eAirway.01

|  |
| --- |
| Kansas |
| eAirway.01 – Indications for Invasive Airway | |

**Definition**

The clinical indication for performing invasive airway management

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 4001001 | Adequate Airway Reflexes/Effort, Potential for Compromise | |
|  |  | |
| 4001003 | Airway Reflex Compromised | |
|  |  | |
| 4001005 | Apnea or Agonal Respirations | |
|  |  | |
| 4001007 | Illness Involving Airway | |
|  |  | |
| 4001009 | Injury Involving Airway | |
|  |  | |
| 4001011 | Other | |
|  |  | |
| 4001013 | Ventilatory Effort Compromised | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: Added to better document airway management.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Indications for Invasive Airway is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Indications for Invasive Airway has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Indications for Invasive Airway has a Not Value, no other value should be recorded. |
| Ks\_e001 | Warning | Indication for advanced airway required when Procedure identifies an advanced airway was placed |

eAirway.02

|  |
| --- |
| Kansas |
| eAirway.02 – Date/Time Airway Device Placement Confirmation | |

**Definition**

The date and time the airway device placement was confirmed.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

**Comments**

KEMSIS: Kansas only allows the NEMSIS NOT Values of “Not Applicable” for situation where the advanced airway placement was not successful.

NEMSIS: Added to better document airway management.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Airway Device Placement Confirmation is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time Airway Device Placement Confirmation has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| Ks\_e002 | Warning | Date/Time Airway Device Placement Confirmed required when Procedures identifies an advanced airway was placed and Suspected Reasons for Failed Airway Management is blank |

eAirway.03

|  |
| --- |
| Kansas |
| eAirway.03 – Airway Device Being Confirmed | |

**Definition**

The airway device in which placement is being confirmed.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 4003001 | Cricothyrotomy Tube |
|  |  |
| 4003003 | Endotracheal Tube |
|  |  |
| 4003005 | Other-Invasive Airway |
|  |  |
| 4003007 | SAD-Combitube |
|  |  |
| 4003009 | SAD-King |
|  |  |
| 4003011 | SAD-LMA |
|  |  |
| 4003013 | SAD-Other |
|  |  |
| 4003015 | Tracheostomy Tube |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to better document airway management.

NEMSIS: SAD means Supraglottic Airway Device.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Airway Device Being Confirmed is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Airway Device Being Confirmed has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| Ks\_e003 | Warning | Airway Device Being Confirmed required when Date/Time Airway Device Placement Confirmation is not blank |

eAirway.04

|  |
| --- |
| Kansas |
| eAirway.04 – Airway Device Placement Confirmed Method | |

**Definition**

The method used to confirm the airway device placement.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 4004001 | Auscultation |
|  |  |
| 4004003 | Bulb/Syringe Aspiration |
|  |  |
| 4004005 | Colorimetric ETCO2 |
|  |  |
| 4004007 | Condensation in Tube |
|  |  |
| 4004009 | Digital (Numeric) ETCO2 |
|  |  |
| 4004011 | Direct Re-Visualization of Tube in Place |
|  |  |
| 4004013 | Endotracheal Tube Whistle (BAAM, etc.) |
|  |  |
| 4004015 | Other |
|  |  |
| 4004017 | Visualization of Vocal Cords |
|  |  |
| 4004019 | Waveform ETCO2 |
|  |  |
| 4004021 | Chest Rise |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: If the invasive airway is confirmed via multiple methods each method should be documented individually by time, method, and type of individual.

NEMSIS: Added to better document airway management.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Airway Device Placement Confirmed Method is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Airway Device Placement Confirmed Method has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Airway Device Placement Confirmed Method has a Not Value, no other value should be recorded. |
| ks\_e004 | Warning | Airway Device Placement Confirmed Method required when Date/Time Airway Device Placement Confirmation is not blank |

eAirway.05

|  |
| --- |
| Kansas |
| eAirway.05 – Tube Depth | |

**Definition**

The measurement at the patient's teeth/lip of the tube depth in centimeters (cm) of the invasive airway placed.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | None | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Integer Min-Inclusive: 4 Max-Inclusive: 32

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Tube Depth added to better document the initial placement of the airway device and subsequent assessments.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e005 | Warning | Tube Depth required when Procedure identifies intubation and Date/Time Airway Device Placement Confirmation is not blank |

eAirway.06

|  |
| --- |
| Kansas |
| eAirway.06 – Type of Individual Confirming Airway Device Placement | |

**Definition**

The type of individual who confirmed the airway device placement.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 4006001 | Another Person on the Same Crew |
|  |  |
| 4006003 | Other |
|  |  |
| 4006005 | Person Performing Intubation |
|  |  |
| 4006007 | Receiving Air Medical/EMS Crew |
|  |  |
| 4006009 | Receiving Hospital Team |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element

NEMSIS: Added to better document airway management.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of Individual Confirming Airway Device Placement is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of Individual Confirming Airway Device Placement has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| Ks\_e006 | Warning | Type of Individual Confirming Airway Device Placement required when Date/Time Airway Device Placement Confirmation is not blank |

eAirway.07

|  |
| --- |
| Kansas |
| eAirway.07 – Crew Member ID | |

**Definition**

The statewide assigned ID number of the EMS crew member confirming the airway placement.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 50

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to better document airway management.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Crew Member ID is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Crew Member ID has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| Ks\_e007 | Warning | Crew Member ID of the person confirming airway device placement is required when Type of Individual Confirming Airway Device Placement identifies either another person on the same crew or the person performing the intubation |

eAirway.08

|  |
| --- |
| Kansas |
| eAirway.08 – Airway Complications Encountered | |

**Definition**

The airway management complications encountered during the patient care episode.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 4008001 | Adverse Event from Facilitating Drugs |
|  |  |
| 4008003 | Bradycardia (<50) |
|  |  |
| 4008005 | Cardiac Arrest |
|  |  |
| 4008007 | Esophageal Intubation-Delayed Detection (After Tube Secured) |
|  |  |
| 4008009 | Esophageal Intubation-Detected in Emergency Department |
|  |  |
| 4008011 | Failed Intubation Effort |
|  |  |
| 4008013 | Injury or Trauma to Patient from Airway Management Effort |
|  |  |
| 4008015 | Other |
|  |  |
| 4008017 | Oxygen Desaturation (<90%) |
|  |  |
| 4008019 | Patient Vomiting/Aspiration |
|  |  |
| 4008021 | Tube Dislodged During Transport/Patient Care |
|  |  |
| 4008023 | Tube Was Not in Correct Position when EMS Crew/Team Assumed Care of the Patient |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas only allows the NEMSIS NOT Values of “Not Applicable” for situations where the advanced airway placement did not encounter any complications.

NEMSIS: Added to better document airway management.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Airway Complications Encountered is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Airway Complications Encountered has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Airway Complications Encountered has a Not Value, no other value should be recorded. |
| Ks\_e008 | Warning | Airway Complications Encountered requires an answer or not applicable when Procedure identifies an advanced airway attempt occurred |

eAirway.09

|  |
| --- |
| Kansas |
| eAirway.09 – Suspected Reasons for Failed Airway Management | |

**Definition**

The reason(s) the airway was unable to be successfully managed.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 4009001 | Difficult Patient Airway Anatomy |
|  |  |
| 4009003 | ETI Attempted, but Arrived At Destination Facility Before Accomplished |
|  |  |
| 4009005 | Facial or Oral Trauma |
|  |  |
| 4009007 | Inability to Expose Vocal Cords |
|  |  |
| 4009009 | Inadequate Patient Relaxation/Presence of Protective Airway Reflexes |
|  |  |
| 4009011 | Jaw Clenched (Trismus) |
|  |  |
| 4009013 | Other |
|  |  |
| 4009015 | Poor Patient Access |
|  |  |
| 4009017 | Secretions/Blood/Vomit |
|  |  |
| 4009019 | Unable to Position or Access Patient |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

NEMSIS: Added to better document airway management.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| Ks\_e009 | Warning | Suspected Reasons for Failed Airway Management required when (eAirway.02) Date/Time Airway Device Placement Confirmation is equal to Not Applicable |

eArrest.01

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.01 – Cardiac Arrest | | |

**Definition**

Indication of the presence of cardiac arrest at any time during this event.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3001001 | No |
|  |  |
| 3001003 | Yes, Prior to Any EMS Arrival (includes Transport EMS & Medical First Responders) |
|  |  |
| 3001005 | Yes, After Any EMS Arrival (includes Transport EMS & Medical First Responders) |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow the NEMSIS NOT Values for this element.

NEMSIS: This element is a component of the Utstein Cardiac Arrest Criteria.

NEMSIS: If this EMS event is for an interfacility transfer of a patient with a recent history of a cardiac arrest with ROSC, and who does not experience another cardiac arrest during transport, then do not document Cardiac Arrest (eArrest.01) with "Yes, Prior to Any EMS Arrival (includes Transport EMS & Medical First Responders)".

NEMSIS: EMS is defined as Emergency Medical Services personnel and Medical First Responder personnel who respond to a medical emergency in an official capacity as part of an organized medical response team. By this definition, physicians, nurses, or paramedics who witness a cardiac arrest and initiate CPR, but are not part of the organized medical response team are characterized as bystanders and are not part of the EMS system.

NEMSIS: Medical First Responders are defined as personnel who are dispatched through the 911 system, respond in an official capacity, have the capability and/or training to provide emergency medical care, but are not the designated transporter of the patient. Thus, law enforcement officers who respond in an official capacity to a cardiac arrest, have the capability and/or training to provide emergency medical care (e.g., carry AEDs in their patrol vehicles, hold EMR licensure, are CPR certified, etc.) are considered Medical First Responders for the purposes of this data element.

NEMSIS: Responders dispatched through the 911 system with no capability of providing emergency medical care are not considered Medical First Responders. For example, towing and wrecking responding to a vehicle crash, or law enforcement officers who do not provide any emergency medical care would not be considered Medical First Responders.

NEMSIS: For States and Local agencies that participate in the Cardiac Arrest Registry for Enhanced Survival (CARES), “Any EMS Arrival” includes 911 Responders (First Responder or EMS) as defined by CARES in the CARES 2019 Data Dictionary: <https://mycares.net/sitepages/uploads/2019/Data%20Dictionary%20(2019).pdf>.

NEMSIS: This NEMSIS data element is used to answer CARES data element #20 Arrest After Arrival of 911 Responder.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Cardiac Arrest is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Cardiac Arrest has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e010 | Warning | Cardiac Arrest requires an answer when Unit Disposition identifies patient contact was made |
| ks\_e011 | Warning | Cardiac Arrest should be "Yes, Prior to EMS Arrival" when Who First Initiated CPR identifies it was NOT EMS. |

eArrest.02

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.02 – Cardiac Arrest Etiology | | |

**Definition**

Indication of the etiology or cause of the cardiac arrest (classified as cardiac, non-cardiac, etc.).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3002001 | Cardiac (Presumed) |
|  |  |
| 3002003 | Drowning/Submersion |
|  |  |
| 3002005 | Drug Overdose |
|  |  |
| 3002007 | Electrocution |
|  |  |
| 3002009 | Exsanguination-Medical (Non-Traumatic) |
|  |  |
| 3002011 | Other |
|  |  |
| 3002013 | Respiratory/Asphyxia |
|  |  |
| 3002015 | Traumatic Cause |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow the NEMSIS NOT Values for this element.

