

NHTSA / NEMSIS Version 3 – Requisite National Elements - EMS (ePCR/Event) DataSet -

The NHTSA / NEMSIS Version 3 National Subset of data elements for the EMS (ePCR/Event) submission is listed below. A total of 134 elements comprise the EMS Incident or Patient Care Report (ePCR/Event) Dataset (EMSDataset) submission information. Three elements make up the header information specific to the EMS Agency. The actual ePCR/Event information consists of 131 elements.

| | NHTSA / NEMSIS V3 Element Number | NHTSA / NEMSIS V3 Element Name | Obligatory in XML File (ePCR - Event Record) | Nullable Value Allowed? | Single-Select or Multi-Select Element |
|---|--|-----------------------------------|---|---|---|
| | | | | No = submit a “real” value Yes = NOT values and Nils | |
| HEADER - Demographic EMS Agency Information Group | | | | | |
| 1 | dAgency.01 | EMS Agency Unique State ID | Yes | No | Single-Select |
| 2 | dAgency.02 | EMS Agency Number | Yes | No | Single-Select |
| 3 | dAgency.04 | EMS Agency State | Yes | No | Single-Select |
| INCIDENT / PATIENT CARE REPORT (ePCR/Event) Information Group | | | | | |
| <ul style="list-style-type: none"> - This group repeats to allow multiple incident responses or patient encounters to be submitted in the XML file. - The national elements shown below are submitted for each single incident or patient record information. | | | | | |
| eRecord Information | | | | | |
| 1 | eRecord.01 | Patient Care Report Number | Yes | No | Single-Select |
| 2 | eRecord.02 | Software Creator | Yes | No | Single-Select |
| 3 | eRecord.03 | Software Name | Yes | No | Single-Select |
| 4 | eRecord.04 | Software Version | Yes | No | Single-Select |
| eResponse Information | | | | | |
| 5 | eResponse.01 | EMS Agency Number | Yes | No | Single-Select |
| 6 | eResponse.03 | Incident Number | Yes | Yes | Single-Select |
| 7 | eResponse.04 | EMS Response Number | Yes | Yes | Single-Select |
| 8 | eResponse.05 | Type of Service Requested | Yes | No | Single-Select |
| 9 | eResponse.07 | Primary Role of the Unit | Yes | No | Single-Select |
| 10 | eResponse.08 | Type of Dispatch Delay | Yes | Yes | Multi-Select |
| 11 | eResponse.09 | Type of Response Delay | Yes | Yes | Multi-Select |
| 12 | eResponse.10 | Type of Scene Delay | Yes | Yes | Multi-Select |
| 13 | eResponse.11 | Type of Transport Delay | Yes | Yes | Multi-Select |
| 14 | eResponse.12 | Type of Turn-Around Delay | Yes | Yes | Multi-Select |
| 15 | eResponse.13 | EMS Vehicle (Unit) Number | Yes | No | Single-Select |
| 16 | eResponse.14 | EMS Unit Call Sign | Yes | No | Single-Select |

