

NHTSA / NEMESIS Version 3 – Requisite National Elements - EMS DataSet -

The NHTSA / NEMESIS Version 3.5.0 National Subset of data elements for the EMS DataSet or Patient Care Report (ePCR/Event) submission is listed below. A total of 145 elements comprise the EMS Incident / Patient Care Report Dataset (EMSDataset) submission information. Three demographic (DEM DataSet) elements make up the header information specific to the EMS Agency. The actual ePCR/Event information consists of 142 elements.

	NHTSA / NEMESIS V3 Element Number	NHTSA / NEMESIS V3 Element Name	Obligatory in EMS XML File (ePCR/Event Record)	Nilable Value Allowed?	Single-Select or Multi-Select Element
				No = submit a “real” value. <i>Mandatory Elements.</i> Yes = NOT values and Nils. <i>Required Elements.</i>	
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

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

	NHTSA / NEMESIS V3 Element Number	NHTSA / NEMESIS V3 Element Name	Obligatory in EMS XML File	Nullable Value Allowed?	Single-Select or Multi-Select Element
42	eScene.08	Triage Classification for MCI Patient	Yes	Yes	Single-Select
43	eScene.09	Incident Location Type	Yes	Yes	Single-Select
44	eScene.18	Incident State	Yes	Yes	Single-Select
45	eScene.19	Incident ZIP Code	Yes	Yes	Single-Select
46	eScene.21	Incident County	Yes	Yes	Single-Select
eSituation Information					
47	eSituation.01	Date/Time of Symptom Onset	Yes	Yes	Single-Select
48	eSituation.02	Possible Injury	Yes	Yes	Single-Select
49	eSituation.07	Chief Complaint Anatomic Location	Yes	Yes	Single-Select
50	eSituation.08	Chief Complaint Organ System	Yes	Yes	Single-Select
51	eSituation.09	Primary Symptom	Yes	Yes	Single-Select
52	eSituation.10	Other Associated Symptoms	Yes	Yes	Multi-Select
53	eSituation.11	Provider's Primary Impression	Yes	Yes	Single-Select
54	eSituation.12	Provider's Secondary Impressions	Yes	Yes	Multi-Select
55	eSituation.13	Initial Patient Acuity	Yes	Yes	Single-Select
56	eSituation.18	Date/Time Last Known Well	Yes	Yes	Single-Select
57	eSituation.20	Reason for Interfacility Transfer/Medical Transport	Yes	Yes	Single-Select
eInjury Information					
58	eInjury.01	Cause of Injury	Yes	Yes	Multi-Select
59	eInjury.03	Trauma Triage Criteria (Steps 1 and 2)	Yes	Yes	Multi-Select
60	eInjury.04	Trauma Triage Criteria (Steps 3 and 4)	Yes	Yes	Multi-Select
eArrest Information					
61	eArrest.01	Cardiac Arrest	Yes	Yes	Single-Select
62	eArrest.02	Cardiac Arrest Etiology	Yes	Yes	Single-Select
63	eArrest.03	Resuscitation Attempted By EMS	Yes	Yes	Multi-Select
64	eArrest.04	Arrest Witnessed By	Yes	Yes	Multi-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.11	First Monitored Arrest Rhythm of the Patient	Yes	Yes	Single-Select
68	eArrest.12	Any Return of Spontaneous Circulation	Yes	Yes	Multi-Select