NEMSIS: This element is a component of the Utstein Cardiac Arrest Criteria.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Cardiac Arrest Etiology is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Cardiac Arrest Etiology has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e093 | Warning | Cardiac Arrest Etiology should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...". |
| nemSch\_e094 | Warning | Cardiac Arrest Etiology should only be recorded when Cardiac Arrest is "Yes...". |

eArrest.03

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.03 – Resuscitation Attempted By EMS | | |

**Definition**

Indication of an attempt to resuscitate the patient who is in cardiac arrest (attempted, not attempted due to DNR, etc.).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Descripion** |
| 3003001 | Attempted Defibrillation |
|  |  |
| 3003003 | Attempted Ventilation |
|  |  |
| 3003005 | Initiated Chest Compressions |
|  |  |
| 3003007 | Not Attempted-Considered Futile |
|  |  |
| 3003009 | Not Attempted-DNR Orders |
|  |  |
| 3003011 | Not Attempted-Signs of Circulation |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This element is a component of the Utstein Cardiac Arrest Criteria.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Resuscitation Attempted By EMS is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Resuscitation Attempted By EMS has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Resuscitation Attempted By EMS has a Not Value, no other value should be recorded. |
| nemSch\_e095 | Warning | Resuscitation Attempted By EMS should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...". |
| nemSch\_e096 | Warning | Resuscitation Attempted By EMS should only be recorded when Cardiac Arrest is "Yes...". |
| nemSch\_e097 | Warning | Resuscitation Attempted By EMS should not contain both "Attempted/Initiated..." and "Not Attempted...". |
| nemSch\_e098 | Warning | Resuscitation Attempted By EMS should contain "Initiated Chest Compressions" when Type of CPR Provided contains "Compressions...". |
| nemSch\_e099 | Warning | Resuscitation Attempted By EMS should contain "Attempted Ventilation" when Type of CPR Provided contains "Ventilation..." or "Compressions-Intermittent with Ventilation". |

eArrest.04

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.04 – Arrest Witnessed By | | |

**Definition**

Indication of who the arrest was witnessed by.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3004001 | Not Witnessed |
|  |  |
| 3004003 | Witnessed by Family Member |
|  |  |
| 3004005 | Witnessed by Healthcare Provider |
|  |  |
| 3004007 | Witnessed by Bystander |
|  |  |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Arrest Witnessed By is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Arrest Witnessed By has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Arrest Witnessed By has a Not Value, no other value should be recorded. |
| nemSch\_e100 | Warning | Arrest Witnessed By should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...". |
| nemSch\_e101 | Warning | Arrest Witnessed By should only be recorded when Cardiac Arrest is "Yes...". |
| nemSch\_e102 | Warning | When Arrest Witnessed By is "Not Witnessed", no other value should be recorded. |

eArrest.07

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.07 – AED Use Prior to EMS Arrival | | |

**Definition**

Documentation of AED use Prior to EMS Arrival.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3007001 | No |
|  |  |
| 3007003 | Yes, Applied without Defibrillation |
|  |  |
| 3007005 | Yes, With Defibrillation |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This element is a component of the Utstein Cardiac Arrest Criteria

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When AED Use Prior to EMS Arrival is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When AED Use Prior to EMS Arrival has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e103 | Warning | AED Use Prior to EMS Arrival should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...". |
| nemSch\_e104 | Warning | AED Use Prior to EMS Arrival should only be recorded when Cardiac Arrest is "Yes...". |

eArrest.09

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.09 – Type of CPR Provided | | |

**Definition**

Documentation of the type/technique of CPR used by EMS.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3009001 | Compressions-Manual |
|  |  |
| 3009003 | Compressions-External Band Type Device |
|  |  |
| 3009005 | Compressions-External Plunger Type Device |
|  |  |
| 3009007 | Compressions-External Thumper Type Device |
|  |  |
| 3009009 | Compressions-Intermittent with Ventilation |
|  |  |
| 3009011 | Compressions-Other Device |
|  |  |
| 3009021 | Compressions-Hands Only CPR |
|  |  |
| 3009013 | Ventilation-Bag Valve Mask |
|  |  |
| 3009015 | Ventilation-Impedance Threshold Device |
|  |  |
| 3009017 | Ventilation-Mouth to Mouth |
|  |  |
| 3009019 | Ventilation-Pocket Mask |
|  |  |
| 3009023 | Ventilation-with OPA/NPA |
|  |  |
| 3009025 | Ventilation-Advanced Airway Device |
|  |  |
| 3009027 | Ventilation-Passive Ventilation with Oxygen |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to capture special CPR techniques

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of CPR Provided is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of CPR Provided has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Type of CPR Provided has a Not Value, no other value should be recorded. |
| nemSch\_e105 | Warning | Type of CPR Provided should only be recorded when Cardiac Arrest is "Yes...". |
| nemSch\_e106 | Warning | Type of CPR Provided should contain "Compressions..." when Resuscitation Attempted By EMS contains "Initiated Chest Compressions". |
| nemSch\_e107 | Warning | Type of CPR Provided should contain "Ventilation..." or "Compressions-Intermittent with Ventilation" when Resuscitation Attempted By EMS contains "Attempted Ventilation". |

eArrest.11

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.11 – First Monitored Arrest Rhythm of the Patient | | |

**Definition**

Documentation of what the first monitored arrest rhythm which was noted.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3011001 | Asystole |
|  |  |
| 3011005 | PEA |
|  |  |
| 3011007 | Unknown AED Non-Shockable Rhythm |
|  |  |
| 3011009 | Unknown AED Shockable Rhythm |
|  |  |
| 3011011 | Ventricular Fibrillation |
|  |  |
| 3011013 | Ventricular Tachycardia-Pulseless |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added term "Arrest" to title to clarify this is the arrest rhythm.

NEMSIS: Values "Other" and "Normal Sinus Rhythm" removed since they are not Cardiac Arrest Rhythms.

NEMSIS: Value "Ventricular Tachycardia" has been changed to "Ventricular Tachycardia-Pulseless".

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When First Monitored Arrest Rhythm of the Patient is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When First Monitored Arrest Rhythm of the Patient has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e012 | Warning | First Monitored Arrest Rhythm required when Resuscitation Attempted by EMS identifies resuscitation was attempted. |

eArrest.12

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.12 – Any Return of Spontaneous Circulation | | |

**Definition**

Indication whether or not there was any return of spontaneous circulation.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3012001 | No |
|  |  |
| 3012003 | Yes, At Arrival at the ED |
|  |  |
| 3012005 | Yes, Prior to Arrival at the ED |
|  |  |
| 3012007 | Yes, Sustained for 20 consecutive minutes |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This element needs to be documented when the patient has been in cardiac arrest and transported to a healthcare facility to show the change in patient condition, if any.

NEMSIS: Any ROSC is defined as any brief (approximately >30 seconds) restoration of spontaneous circulation that provides evidence of more than an occasional gasp, occasional fleeting palpable pulse, or arterial waveform.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Any Return of Spontaneous Circulation is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Any Return of Spontaneous Circulation has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Any Return of Spontaneous Circulation has a Not Value, no other value should be recorded. |
| nemSch\_e108 | Warning | Any Return of Spontaneous Circulation should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...". |
| nemSch\_e109 | Warning | Any Return of Spontaneous Circulation should only be recorded when Cardiac Arrest is "Yes...". |
| nemSch\_e110 | Warning | When Any Return of Spontaneous Circulation is "No", no other value should be recorded. |

eArrest.14

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.14 – Date/Time of Cardiac Arrest | | |

**Definition**

The date/time of the cardiac arrest (if not known, please estimate).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

NEMSIS: Changed from estimated time prior to EMS arrival to date/time of cardiac arrest.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time of Cardiac Arrest is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time of Cardiac Arrest has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e111 | Warning | Date/Time of Cardiac Arrest should only be recorded when Cardiac Arrest is "Yes...". |
| ks\_e013 | Warning | Date/Time of Cardiac Arrest required when Cardiac Arrest equals "Yes, After EMS Arrival" |
| ks\_e014 | Warning | Date/Time of Cardiac Arrest should be after Unit Arrived on Scene Date/Time when Cardiac Arrest equals "Yes, After EMS Arrival" |
| ks\_e015 | Warning | Date/Time of Cardiac Arrest should be before Unit Arrived on Scene Date/Time when (eArrest.01) Cardiac Arrest equals "Yes, Prior to EMS Arrival" |

eArrest.15

|  |
| --- |
| Kansas |
| eArrest.15 – Date/Time Resuscitation Discontinued | |

**Definition**

The date/time resuscitation was discontinued.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Resuscitation Discontinued is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time Resuscitation Discontinued has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e016 | Warning | Date/Time Resuscitation Discontinued required when (eArrest.16) Reason CPR/Resuscitation Discontinued is not blank. |

eArrest.16

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.16 – Reason CPR/Resuscitation Discontinued | | |

**Definition**

The reason that CPR or the resuscitation efforts were discontinued.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3016001 | DNR |
|  |  |
| 3016003 | Medical Control Order |
|  |  |
| 3016005 | Obvious Signs of Death |
|  |  |
| 3016007 | Physically Unable to Perform |
|  |  |
| 3016009 | Protocol/Policy Requirements Completed |
|  |  |
| 3016011 | Return of Spontaneous Circulation (pulse or BP noted) |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added Resuscitation to the Title to allow better documentation of disposition

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Reason CPR/Resuscitation Discontinued is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Reason CPR/Resuscitation Discontinued has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e112 | Warning | Reason CPR/Resuscitation Discontinued should only be recorded when Cardiac Arrest is “Yes…”. |
| ks\_e017 | Warning | Reason CPR/Resuscitation Discontinued required when Cardiac Arrest equals "Yes" and Patient Evaluation/Care equals "Patient evaluated and care provided" and Transport Disposition equals "No Transport" |

eArrest.17

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.17 – Cardiac Rhythm on Arrival at Destination | | |

**Definition**

The patient's cardiac rhythm upon delivery or transfer to the destination.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 9901001 | Agonal/Idioventricular |
|  |  |
| 9901003 | Asystole |
|  |  |
| 9901005 | Artifact |
|  |  |
| 9901007 | Atrial Fibrillation |
|  |  |
| 9901009 | Atrial Flutter |
|  |  |
| 9901011 | AV Block-1st Degree |
|  |  |
| 9901013 | AV Block-2nd Degree-Type 1 |
|  |  |
| 9901015 | AV Block-2nd Degree-Type 2 |
|  |  |
| 9901017 | AV Block-3rd Degree |
|  |  |
| 9901019 | Junctional |
|  |  |
| 9901021 | Left Bundle Branch Block |
|  |  |
| 9901023 | Non-STEMI Anterior Ischemia |
|  |  |
| 9901025 | Non-STEMI Inferior Ischemia |
|  |  |
| 9901027 | Non-STEMI Lateral Ischemia |
|  |  |
| 9901029 | Non-STEMI Posterior Ischemia |
|  |  |
| 9901030 | Non-STEMI Septal Ischemia |
|  |  |
| 9901031 | Other |
|  |  |
| 9901033 | Paced Rhythm |
|  |  |
| 9901035 | PEA |
|  |  |
| 9901037 | Premature Atrial Contractions |
|  |  |
| 9901039 | Premature Ventricular Contractions |
|  |  |
| 9901041 | Right Bundle Branch Block |
|  |  |
| 9901043 | Sinus Arrhythmia |
|  |  |
| 9901045 | Sinus Bradycardia |
|  |  |
| 9901047 | Sinus Rhythm |
|  |  |
| 9901049 | Sinus Tachycardia |
|  |  |
| 9901051 | STEMI Anterior Ischemia |
|  |  |
| 9901053 | STEMI Inferior Ischemia |
|  |  |
| 9901055 | STEMI Lateral Ischemia |
|  |  |
| 9901057 | STEMI Posterior Ischemia |
|  |  |
| 9901058 | STEMI Septal Ischemia |
|  |  |
| 9901059 | Supraventricular Tachycardia |
|  |  |
| 9901061 | Torsades De Points |
|  |  |
| 9901063 | Unknown AED Non-Shockable Rhythm |
|  |  |
| 9901065 | Unknown AED Shockable Rhythm |
|  |  |
| 9901067 | Ventricular Fibrillation |
|  |  |
| 9901069 | Ventricular Tachycardia (With Pulse) |
|  |  |
| 9901071 | Ventricular Tachycardia (Pulseless) |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added Resuscitation to the Title to allow better documentation of disposition