| | NHTSA / NEMSIS V3 Element Number | NHTSA / NEMSIS V3 Element Name | Obligatory in XML File | Nullable Value Allowed? | Single-Select or Multi-Select Element |
|------------------------------|--|---|---------------------------|----------------------------|---|
| 17 | eResponse.15 | Level of Care of This Unit | Yes | No | Single-Select |
| 18 | eResponse.23 | Response Mode to Scene | Yes | No | Single-Select |
| 19 | eResponse.24 | Additional Response Mode Descriptors | Yes | Yes | Multi-Select |
| eDispatch Information | | | | | |
| 20 | eDispatch.01 | Complaint Reported by Dispatch | Yes | No | Single-Select |
| 21 | eDispatch.02 | EMD Performed | Yes | Yes | Single-Select |
| eTimes Information | | | | | |
| 22 | eTimes.01 | PSAP Call Date/Time | Yes | Yes | Single-Select |
| 23 | eTimes.03 | Unit Notified by Dispatch Date/Time | Yes | No | Single-Select |
| 24 | eTimes.05 | Unit En Route Date/Time | Yes | Yes | Single-Select |
| 25 | eTimes.06 | Unit Arrived on Scene Date/Time | Yes | Yes | Single-Select |
| 26 | eTimes.07 | Arrived at Patient Date/Time | Yes | Yes | Single-Select |
| 27 | eTimes.09 | Unit Left Scene Date/Time | Yes | Yes | Single-Select |
| 28 | eTimes.11 | Patient Arrived at Destination Date/Time | Yes | Yes | Single-Select |
| 29 | eTimes.12 | Destination Patient Transfer of Care Date/Time | Yes | Yes | Single-Select |
| 30 | eTimes.13 | Unit Back in Service Date/Time | Yes | No | Single-Select |
| ePatient Information | | | | | |
| 31 | ePatient.07 | Patients Home County' | Yes | Yes | Single-Select |
| 32 | ePatient.08 | Patients Home State' | Yes | Yes | Single-Select |
| 33 | ePatient.09 | Patients Home ZIP Code' | Yes | Yes | Single-Select |
| 34 | ePatient.13 | Gender | Yes | Yes | Single-Select |
| 35 | ePatient.14 | Race | Yes | Yes | Multi-Select |
| 36 | ePatient.15 | Age | Yes | Yes | Single-Select |
| 37 | ePatient.16 | Age Units | Yes | Yes | Single-Select |
| ePayment Information | | | | | |
| 38 | ePayment.01 | Primary Method of Payment | Yes | Yes | Single-Select |
| 39 | ePayment.50 | CMS Service Level | Yes | Yes | Single-Select |
| eScene Information | | | | | |
| 40 | eScene.01 | First EMS Unit on Scene | Yes | Yes | Single-Select |
| 41 | eScene.06 | Number of Patients at Scene | Yes | Yes | Single-Select |
| 42 | eScene.07 | Mass Casualty Incident | Yes | Yes | Single-Select |

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|-------------------------------|--|--|---------------------------|----------------------------|---|
| 43 | eScene.08 | Triage Classification for MCI Patient | Yes | Yes | Single-Select |
| 44 | eScene.09 | Incident Location Type | Yes | Yes | Single-Select |
| 45 | eScene.18 | Incident State | Yes | Yes | Single-Select |
| 46 | eScene.19 | Incident ZIP Code | Yes | Yes | Single-Select |
| 47 | eScene.21 | Incident County | Yes | Yes | Single-Select |
| eSituation Information | | | | | |
| 48 | eSituation.01 | Date/Time of Symptom Onset/Last Normal | Yes | Yes | Single-Select |
| 49 | eSituation.02 | Possible Injury | Yes | Yes | Single-Select |
| 50 | eSituation.07 | Chief Complaint Anatomic Location | Yes | Yes | Single-Select |
| 51 | eSituation.08 | Chief Complaint Organ System | Yes | Yes | Single-Select |
| 52 | eSituation.09 | Primary Symptom | Yes | Yes | Single-Select |
| 53 | eSituation.10 | Other Associated Symptoms | Yes | Yes | Multi-Select |
| 54 | eSituation.11 | Providers Primary Impression ¹ | Yes | Yes | Single-Select |
| 55 | eSituation.12 | Providers Secondary Impressions ¹ | Yes | Yes | Multi-Select |
| 56 | eSituation.13 | Initial Patient Acuity | Yes | Yes | Single-Select |
| eInjury Information | | | | | |
| 57 | eInjury.01 | Cause of Injury | Yes | Yes | Multi-Select |
| 58 | eInjury.03 | Trauma Center Criteria | Yes | Yes | Multi-Select |
| 59 | eInjury.04 | Vehicular, Pedestrian, or Other Injury Risk Factor | Yes | Yes | Multi-Select |
| eArrest Information | | | | | |
| 60 | eArrest.01 | Cardiac Arrest | Yes | Yes | Single-Select |
| 61 | eArrest.02 | Cardiac Arrest Etiology | Yes | Yes | Single-Select |
| 62 | eArrest.03 | Resuscitation Attempted By EMS | Yes | Yes | Multi-Select |
| 63 | eArrest.04 | Arrest Witnessed By | Yes | Yes | Multi-Select |
| 64 | eArrest.05 | CPR Care Provided Prior to EMS Arrival | Yes | Yes | Single-Select |
| 65 | eArrest.07 | AED Use Prior to EMS Arrival | Yes | Yes | Single-Select |
| 66 | eArrest.09 | Type of CPR Provided | Yes | Yes | Multi-Select |
| 67 | eArrest.10 | Therapeutic Hypothermia Initiated | Yes | Yes | Single-Select |
| 68 | eArrest.11 | First Monitored Arrest Rhythm of the Patient | Yes | Yes | Single-Select |