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69	eArrest.14	Date/Time of Cardiac Arrest	Yes	Yes	Single-Select
70	eArrest.16	Reason CPR/Resuscitation Discontinued	Yes	Yes	Single-Select
71	eArrest.17	Cardiac Rhythm on Arrival at Destination	Yes	Yes	Multi-Select
72	eArrest.18	End of EMS Cardiac Arrest Event	Yes	Yes	Single-Select
73	eArrest.20	Who First Initiated CPR	Yes	Yes	Single-Select
74	eArrest.21	Who First Applied the AED	Yes	Yes	Single-Select
75	eArrest.22	Who First Defibrillated the Patient	Yes	Yes	Single-Select
eHistory Information					
76	eHistory.01	Barriers to Patient Care	Yes	Yes	Multi-Select
77	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.					
78	eVitals.01	Date/Time Vital Signs Taken	Yes	Yes	Single-Select
79	eVitals.02	Obtained Prior to this Unit's EMS Care	Yes	Yes	Single-Select
80	eVitals.03	Cardiac Rhythm / Electrocardiography (ECG)	Yes	Yes	Multi-Select
81	eVitals.04	ECG Type	Yes	Yes	Single-Select
82	eVitals.05	Method of ECG Interpretation	Yes	Yes	Multi-Select
83	eVitals.06	SBP (Systolic Blood Pressure)	Yes	Yes	Single-Select
84	eVitals.10	Heart Rate	Yes	Yes	Single-Select
85	eVitals.12	Pulse Oximetry	Yes	Yes	Single-Select
86	eVitals.14	Respiratory Rate	Yes	Yes	Single-Select
87	eVitals.16	End Tidal Carbon Dioxide (ETCO2)	Yes	Yes	Single-Select
88	eVitals.18	Blood Glucose Level	Yes	Yes	Single-Select
89	eVitals.19	Glasgow Coma Score-Eye	Yes	Yes	Single-Select
90	eVitals.20	Glasgow Coma Score-Verbal	Yes	Yes	Single-Select
91	eVitals.21	Glasgow Coma Score-Motor	Yes	Yes	Single-Select
92	eVitals.22	Glasgow Coma Score-Qualifier	Yes	Yes	Multi-Select
93	eVitals.26	Level of Responsiveness (AVPU)	Yes	Yes	Single-Select
94	eVitals.27	Pain Scale Score	Yes	Yes	Single-Select
95	eVitals.29	Stroke Scale Score	Yes	Yes	Single-Select
96	eVitals.30	Stroke Scale Type	Yes	Yes	Single-Select
97	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.					
98	eProtocols.01	Protocols Used	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 Unit's EMS Care	Yes	Yes	Single-Select
101	eMedications.03	Medication Administered	Yes	Yes	Single-Select
102	eMedications.04	Medication Administered Route	Yes	Yes	Single-Select
103	eMedications.05	Medication Dosage	Yes	Yes	Single-Select
104	eMedications.06	Medication Dosage Units	Yes	Yes	Single-Select
105	eMedications.07	Response to Medication	Yes	Yes	Single-Select
106	eMedications.08	Medication Complication	Yes	Yes	Multi-Select
107	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.					
108	eProcedures.01	Date/Time Procedure Performed	Yes	Yes	Single-Select
109	eProcedures.02	Procedure Performed Prior to this Unit's EMS Care	Yes	Yes	Single-Select
110	eProcedures.03	Procedure	Yes	Yes	Single-Select
111	eProcedures.05	Number of Procedure Attempts	Yes	Yes	Single-Select
112	eProcedures.06	Procedure Successful	Yes	Yes	Single-Select
113	eProcedures.07	Procedure Complication	Yes	Yes	Multi-Select
114	eProcedures.08	Response to Procedure	Yes	Yes	Single-Select
115	eProcedures.10	Role/Type of Person Performing the Procedure	Yes	Yes	Single-Select
eDisposition Information					
116	eDisposition.05	Destination State	Yes	Yes	Single-Select
117	eDisposition.06	Destination County	Yes	Yes	Single-Select
118	eDisposition.07	Destination ZIP Code	Yes	Yes	Single-Select
119	eDisposition.27	Unit Disposition	Yes	No	Single-Select
120	eDisposition.28	Patient Evaluation/Care	Yes	Yes	Single-Select
121	eDisposition.29	Crew Disposition	Yes	Yes	Single-Select
122	eDisposition.30	Transport Disposition	Yes	Yes	Single-Select
123	eDisposition.16	EMS Transport Method	Yes	Yes	Single-Select

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124	eDisposition.17	Transport Mode from Scene	Yes	Yes	Single-Select
125	eDisposition.18	Additional Transport Mode Descriptors	Yes	Yes	Multi-Select
126	eDisposition.19	Final Patient Acuity	Yes	Yes	Single-Select
127	eDisposition.20	Reason for Choosing Destination	Yes	Yes	Multi-Select
128	eDisposition.21	Type of Destination	Yes	Yes	Single-Select
129	eDisposition.22	Hospital In-Patient Destination	Yes	Yes	Single-Select
130	eDisposition.23	Hospital Capability	Yes	Yes	Single-Select
131	eDisposition.24	Destination Team Pre-Arrival Alert or Activation	Yes	Yes	Single-Select
132	eDisposition.25	Date/Time of Destination Prearrival Alert or Activation	Yes	Yes	Single-Select
133	eDisposition.32	Level of Care Provided per Protocol	Yes	Yes	Single-Select
eOutcome Information					
134	eOutcome.01	Emergency Department Disposition	Yes	Yes	Single-Select
135	eOutcome.02	Hospital Disposition	Yes	Yes	Single-Select
eOutcome.EmergencyDepartmentProcedureGroup Information - This group repeats to allow for times where multiple procedures are performed.					
136	eOutcome.09	Emergency Department Procedures	Yes	Yes	Single-Select
137	eOutcome.19	Date/Time Emergency Department Procedure Performed	Yes	Yes	Single-Select
eOutcome.HospitalProcedureGroup Information - This group repeats to allow for times where multiple procedures are performed.					
138	eOutcome.12	Hospital Procedures	Yes	Yes	Single-Select
139	eOutcome.20	Date/Time Hospital Procedure Performed	Yes	Yes	Single-Select
140	eOutcome.13	Hospital Diagnosis	Yes	Yes	Multi-Select
141	eOutcome.16	Date/Time of Hospital Discharge	Yes	Yes	Single-Select
142	eOutcome.18	Date/Time of Emergency Department Admission	Yes	Yes	Single-Select