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Cardiac Rhythm on Arrival at Destination is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Cardiac Rhythm on Arrival at Destination has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Cardiac Rhythm on Arrival at Destination has a Not Value, no other value should be recorded. |
| nemSch\_e113 | Warning | Cardiac Rhythm on Arrival at Destination should be recorded when Transport Disposition is "Transport by This EMS Unit..." and Cardiac Arrest is "Yes...". |
| nemSch\_e114 | Warning | Cardiac Rhythm on Arrival at Destination should only be recorded when Cardiac Arrest is "Yes...". |

eArrest.18

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.18 – End of EMS Cardiac Arrest Event | | |

**Definition**

The patient's outcome at the end of the EMS event.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3018001 | Expired in ED |
|  |  |
| 3018003 | Expired in the Field |
|  |  |
| 3018005 | Ongoing Resuscitation in ED |
|  |  |
| 3018007 | ROSC in the Field |
|  |  |
| 3018009 | ROSC in the ED |
|  |  |
| 3018011 | Ongoing Resuscitation by Other EMS |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to better identify the outcome of EMS cardiac arrest patients.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When End of EMS Cardiac Arrest Event is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When End of EMS Cardiac Arrest Event has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e115 | Warning | End of EMS Cardiac Arrest Event should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...". |
| nemSch\_e116 | Warning | End of EMS Cardiac Arrest Event should only be recorded when Cardiac Arrest is "Yes...". |

eArrest.20

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.20 – Who First Initiated CPR | | |

**Definition**

Who first initiated CPR for this EMS event.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |
| --- |
|  |
| **Code** | **Description** |
| 3020001 | Bystander |
|  |  |
| 3020003 | Family Member |
|  |  |
| 3020005 | Healthcare Provider (non-911 Responder) |
|  |  |
| 3020007 | First Responder (EMS) |
|  |  |
| 3020009 | First Responder (Law Enforcement) |
|  |  |
| 3020011 | First Responder (non-EMS Fire) |
|  |  |
| 3020013 | EMS Responder (transport EMS) |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Bystanders are defined as persons who are not responding as part of an organized emergency response system to a cardiac arrest. Physicians, nurses, and paramedics may be described as performing bystander CPR if they are not part of the emergency response system involved in the victim's resuscitation. Friends and acquaintances are considered bystanders.

NEMSIS: Family members are defined as the patient's relatives.

NEMSIS: Healthcare Provider (non-911 Responder) includes physicians, nurses, paramedics, and other types of healthcare professionals who are not part of the organized emergency response system.

NEMSIS: First Responders are defined as personnel who are dispatched through the 911 system, respond as part of an organized emergency response system, and have the capability and/or training to provide emergency medical care, but are not the designated transporters of the patient.

NEMSIS: First Responder (EMS) is defined as EMS personnel who are part of an EMS response agency, respond as part of an organized emergency response system, but are not the designated transporter of the patient. For example, First Responder (EMS) includes EMS personnel who arrive by quick response EMS units, fire apparatus that is part of an EMS response agency, and supervisor/administrative vehicles operated by the transport EMS agency.

NEMSIS: First Responder (Law Enforcement) is defined as public safety officers who are not part of an EMS response agency and act in an organized, official capacity to enforce the law.

NEMSIS: First Responder (non-EMS Fire) is defined as fire department personnel who are not part of an EMS response agency and are not the designated transporter of the patient.

NEMSIS: EMS Responder (transport) is defined as EMS personnel who are the designated transporter of the patient.

NEMSIS: For states and local agencies that participate in the Cardiac Arrest Registry for Enhanced Survival (CARES), eArrest.20 is the equivalent of CARES data element #23 Who Initiated CPR as defined by CARES in the CARES 2019 Data Dictionary: <https://mycares.net/sitepages/uploads/2019/Data%20Dictionary%20(2019).pdf>.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Who First Initiated CPR is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Who First Initiated CPR has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e117 | Warning | Who First Initiated CPR should be recorded when Resuscitation Attempted By EMS is "Attempted..." or "Initiated...". |
| nemSch\_e118 | Warning | Who First Initiated CPR should only be recorded when Cardiac Arrest is "Yes...". |

eArrest.21

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.21 – Who First Applied the AED | | |

**Definition**

Documentation of who first applied the AED for this EMS event.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3021001 | Bystander |
|  |  |
| 3021003 | Family Member |
|  |  |
| 3021005 | Healthcare Provider (non-911 Responder) |
|  |  |
| 3021007 | First Responder (EMS) |
|  |  |
| 3021009 | First Responder (Law Enforcement) |
|  |  |
| 3021011 | First Responder (non-EMS Fire) |
|  |  |
| 3021013 | EMS Responder (transport EMS) |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Bystanders are defined as persons who are not responding as part of an organized emergency response system to a cardiac arrest. Physicians, nurses, and paramedics may be described as performing bystander CPR if they are not part of the emergency response system involved in the victim's resuscitation. Friends and acquaintances are considered bystanders.

NEMSIS: Family members are defined as the patient's relatives.

NEMSIS: Healthcare Provider (non-911 Responder) includes physicians, nurses, paramedics, and other types of healthcare professionals who are not part of the organized emergency response system.

NEMSIS: First Responders are defined as personnel who are dispatched through the 911 system, respond as part of an organized emergency response system, and have the capability and/or training to provide emergency medical care, but are not the designated transporters of the patient.

NEMSIS: First Responder (EMS) is defined as EMS personnel who are part of an EMS response agency, respond as part of an organized emergency response system, but are not the designated transporter of the patient. For example, First Responder (EMS) includes EMS personnel who arrive by quick response EMS units, fire apparatus that is part of an EMS response agency, and supervisor/administrative vehicles operated by the transport EMS agency.

NEMSIS: First Responder (Law Enforcement) is defined as public safety officers who are not part of an EMS response agency and act in an organized, official capacity to enforce the law.

NEMSIS: First Responder (non-EMS Fire) is defined as fire department personnel who are not part of an EMS response agency and are not the designated transporter of the patient.

NEMSIS: EMS Responder (transport) is defined as EMS personnel who are the designated transporter of the patient.

NEMSIS: For states and local agencies that participate in the Cardiac Arrest Registry for Enhanced Survival (CARES), eArrest.20 is the equivalent of CARES data element #23 Who Initiated CPR as defined by CARES in the CARES 2019 Data Dictionary: <https://mycares.net/sitepages/uploads/2019/Data%20Dictionary%20(2019).pdf>.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Who First Applied the AED is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Who First Applied the AED has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e119 | Warning | Who First Applied the AED should be recorded when AED Use Prior to EMS Arrival is "Yes...". |
| nemSch\_e120 | Warning | Who First Applied the AED should only be recorded when Cardiac Arrest is "Yes...". |

eArrest.22

|  |  |
| --- | --- |
| Kansas | National |
| eArrest.22 – Who First Defibrillated the Patient | | |

**Definition**

Documentation of who first defibrillated the patient.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 3022001 | Bystander |
|  |  |
| 3022003 | Family Member |
|  |  |
| 3022005 | Healthcare Provider (non-911 Responder) |
|  |  |
| 3022007 | First Responder (EMS) |
|  |  |
| 3022009 | First Responder (Law Enforcement) |
|  |  |
| 3022011 | First Responder (non-EMS Fire) |
|  |  |
| 3022013 | EMS Responder (transport EMS) |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Bystanders are defined as persons who are not responding as part of an organized emergency response system to a cardiac arrest. Physicians, nurses, and paramedics may be described as performing bystander CPR if they are not part of the emergency response system involved in the victim's resuscitation. Friends and acquaintances are considered bystanders.

NEMSIS: Family members are defined as the patient's relatives.

NEMSIS: Healthcare Provider (non-911 Responder) includes physicians, nurses, paramedics, and other types of healthcare professionals who are not part of the organized emergency response system.

NEMSIS: First Responders are defined as personnel who are dispatched through the 911 system, respond as part of an organized emergency response system, and have the capability and/or training to provide emergency medical care, but are not the designated transporters of the patient.

NEMSIS: First Responder (EMS) is defined as EMS personnel who are part of an EMS response agency, respond as part of an organized emergency response system, but are not the designated transporter of the patient. For example, First Responder (EMS) includes EMS personnel who arrive by quick response EMS units, fire apparatus that is part of an EMS response agency, and supervisor/administrative vehicles operated by the transport EMS agency.

NEMSIS: First Responder (Law Enforcement) is defined as public safety officers who are not part of an EMS response agency and act in an organized, official capacity to enforce the law.

NEMSIS: First Responder (non-EMS Fire) is defined as fire department personnel who are not part of an EMS response agency and are not the designated transporter of the patient.

NEMSIS: EMS Responder (transport) is defined as EMS personnel who are the designated transporter of the patient.

NEMSIS: For states and local agencies that participate in the Cardiac Arrest Registry for Enhanced Survival (CARES), eArrest.20 is the equivalent of CARES data element #23 Who Initiated CPR as defined by CARES in the CARES 2019 Data Dictionary: <https://mycares.net/sitepages/uploads/2019/Data%20Dictionary%20(2019).pdf>.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Who First Defibrillated the Patient is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Who First Defibrillated the Patient has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e122 | Warning | Who First Defibrillated the Patient should be recorded when AED Use Prior to EMS Arrival is "Yes, With Defibrillation". |
| nemSch\_e123 | Warning | Who First Defibrillated the Patient should only be recorded when Cardiac Arrest is "Yes...". |

eCrew.01

|  |
| --- |
| Kansas |
| eCrew.01 – Crew Member ID | |

**Definition**

The state certification/licensure ID number assigned to the crew member.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 50

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: Document the state certification/licensure ID for the state where the event occurred.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Crew Member ID is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Crew Member ID has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e018 | Error | Must have at least one crew member on all records. |
| ks\_e019 | Error | Crew Member ID is Mandatory for all EMS records. |

eCrew.02

|  |
| --- |
| Kansas |
| eCrew.02 – Crew Member Level | |

**Definition**

The functioning level of the crew member ID during this EMS patient encounter

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |
| --- | --- |
| Code | Description |
| 9925001 | 2009 Advanced Emergency Medical Technician (AEMT) | |
|  |  | |
| 9925003 | 2009 Emergency Medical Responder (EMR) | |
|  |  | |
| 9925005 | 2009 Emergency Medical Technician (EMT) | |
|  |  | |
| 9925007 | 2009 Paramedic | |
|  |  | |
| 9925013 | First Responder | |
|  |  | |
| 9925015 | EMT-Basic | |
|  |  | |
| 9925017 | EMT-Intermediate | |
|  |  | |
| 9925019 | EMT-Paramedic | |
|  |  | |
| 9925023 | Other Healthcare Professional | |
|  |  | |
| 9925025 | Other Non-Healthcare Professional | |
|  |  | |
| 9925027 | Physician | |
|  |  | |
| 9925029 | Respiratory Therapist | |
|  |  | |
| 9925031 | Student | |
|  |  | |
| 9925033 | Critical Care Paramedic | |
|  |  | |
| 9925035 | Community Paramedicine | |
|  |  | |
| 9925037 | Nurse Practitioner | |
|  |  | |
| 9925039 | Physician Assistant | |
|  |  | |
| 9925041 | Licensed Practical Nurse (LPN) | |
|  |  | |
| 9925043 | Registered Nurse | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Crew Member Level is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Crew Member Level has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e020 | Error | Crew Member Level is Mandatory when Crew Member ID is not blank. |

eCrew.03

|  |
| --- |
| Kansas |
| eCrew.03 – Crew Member Response Role | |

**Definition**

The role(s) of the crew member during response, at scene treatment, and/or transport.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 2403001 | Driver/Pilot-Response | |
|  |  | |
| 2403003 | Driver/Pilot-Transport | |
|  |  | |
| 2403005 | Other | |
|  |  | |
| 2403007 | Other Patient Caregiver-At Scene | |
|  |  | |
| 2403009 | Other Patient Caregiver-Transport | |
|  |  | |
| 2403011 | Primary Patient Caregiver-At Scene | |
|  |  | |
| 2403013 | Primary Patient Caregiver-Transport | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 0 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: There must be a driver for response and transport.