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|--|--|---|---------------------------|----------------------------|---|
| 69 | eArrest.12 | Any Return of Spontaneous Circulation | Yes | Yes | Multi-Select |
| 70 | eArrest.14 | Date/Time of Cardiac Arrest | Yes | Yes | Single-Select |
| 71 | eArrest.16 | Reason CPR/Resuscitation Discontinued | Yes | Yes | Single-Select |
| 72 | eArrest.17 | Cardiac Rhythm on Arrival at Destination | Yes | Yes | Multi-Select |
| 73 | eArrest.18 | End of EMS Cardiac Arrest Event | Yes | Yes | Single-Select |
| eHistory Information | | | | | |
| 74 | eHistory.01 | Barriers to Patient Care | Yes | Yes | Multi-Select |
| 75 | eHistory.17 | Alcohol/Drug Use Indicators | Yes | Yes | Multi-Select |
| eVitals Information | | | | | |
| - This group repeats to allow for multiple times where vital sign information is captured. | | | | | |
| 76 | eVitals.01 | Date/Time Vital Signs Taken | Yes | Yes | Single-Select |
| 77 | eVitals.02 | Obtained Prior to this Units EMS Care' | Yes | Yes | Single-Select |
| 78 | eVitals.03 | Cardiac Rhythm / Electrocardiography (ECG) | Yes | Yes | Multi-Select |
| 79 | eVitals.04 | ECG Type | Yes | Yes | Single-Select |
| 80 | eVitals.05 | Method of ECG Interpretation | Yes | Yes | Multi-Select |
| 81 | eVitals.06 | SBP (Systolic Blood Pressure) | Yes | Yes | Single-Select |
| 82 | eVitals.08 | Method of Blood Pressure Measurement | Yes | Yes | Single-Select |
| 83 | eVitals.10 | Heart Rate | Yes | Yes | Single-Select |
| 84 | eVitals.12 | Pulse Oximetry | Yes | Yes | Single-Select |
| 85 | eVitals.14 | Respiratory Rate | Yes | Yes | Single-Select |
| 86 | eVitals.16 | Carbon Dioxide (CO2) | Yes | Yes | Single-Select |
| 87 | eVitals.18 | Blood Glucose Level | Yes | Yes | Single-Select |
| 88 | eVitals.19 | Glasgow Coma Score-Eye | Yes | Yes | Single-Select |
| 89 | eVitals.20 | Glasgow Coma Score-Verbal | Yes | Yes | Single-Select |
| 90 | eVitals.21 | Glasgow Coma Score-Motor | Yes | Yes | Single-Select |
| 91 | eVitals.22 | Glasgow Coma Score-Qualifier | Yes | Yes | Multi-Select |
| 92 | eVitals.26 | Level of Responsiveness (AVPU) | Yes | Yes | Single-Select |
| 93 | eVitals.27 | Pain Score | Yes | Yes | Single-Select |
| 94 | eVitals.29 | Stroke Scale Score | Yes | Yes | Single-Select |
| 95 | eVitals.30 | Stroke Scale Type | Yes | Yes | Single-Select |
| 96 | eVitals.31 | Reperfusion Checklist | Yes | Yes | Single-Select |

