrated Health”, COVID-19 follow-up = Yes*

To accommodate for this provision, the following guidance is being recommended for documentation:

- EMSOPs will create a new eMEDS report.
- The validation score of a report, for a COVID-19 follow-up, is not a concern. It is understood that this type of report will contain limited information.
- Essential information to be completed are as follows:
  - **Dispatch > CAD**
    - Incident Number
      - Phone follow-up: Suggestion would be to use the same incident number as the original call followed by “ – Follow-Up”
      - Onsite Visit: Suggestion would be to use the same incident number as the original call followed by “ – Follow-Up” **OR** use new incident number generated from CAD if available
    - Type of Call: Mobile Integrated Community Health (MICH)
    - Is this a COVID-19 follow-up Call?: Yes
  - **Dispatch > Crew**
    - Crew Members: User performing the follow-up
  - **Patient > Patient Info**
    - Patient Demographics: Same as original patient contact from crews
      - Use of Repeat Patient
  - **Narrative > Narrative**
    - Narrative: Free text various notes
  - **Signatures > Signatures**
    - Sign as Report Author
  - **Date/Times Field**
    - Unit Dispatch/Notified: The date/time phone call/visit started
    - Back in Service: The date/time phone call/visit ended

## Suggested Data Entry for Follow-Up Phone Call / Visits

**\*\*Items highlighted in yellow are considered essential statewide.** All other information is suggested for the EMS Service to complete.

- Dispatch
  - CAD
    - **Incident Number**
      - **Phone follow-up: Suggestion would be to use the same incident number as the original call followed by “ – Follow-Up”**
      - **Onsite Visit: Suggestion would be to use the same incident number as the original call followed by “ – Follow-Up” OR use new incident number generated from CAD**
    - **Type of Call: Mobile Integrated Community Health (MICH)**
    - **Is this a COVID-19 follow-up Call?: Yes**
      - Dispatch Reason: No Other Appropriate Choice
  - Response
    - Responding Unit:
      - Phone follow-up: [Leave Blank]
      - Onsite Visit: [Select as Appropriate]
    - Unit Call Sign:
      - Phone follow-up: [Leave Blank]
      - Onsite Visit: [Select as Appropriate]
    - Level of Care of Unit for Incident:
      - Phone follow-up: [Cert. Level of User Making Call]
      - Onsite Visit: [Cert. Level of User Making Visit]
    - Response Mode to Scene: No Lights/Sirens
  - **Crew**
    - **Crew Members: User performing follow-up**
    - Crew Member Response Role: Other
  - Incident Location
    - Location Type: As appropriate
    - Address: Address of the scene units responded originally.
- Call Info
  - Disposition
    - Primary Role of the Unit at End of Incident: Non-Transport-Other Reason
    - Treatment & Transport Disposition: Operational Support Provided – Patient Contact
  - Conditions
    - Type of Call for Patient Contact: Medical Patient
    - STEMI/Cardiac/Stroke/SEPSIS/Overdose Conditions: No
- Patient
  - Patient Info
    - **Patient Demographics: Same as original patient contact from crews**
      - **Use of Repeat Patient may help**

- Chief Complaint
  - Date/Time of Onset: Not Applicable
  - Chief Complaint: COVID-19 follow-up
  - Anatomic Location of Chief Complaint: Not Applicable
  - Primary Symptom: Not Applicable
  - Alcohol/Drug Use: Unable to Complete/Not Known
- Assessment
  - Initial Priority: [Blank]
  - Clinician's Primary Impression: Not Applicable
  - Assessment: Based on follow-up you may be able to collect some information about the patient (i.e. Mental Status, Skin Condition, etc...)
- Past Medical History
  - Medical/Surgical History: Not Applicable
  - Advanced Directives: Not Applicable
- Narrative
  - Narrative: Crew Member Completing this Report: User making the phone call
  - **Narrative: Free text various notes**
  - Hand Off: Not Applicable – No Transport to Hospital
- **Signatures**
  - **Signatures: Sign as Report Author**
- Date/Times Field
  - Dispatch Notified: The date/time phone call/visit started
  - **Unit Dispatch/Notified: The date/time phone call/visit started**
  - At Patient Side: The date/time contact made with specific patient or caregiver
  - **Back in Service: The date/time phone call/visit ended**