NEMSIS: There must be a primary patient caregiver for scene and transport.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Crew Member Response Role is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Crew Member Response Role has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Crew Member Response Role has a Not Value, no other value should be recorded. |
| ks\_e021 | Error | Crew Member Response Role is Mandatory when Crew Member ID is not blank. |
| ks\_e022 | Warning | Must have at least one Driver/Pilot during response |
| ks\_e023 | Warning | Must have one primary caregiver-at scene when Unit Disposition identifies patient contact was made. |
| ks\_e024 | Warning | Must have one primary caregiver-during transport when (edisposition.28) Patient Evaluation/Care, Crew Disposition, and Transport Disposition identifies a patient was evaluated and transported. |

eDispatch.01

|  |  |
| --- | --- |
| Kansas | National |
| eDispatch.01 – Dispatch Reason | | |

**Definition**

The dispatch reason reported to the responding unit.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  | | --- | --- | --- | |  | **Code** | **Description** | |  |  |  | |  | 2301001 | Abdominal Pain/Problems | |  |  |  | |  | 2301003 | Allergic Reaction/Stings | |  |  |  | |  | 2301005 | Animal Bite | |  |  |  | |  | 2301007 | Assault | |  |  |  | |  | 2301009 | Automated Crash Notification | |  |  |  | |  | 2301011 | Back Pain (Non-Traumatic) | |  |  |  | |  | 2301013 | Breathing Problem | |  |  |  | |  | 2301015 | Burns/Explosion | |  |  |  | |  | 2301017 | Carbon Monoxide/Hazmat/Inhalation/CBRN | |  |  |  | |  | 2301019 | Cardiac Arrest/Death | |  |  |  | |  | 2301021 | Chest Pain (Non-Traumatic) | |  |  |  | |  | 2301023 | Choking | |  |  |  | |  | 2301025 | Convulsions/Seizure | |  |  |  | |  | 2301027 | Diabetic Problem | |  |  |  | |  | 2301029 | Electrocution/Lightning | |  |  |  | |  | 2301031 | Eye Problem/Injury | |  |  |  | |  | 2301033 | Falls | |  |  |  | |  | 2301035 | Fire | |  |  |  | |  | 2301037 | Headache | |  |  |  | |  | 2301039 | Healthcare Professional/Admission | |  |  |  | |  | 2301041 | Heart Problems/AICD | |  |  |  | |  | 2301043 | Heat/Cold Exposure | |  |  |  | |  | 2301045 | Hemorrhage/Laceration | |  |  |  | |  | 2301047 | Industrial Accident/Inaccessible Incident/Other Entrapments (Non-Vehicle) | |  |  |  | |  | 2301049 | Medical Alarm | |  |  |  | |  | 2301051 | No Other Appropriate Choice | |  |  |  | |  | 2301053 | Overdose/Poisoning/Ingestion | |  |  |  | |  | 2301055 | Pandemic/Epidemic/Outbreak | |  |  |  | |  | 2301057 | Pregnancy/Childbirth/Miscarriage | |  |  |  | |  | 2301059 | Psychiatric Problem/Abnormal Behavior/Suicide Attempt | |  |  |  | |  | 2301061 | Sick Person | |  |  |  | |  | 2301063 | Stab/Gunshot Wound/Penetrating Trauma | |  |  |  | |  | 2301065 | Standby | |  |  |  | |  | 2301067 | Stroke/CVA | |  |  |  | |  | 2301069 | Traffic/Transportation Incident | |  |  |  | |  | 2301071 | Transfer/Interfacility/Palliative Care | |  |  |  | |  | 2301073 | Traumatic Injury | |  |  |  | |  | 2301075 | Well Person Check | |  |  |  | |  | 2301077 | Unconscious/Fainting/Near-Fainting | |  |  |  | |  | 2301079 | Unknown Problem/Person Down | |  |  |  | |  | 2301081 | Drowning/Diving/SCUBA Accident | |  |  |  | |  | 2301083 | Airmedical Transport | |  |  |  | |  | 2301085 | Altered Mental Status | |  |  |  | |  | 2301087 | Intercept | |  |  |  | |  | 2301089 | Nausea | |  |  |  | |  | 2301091 | Vomiting | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

NEMSIS: Added Pandemic/Epidemic/Outbreak

NEMSIS: Added Automated Crash Notification

NEMSIS: Added Healthcare Professional Admission

NEMSIS: Transfer/Interfacility/Palliative Care

NEMSIS: Other entries expanded based no current national EMD Dispatch List

**Validation Rules**

NEMSIS Mandatory Element

eDispatch.02

|  |  |
| --- | --- |
| Kansas | National |
| eDispatch.02 – EMD Performed | | |

**Definition**

Indication of whether Emergency Medical Dispatch was performed for this EMS event.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 2302001 | No |
|  |  |
| 2302003 | Yes, With Pre-Arrival Instructions |
|  |  |
| 2302005 | Yes, Without Pre-Arrival Instructions |
|  |  |
| 2302007 | Yes, Unknown if Pre-Arrival Instructions Given |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When EMD Performed is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When EMD Performed has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e025 | Error | mandatory on all emergency responses in your agency's primary area. |

eDisposition.01

|  |
| --- |
| Kansas |
| eDisposition.01 – Destination/Transferred To, Name | |

**Definition**

The destination the patient was delivered or transferred to.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 100

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: Recommended State data element since no national code for destination. May be populated from the list in dFacility.02 (Facility Name).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Destination/Transferred To, Name is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Destination/Transferred To, Name has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e026 | Warning | Destination/Transferred to Name required when Type of Destination identifies a medical facility. |

eDisposition.02

|  |
| --- |
| Kansas |
| eDisposition.02 – Destination/Transferred To, Code | |

**Definition**

The code of the destination the patient was delivered or transferred to.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 50

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: May be populated from list in dFacility.03 (Facility Location Code) or dFacility.05 (Facility National Provider Identifier) if a health care facility.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Destination/Transferred To, Code is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Destination/Transferred To, Code has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e027 | Warning | Destination/Transferred To, Code required when Destination/Transferred To, Name is not blank. |

eDisposition.03

|  |
| --- |
| Kansas |
| eDisposition.03 – Destination Street Address | |

**Definition**

The street address of the destination the patient was delivered or transferred to.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 255

**Comments**

NEMSIS: May be auto-populated if list created in dFacility.07 (Facility Street Address).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e028 | Warning | Destination Street Address required when Transport Disposition identifies a transport. |

eDisposition.04

|  |
| --- |
| Kansas |
| eDisposition.04 – Destination City | |

**Definition**

The city of the destination the patient was delivered or transferred to (physical address).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 255

**Comments**

NEMSIS: City codes are based on GNIS Feature Class. The primary Feature Class to use is "Civil" with "Populated Place" and "Military" code as additional options.

NEMSIS: Definitions for each GNIS City Feature Class can be found on the GNIS Codes website.

NEMSIS: GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e029 | Warning | Destination City required when Transport Disposition identifies a transport occurred. |

eDisposition.05

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.05 – Destination State | | |

**Definition**

The state of the destination the patient was delivered or transferred to (physical address).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern: [0-9]{2}

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: Based on the ANSI Code. May be auto-populated if list created in dFacility.09 (Facility State).

NEMSIS: GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Destination State is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Destination State has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e160 | Warning | Destination State should be recorded when Transport Disposition is "Transport by This EMS Unit...". |

eDisposition.06

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.06 – Destination County | | |

**Definition**

The destination county in which the patient was delivered or transferred to.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern: [0-9]{5}

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: May be auto-populated if list created in dFacility.11 (Facility County).

NEMSIS: Based on the ANSI Code Single Choice based on the County Name but stored as the ANSI code (combined 5 digit State and County codes) Should be required if there is a patient associated with the event.

NEMSIS: GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Destination County is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Destination County has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e161 | Warning | Destination County should be recorded when Transport Disposition is "Transport by This EMS Unit...". |
| nemSch\_e162 | Warning | Destination County should belong within the Destination State. |

eDisposition.07

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.07 – Destination ZIP Code | | |

**Definition**

The destination ZIP code in which the patient was delivered or transferred to.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern: [0-9]{5}|[0-9]{5}-[0-9]{4}|[0-9]{5}-[0-9]{5}|[A-Z][0-9][A-Z] [0-9][A-Z][0-9]

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: May be auto-populated if list created in dFacility.10 (Facility ZIP Code).

NEMSIS: ZIP Codes Product Website: <https://www.zipcodedownload.com/Products/Product/Z5Commercial/Standard/Overview/>  
Product: USA - 5-digit ZIP Code Database, Commercial Edition

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Destination ZIP Code is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Destination ZIP Code has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e163 | Warning | Destination ZIP Code should be recorded when Transport Disposition is "Transport by This EMS Unit...". |

eDisposition.11

|  |
| --- |
| Kansas |
| eDisposition.11 – Number of Patients Transported in this EMS Unit | |

**Definition**

The  number of patients transported by this EMS crew and unit.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern: [0-9]{5}|[0-9]{5}-[0-9]{4}|[0-9]{5}-[0-9]{5}|[A-Z][0-9][A-Z] [0-9][A-Z][0-9]

**Comments**

KEMSIS: Kansas does not allow this element to utilize the NEMSIS NOT Values therefore they are not available.

NEMSIS: Added to document multiple patients being transported with the same vehicle and crew.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Number of Patients Transported in this EMS Unit is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Number of Patients Transported in this EMS Unit has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e030 | Warning | Number of Patients Transported in this EMS Unit required when Transport Disposition identifies a transport by this EMS unit and Number of Patients at Scene is equal to multiple |

eDisposition.16

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.16 – EMS Transport Method | | |

**Definition**

The method o transport by this EMS unit.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 4216001 | Air Medical-Fixed Wing |
|  |  |
| 4216003 | Air Medical-Rotor Craft |
|  |  |
| 4216005 | Ground-Ambulance |
|  |  |
| 4216007 | Ground-ATV or Rescue Vehicle |
|  |  |
| 4216009 | Ground-Bariatric |
|  |  |
| 4216011 | Ground-Other Not Listed |
|  |  |
| 4216013 | Ground-Mass Casualty Bus/Vehicle |
|  |  |
| 4216015 | Ground-Wheelchair Van |
|  |  |
| 4216017 | Water-Boat |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Required if the patient is transported by EMS.

NEMSIS: Added to better describe Air and Ground Transport methods.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When EMS Transport Method is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When EMS Transport Method has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e164 | Warning | EMS Transport Method should be recorded when Transport Disposition is "Transport by This EMS Unit...". |
| nemSch\_e165 | Warning | EMS Transport Method should not be recorded when Transport Disposition is "Patient Refused Transport" or "No Transport". |

eDisposition.17

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.17 – Transport Mode from Scene | | |

**Definition**

Indication whether the transport was emergent or non-emergent.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
|  |
| 4217001 | Emergent (Immediate Response) | |
|  |  | |
| 4217003 | Emergent Downgraded to Non-Emergent | |
|  |  | |
| 4217005 | Non-Emergent | |
|  |  | |
| 4217007 | Non-Emergent Upgraded to Emergent | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Information now split between eDisposition.17 (Transport Mode from Scene) and eDisposition.18 (Additional Transport Mode Descriptors).