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| eProtocols Information | | | | | |
| - This group repeats to allow for times where multiple protocols are used. | | | | | |
| 97 | eProtocols.01 | Protocols Used | Yes | Yes | Single-Select |
| 98 | eProtocols.02 | Protocol Age Category | Yes | Yes | Single-Select |
| eMedications Information | | | | | |
| - This group repeats to allow for times where multiple medications are given. | | | | | |
| 99 | eMedications.01 | Date/Time Medication Administered | Yes | Yes | Single-Select |
| 100 | eMedications.02 | Medication Administered Prior to this Units EMS Care' | Yes | Yes | Single-Select |
| 101 | eMedications.03 | Medication Given | Yes | Yes | Single-Select |
| 102 | eMedications.05 | Medication Dosage | Yes | Yes | Single-Select |
| 103 | eMedications.06 | Medication Dosage Units | Yes | Yes | Single-Select |
| 104 | eMedications.07 | Response to Medication | Yes | Yes | Single-Select |
| 105 | eMedications.08 | Medication Complication | Yes | Yes | Multi-Select |
| 106 | eMedications.10 | Role/Type of Person Administering Medication | Yes | Yes | Single-Select |
| eProcedures Information | | | | | |
| - This group repeats to allow for times where multiple procedures are performed. | | | | | |
| 107 | eProcedures.01 | Date/Time Procedure Performed | Yes | Yes | Single-Select |
| 108 | eProcedures.02 | Procedure Performed Prior to this Units EMS Care' | Yes | Yes | Single-Select |
| 109 | eProcedures.03 | Procedure | Yes | Yes | Single-Select |
| 110 | eProcedures.05 | Number of Procedure Attempts | Yes | Yes | Single-Select |
| 111 | eProcedures.06 | Procedure Successful | Yes | Yes | Single-Select |
| 112 | eProcedures.07 | Procedure Complication | Yes | Yes | Multi-Select |
| 113 | eProcedures.08 | Response to Procedure | Yes | Yes | Single-Select |
| 114 | eProcedures.10 | Role/Type of Person Performing the Procedure | Yes | Yes | Single-Select |
| eDisposition Information | | | | | |
| 115 | eDisposition.05 | Destination State | Yes | Yes | Single-Select |
| 116 | eDisposition.06 | Destination County | Yes | Yes | Single-Select |
| 117 | eDisposition.07 | Destination ZIP Code | Yes | Yes | Single-Select |
| 118 | eDisposition.12 | Incident/Patient Disposition | Yes | No | Single-Select |
| 119 | eDisposition.16 | EMS Transport Method | Yes | Yes | Single-Select |
| 120 | eDisposition.17 | Transport Mode from Scene | Yes | Yes | Single-Select |

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|-----------------------------|--|---|---------------------------|----------------------------|---|
| 121 | eDisposition.18 | Additional Transport Mode Descriptors | Yes | Yes | Multi-Select |
| 122 | eDisposition.19 | Condition of Patient at Destination | Yes | Yes | Single-Select |
| 123 | eDisposition.20 | Reason for Choosing Destination | Yes | Yes | Multi-Select |
| 124 | eDisposition.21 | Type of Destination | Yes | Yes | Single-Select |
| 125 | eDisposition.22 | Hospital In-Patient Destination | Yes | Yes | Single-Select |
| 126 | eDisposition.23 | Hospital Designation | Yes | Yes | Single-Select |
| 127 | eDisposition.24 | Destination Team Pre-Arrival Activation | Yes | Yes | Single-Select |
| 128 | eDisposition.25 | Date/Time of Destination Prearrival Activation | Yes | Yes | Single-Select |
| eOutcome Information | | | | | |
| 129 | eOutcome.01 | Emergency Department Disposition | Yes | Yes | Single-Select |
| 130 | eOutcome.02 | Hospital Disposition | Yes | Yes | Single-Select |
| eOther Information | | | | | |
| 131 | eOther.05 | Suspected EMS Work Related Exposure, Injury, or Death | Yes | Yes | Single-Select |