

## Harmonizing NEMESIS and CARES in v3.5.0

NEMESIS (National EMS Information System) and CARES (Cardiac Arrest Registry to Enhance Survival) have coordinated data standards for NEMESIS v3.5.0 so that data elements collected and submitted represent a more complete understanding of out-of-hospital cardiac arrest (OHCA).

By aligning NEMESIS mandatory and CARES required elements, redundant data collection and the need for custom fields has been dramatically reduced.

In collaboration, NEMESIS and CARES modified common elements to harmonize overlapping mission-critical data. This coordination in data standards strengthens documentation of out-of-hospital cardiac arrest events and the ability to utilize that information to ultimately improve patient outcomes.

## CHANGES REFLECTED IN v3.5.0

Change, Add, Remove	Element	Description
Change	eArrest.01	Modification to Code List Values: No and Yes, Prior To or After Any EMS Arrival (includes Transport EMS & Medical First Responders)
Change	eArrest.02	Modification to Code List Values: Exsanguination-Medical (Non-Traumatic)
Change	eArrest.04	Modification to Code List Values: Witnessed by Bystander
Add	eArrest.10	Therapeutic Hypothermia by EMS
Add	eArrest.20	Who First Initiated CPR
Remove	eArrest.05	Deprecate—replaced by eArrest.20
Remove	eArrest.06	Deprecate—replaced by eArrest.20
Add	eArrest.21	Who First Applied the AED
Add	eArrest.22	Who First Defibrillated the Patient
Remove	eArrest.08	Deprecate—replaced by eArrest.21 and eArrest.22
Add	eScene.24	First Other EMS or Public Safety Agency at Scene to Provide Patient Care

## HISTORY

Past efforts have resulted in a partial alignment of the NEMSIS and CARES standards. But key elements common to both standards remained misaligned, resulting in “double data entry” for EMS clinicians caring for cardiac arrest patients.



Industry support of NEMSIS-CARES harmonization includes the National Association of State EMS Officials (NASEMSO) and the National Highway Traffic Safety Administration (NHTSA) Office of EMS.

Key EMS stakeholders such as data managers, officials and clinicians were involved in the lengthy process.

## SUPPORT

## PROCESS

A NEMSIS-CARES Work Group was established to review multiple elements that would require modification in order to align NEMSIS and CARES data collection. Each system modified their respective elements with specific attention to reducing the data collection burden on EMS clinicians.



Harmonization of NEMSIS and CARES reduces data redundancy both in collection from the field and in reporting from states and territories. When data are easier to gather utilizing standardized definitions, the quality and quantity of actionable data are increased.

## IMPACT