NEMSIS: Element eDisposition.18 (Additional Transport Mode Descriptors) has been added to document the use of lights and sirens or other descriptive information.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Transport Mode from Scene is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Transport Mode from Scene has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e166 | Warning | Transport Mode from Scene should be recorded when Transport Disposition is "Transport by This EMS Unit...". |
| nemSch\_e167 | Warning | Transport Mode from Scene should not be recorded when Transport Disposition is "Patient Refused Transport" or "No Transport". |

eDisposition.18

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.18 – Additional Transport Mode Descriptors | | |

**Definition**

The documentation of transport mode techniques for this EMS response.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
|  |
| 4218011 | Lights and Sirens | |
|  |  | |
| 4218015 | No Lights or Sirens | |
|  |  | |
| 4218017 | Initial No Lights or Sirens, Upgraded to Lights and Sirens | |
|  |  | |
| 4218019 | Initial Lights and Sirens, Downgraded to No Lights or Sirens | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas has decreased the number of available values for this element.

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Information now split between eDisposition.17 (Transport Mode from Scene) and eDisposition.18 (Additional Transport Mode Descriptors).

NEMSIS: Element eDisposition.18 (Additional Transport Mode Descriptors) has been added to document the use of lights and sirens or other descriptive information.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Additional Transport Mode Descriptors is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Additional Transport Mode Descriptors has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Additional Transport Mode Descriptors has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e031 | Warning | If No Light & Sirens with Upgrade is selected there should not be another answer regarding lights & sirens use. |
| ks\_e032 | Warning | If Light & Sirens with Downgrade is selected there should not be another answer regarding lights & sirens use. |
| ks\_e033 | Warning | If Light & Sirens is selected there should not be another answer regarding lights & sirens use. |
| ks\_e034 | Warning | If No Light & Sirens is selected there should not be another answer regarding lights & sirens use. |

eDisposition.19

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.19 – Final Patient Acuity | | |

**Definition**

The acuity of the patient’s condition after EMS care.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
|  |
| 4219001 | Critical (Red) | |
|  |  | |
| 4219003 | Emergent (Yellow) | |
|  |  | |
| 4219005 | Lower Acuity (Green) | |
|  |  | |
| 4219007 | Dead without Resuscitation Efforts (Black) | |
|  |  | |
| 4219009 | Dead with Resuscitation Efforts (Black) | |
|  |  | |
| 4219011 | Non-Acute/Routine | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

NEMSIS: Definitions related to "Critical, Emergent, and Lower Acuity" can be found in the National EMS Core Content document from NHTSA EMS (DOT HS 809-898 July 2005) at  
<http://www.nhtsa.gov/people/injury/ems/emscorecontent/images/EMSCoreContent.pdf>

NEMSIS: Dead without Resuscitation Efforts would be appropriate if resuscitation was initiated by non-EMS personnel but discontinued immediately upon evaluation by first arriving EMS personnel.

NEMSIS: "Non-Acute/Routine" added for use with patients with no clinical issues-such as a refusal for a life assist-or for routine transfers. "Dead with Resuscitation Efforts (Black)" added for EMS units that arrived and provided resuscitation to a critical patient, but who was deceased at the end of the event (such as in a cardiac arrest).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Final Patient Acuity is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Final Patient Acuity has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e168 | Warning | Final Patient Acuity should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |

eDisposition.20

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.20 – Reason for Choosing Destination | | |

**Definition**

The reason the unit chose to deliver or transfer the patient to the destniation.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
|  |
| 4220001 | Closest Facility | |
|  |  | |
| 4220003 | Diversion | |
|  |  | |
| 4220005 | Family Choice | |
|  |  | |
| 4220007 | Insurance Status/Requirement | |
|  |  | |
| 4220009 | Law Enforcement Choice | |
|  |  | |
| 4220011 | On-Line/On-Scene Medical Direction | |
|  |  | |
| 4220013 | Other | |
|  |  | |
| 4220015 | Patient's Choice | |
|  |  | |
| 4220017 | Patient's Physician's Choice | |
|  |  | |
| 4220019 | Protocol | |
|  |  | |
| 4220021 | Regional Specialty Center | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Required if the patient was transported.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Reason for Choosing Destination is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Reason for Choosing Destination has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Reason for Choosing Destination has a Not Value, no other value should be recorded. |
| nemSch\_e169 | Warning | Reason for Choosing Destination should be recorded when Transport Disposition is "Transport by This EMS Unit...". |

eDisposition.21

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.21 – Type of Destination | | |

**Definition**

The type of destination the patient was delivered or transferred to.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
|  |
| 4221001 | Home | |
|  |  | |
| 4221003 | Hospital-Emergency Department | |
|  |  | |
| 4221005 | Hospital-Non-Emergency Department Bed | |
|  |  | |
| 4221007 | Clinic | |
|  |  | |
| 4221009 | Morgue/Mortuary | |
|  |  | |
| 4221013 | Other | |
|  |  | |
| 4221015 | Other EMS Responder (air) | |
|  |  | |
| 4221017 | Other EMS Responder (ground) | |
|  |  | |
| 4221019 | Police/Jail | |
|  |  | |
| 4221021 | Urgent Care | |
|  |  | |
| 4221023 | Freestanding Emergency Department | |
|  |  | |
| 4221025 | Dialysis Center | |
|  |  | |
| 4221027 | Diagnostic Services | |
|  |  | |
| 4221029 | Assisted Living Facility | |
|  |  | |
| 4221031 | Mental Health Facility | |
|  |  | |
| 4221033 | Nursing Home | |
|  |  | |
| 4221035 | Other Recurring Care Center | |
|  |  | |
| 4221037 | Physical Rehabilitation Facility | |
|  |  | |
| 4221039 | Drug and/or Alcohol Rehabilitation Facility | |
|  |  | |
| 4221041 | Skilled Nursing Facility | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Required if the patient was transported.

NEMSIS: With the release of v3.5.0 additional values were added to meet the needs of EMS.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of Destination is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of Destination has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e170 | Warning | Type of Destination should be recorded when Transport Disposition is "Transport by This EMS Unit...". |

eDisposition.22

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.22 – Hospital In-Patient Destination | | |

**Definition**

The location within the hospital that the patient was taken directly by EMS (e.g., Cath Lab, ICU, etc.).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
|  |
| 4222001 | Hospital-Burn | |
|  |  | |
| 4222003 | Hospital-Cath Lab | |
|  |  | |
| 4222005 | Hospital-CCU | |
|  |  | |
| 4222007 | Hospital-Endoscopy | |
|  |  | |
| 4222009 | Hospital-Hospice | |
|  |  | |
| 4222011 | Hospital-Hyperbaric Oxygen Treatment | |
|  |  | |
| 4222013 | Hospital-ICU | |
|  |  | |
| 4222015 | Hospital-Labor and Delivery | |
|  |  | |
| 4222017 | Hospital-Med/Surg | |
|  |  | |
| 4222019 | Hospital-Mental Health | |
|  |  | |
| 4222021 | Hospital-MICU | |
|  |  | |
| 4222023 | Hospital-NICU | |
|  |  | |
| 4222025 | Hospital-Nursery | |
|  |  | |
| 4222027 | Hospital-Peds (General) | |
|  |  | |
| 4222029 | Hospital-Peds ICU | |
|  |  | |
| 4222031 | Hospital-OR | |
|  |  | |
| 4222033 | Hospital-Orthopedic | |
|  |  | |
| 4222035 | Hospital-Other | |
|  |  | |
| 4222037 | Hospital-Out-Patient Bed | |
|  |  | |
| 4222039 | Hospital-Radiology Services - MRI | |
|  |  | |
| 4222041 | Hospital-Radiology Services - CT/PET | |
|  |  | |
| 4222043 | Hospital-Radiology Services - X-Ray | |
|  |  | |
| 4222045 | Hospital-Radiation | |
|  |  | |
| 4222047 | Hospital-Rehab | |
|  |  | |
| 4222049 | Hospital-SICU | |
|  |  | |
| 4222051 | Hospital-Oncology | |
|  |  | |
| 4222053 | Hospital-Outpatient Surgery | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: To be documented when in eDisposition.21 "Hospital-Non-Emergency Department Bed" is selected.

NEMSIS: Added to identify the location within the hospital that the patient was directly taken to by EMS.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Hospital In-Patient Destination is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Hospital In-Patient Destination has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e035 | Warning | Hospital In-Patient Destination required when Type of Destination equals Hospital Non-Emergency Department Bed |

eDisposition.23

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.23 – Hospital Capability | | |

**Definition**

The primary hospital capability associated with the patient's condition for this transport (e.g., Trauma, STEMI, Peds, etc.).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |
| --- | --- |
| **Crew** | **Description** |
|  |
| 9908001 | Behavioral Health | |
|  |  | |
| 9908003 | Burn Center | |
|  |  | |
| 9908005 | Critical Access Hospital | |
|  |  | |
| 9908007 | Hospital (General) | |
|  |  | |
| 9908009 | Neonatal Center | |
|  |  | |
| 9908011 | Pediatric Center | |
|  |  | |
| 9908019 | Rehab Center | |
|  |  | |
| 9908021 | Trauma Center Level 1 | |
|  |  | |
| 9908023 | Trauma Center Level 2 | |
|  |  | |
| 9908025 | Trauma Center Level 3 | |
|  |  | |
| 9908027 | Trauma Center Level 4 | |
|  |  | |
| 9908029 | Trauma Center Level 5 | |
|  |  | |
| 9908031 | Cardiac-STEMI/PCI Capable | |
|  |  | |
| 9908033 | Cardiac-STEMI/PCI Capable (24/7) | |
|  |  | |
| 9908035 | Cardiac-STEMI/Non-PCI Capable | |
|  |  | |
| 9908037 | Stroke-Acute Stroke Ready Hospital (ASRH) | |
|  |  | |
| 9908039 | Stroke-Primary Stroke Center (PSC) | |
|  |  | |
| 9908041 | Stroke-Thrombectomy-Capable Stroke Center (TSC) | |
|  |  | |
| 9908043 | Stroke-Comprehensive Stroke Center (CSC) | |
|  |  | |
| 9908045 | Cancer Center | |
|  |  | |
| 9908047 | Labor and Delivery | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: To be documented when eDisposition.21 (Type of Destination) is 1) Hospital-Emergency Department, 2) Hospital-Non-Emergency Department Bed, or 3) Freestanding Emergency Department.

