

EMS Quick Report

Transport
EMS Agency: _____

Incident Date: ____/____/20____

Incident #: _____

Unit #: _____

Transport EMS Crew Members: #1 _____

#2 _____

List all other First Responder Agencies who were present on scene and had contact with the patient:

PT Patient Last Name: _____
Patient First Name: _____

Age: _____

Sex: _____

DOB: _____ / _____ / _____

Pt's Chief Complaint: _____

Call Type: Scene Transfer

Incident Type: TRAUMA (Alert given? Yes / No)

STROKE (Alert given? Yes / No)

CARDIAC (if STEMI or OHCA, Alert given? Yes / No)

OTHER : _____

TIMES
Dispatched: ____:____
On Scene: ____:____
Left Scene: ____:____
@Destination: ____:____

Record

Date/Time of Injury or Last Known Well: ____/____/20____ @ ____:____

Times as

Time of FMC: ____:____ (First Medical Contact)

Applicable:

Time of ALERT: ____:____ (TRAUMA/STROKE/STEMI/OHCA Alert)

(Alert = Pre-notification to hospital) - circle type of alert

Cardiac Arrest

Time of Initial Arrest: ____:____

Time of ROSC: ____:____

Time CPR Started: ____:____

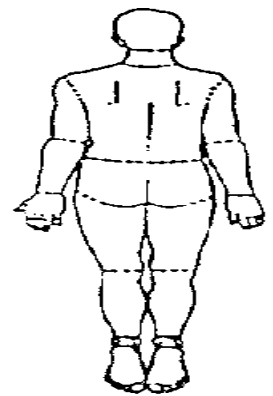
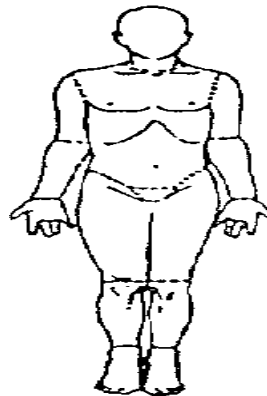
Initial ECG Rhythm: _____

Time	AVPU	GCS	HR	RR	BP	SpO ₂	ETCO ₂	Blood Glucose	Pain Scale	ECG Findings
:										
:										
:										
:										

HX
Allergies: _____
Medical Hx: _____
Medications: _____

Time	TREATMENT PROVIDED	Patient Reponse
:		
:		
:		
:		
:		

NOTES & PHYSICAL EXAM



Pt Received By: _____
(Print Name)
Signature of Person Receiving Pt: _____

Transfer of Care Time: ____:____

This form is to be used by EMS personnel to provide Pt care information to the receiving facility upon delivery of the Pt, and should **BE LEFT AT THE RECEIVING FACILITY PRIOR TO DEPARTURE OF THE CREW. THIS FORM DOES NOT REPLACE THE NEED TO SUBMIT AN ePCR.** Agencies must submit ePCRs to GEMSIS Elite within 24 hours of call completion, and hospitals may access those patient care reports on Hospital Hub. To gain access to Hospital Hub, please contact your Regional EMS Director (go to <https://dph.georgia.gov/EMS> and click on Regional EMS Systems) and they will forward your request.