NEMSIS: Stroke Center classifications based on Join Commission stroke certification: <https://www.jointcommission.org/facts_about_joint_commission_stroke_certification/>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Hospital Capability is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Hospital Capability has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Hospital Capability has a Not Value, no other value should be recorded. |
| nemSch\_e171 | Warning | Hospital Capability should be recorded when Type of Destination is "Hospital..." or "Freestanding Emergency Department" and Cardiac Arrest is "Yes...". |
| nemSch\_e172 | Warning | Hospital Capability should be recorded when Type of Destination is "Hospital..." or "Freestanding Emergency Department" and Stroke Scale Score is "Positive". |
| nemSch\_e173 | Warning | Hospital Capability should be recorded when Type of Destination is "Hospital..." or "Freestanding Emergency Department" and Cardiac Rhythm / Electrocardiography (ECG) is "STEMI...". |
| ks\_e036 | Warning | Hospital Capability when patient was transported to a hospital. |

eDisposition.24

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.24 – Destination Team Pre-Arrival Alert or Activation | | |

**Definition**

Indication that an alert (or activation) was called by EMS to the appropriate destination healthcare facility team. The alert (or activation) should occur prior to the EMS Unit arrival at the destination with the patient.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 4224001 | | No | |
|  | |  | |
| 4224003 | | Yes-Adult Trauma | |
|  | |  | |
| 4224005 | | Yes-Cardiac Arrest | |
|  | |  | |
| 4224007 | | Yes-Obstetrics | |
|  | |  | |
| 4224009 | | Yes-Other | |
|  | |  | |
| 4224011 | | Yes-Pediatric Trauma | |
|  | |  | |
| 4224013 | | Yes-STEMI | |
|  | |  | |
| 4224015 | | Yes-Stroke | |
|  | |  | |
| 4224017 | | Yes-Trauma (General) | |
|  | |  | |
| 4224019 | | Yes-Sepsis | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to better document performance measure for acute time dependent illness and injury systems of care.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Destination Team Pre-Arrival Alert or Activation is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Destination Team Pre-Arrival Alert or Activation has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e174 | Warning | When Destination Team Pre-Arrival Alert or Activation is "No", no other value should be recorded. |
| nemSch\_e175 | Warning | Destination Team Pre-Arrival Alert or Activation should be recorded when Date/Time of Destination Prearrival Alert or Activation is recorded. |
| ks\_e037 | Warning | Destination Team Pre-Arrival Alert or Activation required when Primary Impression is Stroke or STEMI on a patient transported by this unit |

eDisposition.25

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.25 – Date/Time of Destination Prearrival Alert or Activation | | |

**Definition**

The Date/Time EMS alerted, notified, or activated the Destination Healthcare Facility prior to EMS arrival. The EMS assessment identified the patient as acutely ill or injured based on exam and possibly specified alert criteria.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern: [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to better document performance measure for acute time dependent illness and injury systems of care.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time of Destination Prearrival Alert or Activation is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time of Destination Prearrival Alert or Activation has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e176 | Warning | Date/Time of Destination Prearrival Alert or Activation should be recorded when Destination Team Pre-Arrival Alert or Activation is recorded with a value other than "None". |
| nemSch\_e177 | Warning | Date/Time of Destination Prearrival Alert or Activation should not be earlier than Unit Notified by Dispatch Date/Time. |
| nemSch\_e178 | Warning | Date/Time of Destination Prearrival Alert or Activation should not be later than Destination Patient Transfer of Care Date/Time. |
| nemSch\_e179 | Warning | Date/Time of Destination Prearrival Alert or Activation should not be later than Unit Back in Service Date/Time. |

eDisposition.27

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.27 – Unit Disposition | | |

**Definition**

|  |  |  |
| --- | --- | --- |
| |  |  | | --- | --- | | |  | | --- | | The patient disposition for an EMS event identifying whether patient contact was made. | | |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |
| --- | --- |
| **Code** | **Description** |
|  |  |
| 4227001 | Patient Contact Made | |
|  |  | |
| 4227003 | Cancelled on Scene | |
|  |  | |
| 4227005 | Cancelled Prior to Arrival at Scene | |
|  |  | |
| 4227007 | No Patient Contact | |
|  |  | |
| 4227009 | No Patient Found | |
|  |  | |
| 4227011 | Non-Patient Incident (Not Otherwise Listed) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

NEMSIS: Grouped with Incident and Transport dispositions. Who provided care or services is defined in Incident Disposition.

NEMSIS: Element added with the release of v3.5.0

**Validation Rules**

NEMSIS Mandatory Element

|  |  |  |
| --- | --- | --- |
| nemSch\_e180 | Warning | Unit Disposition should be "Patient Contact Made" when Patient Evaluation/Care is "Patient Evaluated..." or "Patient Refused Evaluation/Care". |
| nemSch\_e181 | Warning | Unit Disposition should be "Patient Contact Made" when Crew Disposition contains "... Primary Care..." or "Provided Care Supporting Primary EMS Crew". |
| nemSch\_e182 | Warning | Unit Disposition should be "Patient Contact Made" when Transport Disposition is a value other than "Non-Patient Transport (Not Otherwise Listed)" or "No Transport". |

eDisposition.28

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.28 – Patient Evaluation/Care | | |

**Definition**

|  |
| --- |
| The patient disposition for an EMS event identifying whether a patient was evaluated and care or services were provided. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 4228001 | Patient Evaluated and Care Provided |
|  |  |  |
|  | 4228003 | Patient Evaluated and Refused Care |
|  |  |  |
|  | 4228005 | Patient Evaluated, No Care Required |
|  |  |  |
|  | 4228007 | Patient Refused Evaluation/Care |
|  |  |  |
|  | 4228009 | Patient Support Services Provided |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow Not values for this element.

NEMSIS: Grouped with Incident and Transport dispositions. Who provided care or services is defined in Incident Disposition.

NEMSIS: Element added with the release of v3.5.0

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e183 | Warning | Patient Evaluation/Care should be recorded when Unit Disposition is "Patient Contact Made". |
| nemSch\_e184 | Warning | Patient Evaluation/Care should be "Patient Evaluated and Care Provided" when Crew Disposition contains "... Primary Care..." or "Provided Care Supporting Primary EMS Crew". |

eDisposition.29

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.29 – Crew Disposition | | |

**Definition**

|  |
| --- |
| The crew disposition for this EMS event identifying which crew provided primary patient care or whether support services were required. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 4229001 | | Initiated and Continued Primary Care | |
|  | |  | |
| 4229003 | | Initiated Primary Care and Transferred to Another EMS Crew | |
|  | |  | |
| 4229005 | | Provided Care Supporting Primary EMS Crew | |
|  | |  | |
| 4229007 | | Assumed Primary Care from Another EMS Crew | |
|  | |  | |
| 4229009 | | Incident Support Services Provided (Including Standby) | |
|  | |  | |
| 4229011 | | Back in Service, No Care/Support Services Required | |
|  | |  | |
| 4229013 | | Back in Service, Care/Support Services Refused | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Grouped with Incident and Transport dispositions.

NEMSIS: Depending on context of the Value, "Unit" could be Vehicle or Service/Agency.

NEMSIS: Element added with the release of v3.5.0

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Crew Disposition is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Crew Disposition has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e085 | Warning | Crew Disposition should be recorded when Unit Disposition is "Patient Contact Made". |

eDisposition.30

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.30 – Transport Disposition | | |

**Definition**

|  |
| --- |
| The transport disposition for an EMS event identifying whether a transport occurred and by which unit. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 4230001 | | Transport by This EMS Unit (This Crew Only) | |
|  | |  | |
| 4230003 | | Transport by This EMS Unit, with a Member of Another Crew | |
|  | |  | |
| 4230005 | | Transport by Another EMS Unit | |
|  | |  | |
| 4230007 | | Transport by Another EMS Unit, with a Member of This Crew | |
|  | |  | |
| 4230009 | | Patient Refused Transport | |
|  | |  | |
| 4230011 | | Non-Patient Transport (Not Otherwise Listed) | |
|  | |  | |
| 4230013 | | No Transport | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Grouped with Incident and Transport dispositions.

NEMSIS: Provides a rapid filter for transport or no transport for incident evaluation, business entry rules and Schematron rules.

NEMSIS: Element added with the release of v3.5.0

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Transport Disposition is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Transport Disposition has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e186 | Warning | Transport Disposition should be recorded when Unit Disposition is "Patient Contact Made". |

eDisposition.32

|  |  |
| --- | --- |
| Kansas | National |
| eDisposition.32 – Level of Care Provided per Protocol | | |

**Definition**

|  |
| --- |
| The general level of care provided to this patient as defined per provider level in local EMS protocols or clinical guidelines. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 4232001 | | BLS - All Levels | |
|  | |  | |
| 4232003 | | ALS - AEMT/Intermediate | |
|  | |  | |
| 4232005 | | ALS - Paramedic | |
|  | |  | |
| 4232007 | | EMS and Other Health-Care Staff | |
|  | |  | |
| 4232009 | | Critical Care | |
|  | |  | |
| 4232011 | | Integrated Health Care | |
|  | |  | |
| 4232013 | | No Care Provided | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: The level of care should be defined by the situation, medications, and procedures provided to the patient based on what is allowed in the local EMS protocols. This definition can vary between regions; what may be allowed for BLS providers in one region may be considered ALS care in another. This is not a reflection of the provider levels providing care, but the actual care given-for example, BLS care provided by a paramedic would be entered as "BLS".

NEMSIS: This element benefits reviews of performance, resource demand and utilization, and reimbursement coding.

NEMSIS: Element added with the release of v3.5.0

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Level of Care Provided per Protocol is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Level of Care Provided per Protocol has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e187 | Warning | Level of Care Provided per Protocol should be recorded (with a value other than "No Care Provided") when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |

eExam.01

|  |
| --- |
| Kansas |
| eExam.01 – Estimated Body Weight in Kilograms | |

**Definition**

|  |
| --- |
| The patient's body weight in kilograms either measured or estimated. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801023 – Unable to complete

**Data Type**

Decimal Total-Digits: 4 Fraction-Digits: 1 Min-Inclusive: 0.1 Max-Inclusive: 999.9

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Estimated Body Weight in Kilograms is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Estimated Body Weight in Kilograms has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Estimated Body Weight in Kilograms has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e038 | Warning | Estimated body weight is required when Patient Evaluation/Care identifies a patient was evaluated. |

eExam.21

|  |
| --- |
| Kansas |
| eExam.21 – Stroke/CVA Symptoms Resolved | |

**Definition**

|  |
| --- |
| Indication if the Stroke/CVA Symptoms resolved and when. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3521001 | | No | |
|  | |  | |
| 3521003 | | Yes-Resolved Prior to EMS Arrival | |
|  | |  | |
| 3521005 | | Yes-Resolved in EMS Presence | |

**NOT Values (NV)**

None

**Pertinent Negatives**

8801023 – Unable to complete

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Stroke/CVA Symptoms Resolved is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Stroke/CVA Symptoms Resolved has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Stroke/CVA Symptoms Resolved has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e039 | Warning | Stroke/CVA Symptoms Resolved is required when Primary Impression or Secondary Impression identifies a stroke or TIA and Type of Service Requested includes "Emergency" |

eHistory.01

|  |  |
| --- | --- |
| Kansas | National |
| eHistory.01 – Barriers to Patient Care | | |

**Definition**

|  |
| --- |
| Indication of whether or not there were any patient specific barriers to serving the patient at the scene. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3101001 | | Cultural, Custom, Religious | |
|  | |  | |
| 3101003 | | Developmentally Impaired | |
|  | |  | |
| 3101005 | | Hearing Impaired | |
|  | |  | |
| 3101007 | | Language | |
|  | |  | |
| 3101009 | | None Noted | |
|  | |  | |
| 3101011 | | Obesity | |
|  | |  | |
| 3101013 | | Physical Barrier (Unable to Access Patient) | |
|  | |  | |
| 3101015 | | Physically Impaired | |
|  | |  | |
| 3101017 | | Physically Restrained | |
|  | |  | |
| 3101019 | | Psychologically Impaired | |
|  | |  | |
| 3101021 | | Sight Impaired | |
|  | |  | |
| 3101023 | | Speech Impaired | |
|  | |  | |
| 3101025 | | Unattended or Unsupervised (including minors) | |
|  | |  | |
| 3101027 | | Unconscious | |
|  | |  | |
| 3101029 | | Uncooperative | |
|  | |  | |
| 3101031 | | State of Emotional Distress | |
|  | |  | |
| 3101033 | | Alcohol Use, Suspected | |
|  | |  | |
| 3101035 | | Drug Use, Suspected | |
|  |  | |  | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Barriers to Patient Care is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Barriers to Patient Care has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Barriers to Patient Care has a Not Value, no other value should be recorded. |
| nemSch\_e124 | Warning | When Barriers to Patient Care is "None Noted", no other value should be recorded. |
| ks\_e040 | Warning | Barriers to Care required when Patient Evaluation/Care identifies a patient was evaluated. |

eHistory.05

|  |
| --- |
| Kansas |
| eHistory.05 – Advanced Directives | |

**Definition**

|  |  |  |
| --- | --- | --- |
| |  |  | | --- | --- | | |  | | --- | | The presence of a valid DNR form, living will, or document directing end of life or healthcare treatment decisions. | | |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3105001 | | Family/Guardian request DNR (but no documentation) | |
|  | |  | |
| 3105003 | | Living Will | |
|  | |  | |
| 3105005 | | None | |
|  | |  | |
| 3105007 | | Other | |
|  | |  | |
| 3105009 | | Other Healthcare Advanced Directive Form | |
|  | |  | |
| 3105011 | | State EMS DNR or Medical Order Form | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 0 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Advanced Directive and Do Not Resuscitate are both included in this data element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Advance Directives is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Advance Directives has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Advance Directives has a Not Value, no other value should be recorded. |
| ks\_e041 | Warning | Advanced Directives required when Patient Evaluation/Care equals Patient Evaluated and Care Provided |

eHistory.06

|  |
| --- |
| Kansas |
| eHistory.06 – Medication Allergies | |

**Definition**

The patient’s medication allergies

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

9924001 – ICD10 9924003 - RxNorm

**NOT Values (NV)**

None

**Pertinent Negatives**

8801013 – No Known Drug Allergy 8801019 – Refused 8801023 – Unable to Complete

8801021 - Unresponsive

**Data Type**

String Min-Length: 0 Max-Length: 255

Pattern: (Z88\.[0-9])|([a-zA-Z0-9]{2,7})

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: The list of medication allergies is based on RxNorm (RXCUI) Codes.

NEMSIS:  A specific list of ICD-10 CM codes can be used for medication groups.

NEMSIS: Reference the NEMSIS Suggested Lists at: <https://nemsis.org/technical-resources/version-3/version-3-resource-repository/>

NEMSIS: Code list is represented in two separate IMLS datasets:

1. ICD10
2. RxNorm

Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)

Product - UMLS Metathesaurus

Website - <http://www.nlm.nih.gov/research/umls/rxnorm/docs/rxnormfiles.html>

Product - RxNorm Full Monthly Release

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Allergies is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Allergies has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Medication Allergies has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e009 | Warning | When Medication Allergies has a Not Value, no other value should be recorded. |
| nemSch\_e010 | Warning | When Medication Allergies has a Pertinent Negative, no other value should be recorded. |
| ks\_e042 | Warning | Medication Allergies required when Patient Evaluation/Care equals Patient Evaluated and Care Provided. |

eHistory.08

|  |
| --- |
| Kansas |
| eHistory.08 – Medical/Surgical History | |

**Definition**

The patient’s pre-existing medical and surgery history

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801015 – None Reported 8801019 – Refused 8801023 – Unable to Complete

8801021 - Unresponsive

**Data Type**

String Min-Length: 0 Max-Length: 255

Pattern: ([A-QRSTZ][0-9][0-9A-Z])((\.[0-9A-Z]{1,3})?)|[0-9A-HJ-NP-Z]{3,7}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: The Medical/Surgical History pattern has been extended to include ICD-10-CM: Diagnosis Codes and ICD-10-PCS: Procedural Health Intervention Codes.

ICD-10-CM: Diagnosis Codes

Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)

Product - UMLS Metathesaurus

NEMSIS: ICD-10-PCS has a seven character alphanumeric code structure. Each character contains up to 34 possible values. Each value represents a specific option for the general character definition (e.g., stomach is one of the values for the body part character).

NEMSIS: he ten digits 0-9 and the 24 letters A-H,J-N and P-Z may be used in each character. The letters O and I are not used in order to avoid confusion with the digits 0 and 1. There are no decimals in ICD-10-PCS.

Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)

Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medical/Surgical History is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medical/Surgical History has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty |
| nemSch\_e008 | Error | When Medical/Surgical History has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e009 | Warning | When Medical/Surgical History has a Not Value, no other value should be recorded. |
| nemSch\_e010 | Warning | When Medical/Surgical History has a Pertinent Negative, no other value should be recorded. |
| ks\_e043 | Warning | Medical/Surgical History required when Patient Evaluation/Care equals Patient Evaluated and Care Provided |

eHistory.12

|  |
| --- |
| Kansas |
| eHistory.12 – Current Medications | |

**Definition**

The medications the patient currently takes.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801015 – None Reported 8801019 – Refused 8801023 – Unable to Complete

8801021 - Unresponsive

**Data Type**

String Min-Length: 2 Max-Length: 7

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: List of medications based on RxNorm (RXCUI) code.

NEMSIS: Reference the NEMSIS Suggested Lists at: <https://nemsis.org/technical-resources/version-3/version-3-resource-repository/>

NEMSIS: RxNorm

Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)

Product - UMLS Metathesaurus

Website - <http://www.nlm.nih.gov/research/umls/rxnorm/docs/rxnormfiles.html>

Product - RxNorm Full Monthly Release

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Current Medications is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Current Medications has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Current Medications has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e044 | Warning | Current Medications required when Patient Evaluation/Care equals Patient Evaluated and Care Provided |

eHistory.17

|  |  |
| --- | --- |
| Kansas | National |
| eHistory.17 – Alcohol/Drug Use Indicators | | |

**Definition**

|  |
| --- |
| Indicators for the potential use of alcohol or drugs by the patient related to the patient's current illness or injury. |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3117001 | | Alcohol Containers/Paraphernalia at Scene | |
|  | |  | |
| 3117003 | | Drug Paraphernalia at Scene | |
|  | |  | |
| 3117005 | | Patient Admits to Alcohol Use | |
|  | |  | |
| 3117007 | | Patient Admits to Drug Use | |
|  | |  | |
| 3117009 | | Positive Level known from Law Enforcement or Hospital Record | |
|  | |  | |
| 3117013 | | Physical Exam Indicates Suspected Alcohol or Drug Use | |

**NOT Values (NV)**

None

**Pertinent Negatives**

8801015 – None Reported 8801023 – Unable to Complete

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Alcohol/Drug Use Indicators is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Alcohol/Drug Use Indicators has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Alcohol/Drug Use Indicators has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e009 | Warning | When Alcohol/Drug Use Indicators has a Not Value, no other value should be recorded. |
| nemSch\_e010 | Warning | When Alcohol/Drug Use Indicators has a Pertinent Negative, no other value should be recorded. |
| ks\_e045 | Warning | Alcohol/Drug Use Indicators required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated |

eInjury.01

|  |  |
| --- | --- |
| Kansas | National |
| eHistory.01 – Cause of Injury | | |

**Definition**

The category of the reported/suspected external cause of the injury.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

Pattern ([TV-Y][0-9]{2})((\.[0-9A-Z]{1,4})?)

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Suggested code list is represented in ICD-10-CM.

NEMSIS: Reference the NEMSIS Suggested Lists at: <https://nemsis.org/technical-resources/version-3/version-3-resources/>

NEMSIS: Code list is represented in ICD-10 Codes

Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)

Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Cause of Injury is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Cause of Injury has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Cause of Injury has a Not Value, no other value should be recorded. |
| nemSch\_e089 | Warning | Cause of Injury should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Possible Injury is "Yes". |
| nemSch\_e090 | Warning | Cause of Injury should only be recorded when Possible Injury is "Yes". |
| ks\_e046 | Warning | Cause of injury required when Possible Injury equals "Yes" and Patient Evaluation/Care identifies a patient was evaluated |

eInjury.02

|  |
| --- |
| Kansas |
| eHistory.02 – Mechanism of Injury | |

**Definition**

The mechanism of the event which caused the injury.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | **Code** | **Description** | | |  |  | | | 2902001 | | Blunt | | |  | |  | | | 2902003 | | Burn | | |  | |  | | | 2902005 | | Other | | |  | |  | | | 2902007 | | Penetrating | | |  |  | |  | | | |
|  |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Mechanism of Injury is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Mechanism of Injury has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Mechanism of Injury has a Not Value, no other value should be recorded. |
| ks\_e047 | Warning | Mechanism of Injury is required when Possible Injury equals "Yes" |

eInjury.03

|  |  |
| --- | --- |
| Kansas | National |
| eHistory.03 – Trauma Triage Criteria (Steps 1 & 2) | | |

**Definition**

The category of the reported/suspected external cause of the injury.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 2903001 | Amputation proximal to wrist or ankle |
|  |  |  |
|  | 2903003 | Crushed, degloved, mangled, or pulseless extremity |
|  |  |  |
|  | 2903005 | Chest wall instability or deformity (e.g., flail chest) |
|  |  |  |
|  | 2903007 | Glasgow Coma Score <= 13 |
|  |  |  |
|  | 2903009 | Open or depressed skull fracture |
|  |  |  |
|  | 2903011 | Paralysis |
|  |  |  |
|  | 2903013 | Pelvic fractures |
|  |  |  |
|  | 2903015 | All penetrating injuries to head, neck, torso, and extremities proximal to elbow or knee |
|  |  |  |
|  | 2903017 | Respiratory Rate <10 or >29 breaths per minute (<20 in infants aged <1 year) or need for ventilatory support |
|  |  |  |
|  | 2903019 | Systolic Blood Pressure <90 mmHg |
|  |  |  |
|  | 2903021 | Two or more proximal long-bone fractures |

**NOT Values (NV)**

7701001 – Not Applicable

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas allows NOT Applicable for situations when a patient with a traumatic injury does not meet Trauma Triage Criteria.

NEMSIS: 2011 Guidelines for the Field Triage of Injured Patients - value choices for Steps 1 and 2.

NEMSIS: For falls, one story is equal to 10 feet.

NEMSIS: Added to better evaluate the CDC-ACS 2011 Guidelines for the Field Triage of Injured Patients.

Website: <http://www.cdc.gov/mmwr/pdf/rr/rr6101.pdf>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Trauma Triage Criteria (Steps 1 and 2) is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Trauma Triage Criteria (Steps 1 and 2) has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Trauma Triage Criteria (Steps 1 and 2) has a Not Value, no other value should be recorded. |
| nemSch\_e091 | Warning | Trauma Triage Criteria (Steps 1 and 2) should only be recorded when Possible Injury is "Yes". |
| ks\_e048 | Warning | Trauma Triage Criteria (Steps 1 & 2) requires an answer or "Not Applicable" value when Possible Injury equals "Yes" |

eInjury.04

|  |  |
| --- | --- |
| Kansas | National |
| eHistory.04 – Trauma Triage Criteria (Steps 3 & 4) | | |

**Definition**

The category of the reported/suspected external cause of the injury.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2904001 | | Auto v. Pedestrian/Bicyclist Thrown, Run Over, or > 20 MPH Impact | |
|  | |  | |
| 2904003 | | Fall Adults: > 20 ft. (one story is equal to 10 ft.) | |
|  | |  | |
| 2904005 | | Fall Children: > 10 ft. or 2-3 times the height of the child | |
|  | |  | |
| 2904007 | | Crash Death in Same Passenger Compartment | |
|  | |  | |
| 2904009 | | Crash Ejection (partial or complete) from automobile | |
|  | |  | |
| 2904011 | | Crash Intrusion, including roof: > 12 in. occupant site; > 18 in. any site | |
|  | |  | |
| 2904013 | | Crash Vehicle Telemetry Data (AACN) Consistent with High Risk of Injury | |
|  | |  | |
| 2904015 | | Motorcycle Crash > 20 MPH | |
|  | |  | |
| 2904017 | | SBP < 110 for age > 65 | |
|  | |  | |
| 2904019 | | Anticoagulants and Bleeding Disorders | |
|  | |  | |
| 2904021 | | Pregnancy > 20 weeks | |
|  | |  | |
| 2904023 | | EMS Provider Judgment | |
|  | |  | |
| 2904025 | | Burn, without other trauma | |
|  | |  | |
| 2904027 | | Burn, with trauma mechanism | |

**NOT Values (NV)**

7701001 – Not Applicable

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas allows NOT Applicable for situations when a patient with a traumatic injury does not meet Trauma Triage Criteria.

NEMSIS: Assesses mechanism of injury and evidence of high-energy impact (Step 3) AND Assess special patient or system considerations

NEMSIS: (Step 4) based on CDC 2011 Guidelines for the Field Triage of Injured Patients Step 3 and 4.

NEMSIS: Added to better evaluate the CDC-ACS 2011 Guidelines for the Field Triage of Injured Patients.

Website: <http://www.cdc.gov/mmwr/pdf/rr/rr6101.pdf>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Trauma Triage Criteria (Steps 3 and 4) is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Trauma Triage Criteria (Steps 3 and 4) has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty |
| nemSch\_e009 | Warning | When Trauma Triage Criteria (Steps 3 and 4) has a Not Value, no other value should be recorded |
| nemSch\_e092 | Warning | Trauma Triage Criteria (Steps 3 and 4) should only be recorded when Possible Injury is "Yes". |
| ks\_e049 | Warning | Trauma Triage Criteria (Steps 3 & 4) requires an answer or "Not Applicable" value when Possible Injury equals "Yes" |

eInjury.05

|  |
| --- |
| Kansas |
| eHistory.05 – Main Area of the Vehicle Impacted by the Collision | |

**Definition**

The area or location of initial impact on the vehicle based on 12-point clock diagram.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Integer Min-Inclusive: 1 Max-Inclusive: 12

**Comments**

NEMSIS: The front of the vehicle is 12, passenger (right) side is 3, rear is 6, etc.

NEMSIS: Based on MMUCC via areas(s) of impact & FARS coding manual clock diagram.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e050 | Warning | Main Area of Vehicle Impacted by Collision is required when Cause of Injury identifies a vehicle was involved. |

eInjury.06

|  |
| --- |
| Kansas |
| eHistory.06 – Location of Patent in Vehicle | |

**Definition**

The seat row location of the vehicle at the time of the crash with the front seat numbered as 1.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 2906001 | Front Seat-Left Side (or motorcycle driver) |
|  |  |  |
|  | 2906003 | Front Seat-Middle |
|  |  |  |
|  | 2906005 | Front Seat-Right Side |
|  |  |  |
|  | 2906007 | Passenger in other enclosed passenger or cargo area (non-trailing unit such as a bus, etc.) |
|  |  |  |
|  | 2906009 | Passenger in unenclosed passenger or cargo area (non-trailing unit such as a pickup, etc.) |
|  |  |  |
|  | 2906011 | Riding on Vehicle Exterior (non-trailing unit) |
|  |  |  |
|  | 2906013 | Second Seat-Left Side (or motorcycle passenger) |
|  |  |  |
|  | 2906015 | Second Seat-Middle |
|  |  |  |
|  | 2906017 | Second Seat-Right Side |
|  |  |  |
|  | 2906019 | Sleeper Section of Cab (truck) |
|  |  |  |
|  | 2906021 | Third Row-Left Side (or motorcycle passenger) |
|  |  |  |
|  | 2906023 | Third Row-Middle |
|  |  |  |
|  | 2906025 | Third Row-Right Side |
|  |  |  |
|  | 2906027 | Trailing Unit |
|  |  |  |
|  | 2906029 | Unknown |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

NEMSIS: MMUCC P6 data element

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| Ks\_e051 | Warning | Location of Patient in Vehicle required when Cause of Injury identifies an injury due to transportation accident. |

eInjury.07

|  |
| --- |
| Kansas |
| eHistory.07 – Use of Occupant Safety Equipment | |

**Definition**

Safety equipment in use by the patient at the time of the injury.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Optional | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2907001 | | Child Booster Seat | |
|  | |  | |
| 2907003 | | Eye Protection | |
|  | |  | |
| 2907005 | | Helmet Worn | |
|  | |  | |
| 2907007 | | Infant Car Seat Forward Facing | |
|  | |  | |
| 2907009 | | Infant Car Seat Rear Facing | |
|  | |  | |
| 2907015 | | None | |
|  | |  | |
| 2907017 | | Other | |
|  | |  | |
| 2907019 | | Personal Floatation Device | |
|  | |  | |
| 2907021 | | Protective Clothing | |
|  | |  | |
| 2907023 | | Protective Non-Clothing Gear | |
|  | |  | |
| 2907027 | | Shoulder and Lap Belt Used | |
|  | |  | |
| 2907029 | | Lap Belt Only Used | |
|  | |  | |
| 2907031 | | Shoulder Belt Only Used | |
|  | |  | |
| 2907033 | | Unable to Determine | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: MMUCC P7 data element used as baseline information. Data element expanded for added definition in non-vehicular settings.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Use of Occupant Safety Equipment is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Use of Occupant Safety Equipment has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Use of Occupant Safety Equipment has a Not Value, no other value should be recorded. |
| ks\_e052 | Warning | Use of Occupant Safety Equipment required when (eInjury.01) Cause of Injury identifies a transportation incident |

eInjury.08

|  |
| --- |
| Kansas |
| eHistory.08 – Airbag Deployment | |

**Definition**

Indication of Airbag Deployment.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |
| --- | --- |
|  |  |
|  | **Code** | **Description** |
|  | 2908001 | Airbag Deployed Front |
|  |  |  |
|  | 2908003 | Airbag Deployed Side |
|  |  |  |
|  | 2908005 | Airbag Deployed Other (knee, air belt, etc.) |
|  |  |  |
|  | 2908007 | No Airbag Deployed |
|  |  |  |
|  | 2908009 | No Airbag Present |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

NEMSIS: MMUCC P8 data element baseline was used for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| Ks\_e053 | Warning | Airbag Deployment required when Cause of Injury identifies a motor vehicle collision |

eInjury.09

|  |
| --- |
| Kansas |
| eHistory.09 – Height of Fall (feet) | |

**Definition**

The distance in feet the patient fell, measured from the lowest point of the patient to the ground.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Optional | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Integer Min-Inclusive:0 Max-Inclusive: 10000

**Comments**

NEMSIS: Classify same level falls as 0 feet.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e054 | Warning | Height of Fall required when Cause of Injury indicates a fall occurred. |

eMedications.01

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.01 – Date/Time Medication Administered | | |

**Definition**

The date/time medication administered to the patient.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values with this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Medication Administered is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time Medication Administered has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e136 | Warning | Date/Time Medication Administered should be recorded, unless Medication Administered Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e137 | Warning | Date/Time Medication Administered should not be earlier than Unit Notified by Dispatch Date/Time, unless Medication Administered Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e138 | Warning | Date/Time Medication Administered should not be earlier than Arrived at Patient Date/Time, unless Medication Administered Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e139 | Warning | Date/Time Medication Administered should not be later than Destination Patient Transfer of Care Date/Time |
| nemSch\_e140 | Warning | Date/Time Medication Administered should not be later than Unit Back in Service Date/Time. |
| nemSch\_e141 | Warning | Date/Time Medication Administered should not be later than Arrived at Patient Date/Time when Medication Administered Prior to this Unit's EMS Care is "Yes" |

eMedications.02

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.02 – Medication Administered Prior to this Unit’s EMS Care | | |

**Definition**

Indicates that the medication administration which is documented was administered prior to this EMS units care.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9923001 | | No | |
|  | |  | |
| 9923003 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This is NEMSIS Version 3 method to document prior aid.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Administered Prior to this Unit's EMS Care is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Administered Prior to this Unit's EMS Care has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e055 | Warning | Medication Administered PTA required when other Date/Time Medication Administered or Medication Administered is not blank |

eMedications.03

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.03 – Medication Administered | | |

**Definition**

The medication administered to the patient.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

9924003 – RxNorm 9924005 – SNOWMED-CT

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

8801001 – Contraindication Noted 8801003 – Denied by Order 8801007 – Medication Allergy

8801009 – Medication Already Taken 8801019 – Refused 8801023 – Unable to Complete

8801027 – Order Criteria Not Met

**Data Type**

String Min-Length: 2 Max-Length: 9

**Comments**

NEMSIS: List of medications based on RxNorm (RXCUI) code and SNOMED-CT codes for blood products.

NEMSIS: Reference the NEMSIS Suggested Lists at: <https://nemsis.org/technical-resources/version-3/version-3-resources/>

NEMSIS: RxNorm

Website - <http://www.nlm.nih.gov/research/umls/rxnorm/docs/rxnormfiles.html>

Product - RxNorm Full Monthly Release

NEMSIS: SNOMED-CT

Website: <http://www.nlm.nih.gov/research/umls/Snomed/snomed_main.html>

Product: Product - UMLS Metathesaurus.

NEMSIS: Available SNOMED-CT Codes are:

116762002 Administration of blood product  
116795008 Transfusion of cryoprecipitate  
116861002 Transfusion of fresh frozen plasma  
116865006 Administration of albumin  
180208003 Intravenous blood transfusion of platelets  
33389009 Transfusion of whole blood  
71493000 Transfusion of packed red blood cells

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Administered is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Administered has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e006 | Error | When Medication Administered has a Pertinent Negative, it should have a value and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e142 | Warning | Medication Administered should be recorded when a medication is administered. |
| nemSch\_e143 | Error | Medication Administered should be a code of between 2 and 7 digits when Code Type is "RxNorm". |
| nemSch\_e144 | Error | Medication Administered should be a SNOMED code specifically allowed in the data dictionary when Code Type is "SNOMED". |
| nemSch\_e145 | Error | Medication Administered should be an RxNorm code of between 2 and 7 digits or a SNOMED code specifically allowed in the data dictionary. |

eMedications.04

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.04 – Medication Administered Route | | |

**Definition**

The route medication was administered to the patient.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9927001 | | Blow-By | |
|  | |  | |
| 9927003 | | Buccal | |
|  | |  | |
| 9927005 | | Endotracheal Tube (ET) | |
|  | |  | |
| 9927007 | | Gastrostomy Tube | |
|  | |  | |
| 9927009 | | Inhalation | |
|  | |  | |
| 9927011 | | Intraarterial | |
|  | |  | |
| 9927013 | | Intradermal | |
|  | |  | |
| 9927015 | | Intramuscular (IM) | |
|  | |  | |
| 9927017 | | Intranasal | |
|  | |  | |
| 9927019 | | Intraocular | |
|  | |  | |
| 9927021 | | Intraosseous (IO) | |
|  | |  | |
| 9927023 | | Intravenous (IV) | |
|  | |  | |
| 9927025 | | Nasal Cannula | |
|  | |  | |
| 9927027 | | Nasogastric | |
|  | |  | |
| 9927029 | | Nasotracheal Tube | |
|  | |  | |
| 9927031 | | Non-Rebreather Mask | |
|  | |  | |
| 9927033 | | Ophthalmic | |
|  | |  | |
| 9927035 | | Oral | |
|  | |  | |
| 9927037 | | Other/miscellaneous | |
|  | |  | |
| 9927039 | | Otic | |
|  | |  | |
| 9927041 | | Re-breather mask | |
|  | |  | |
| 9927043 | | Rectal | |
|  | |  | |
| 9927045 | | Subcutaneous | |
|  | |  | |
| 9927047 | | Sublingual | |
|  | |  | |
| 9927049 | | Topical | |
|  | |  | |
| 9927051 | | Tracheostomy | |
|  | |  | |
| 9927053 | | Transdermal | |
|  | |  | |
| 9927055 | | Urethral | |
|  | |  | |
| 9927057 | | Ventimask | |
|  | |  | |
| 9927059 | | Wound | |
|  | |  | |
| 9927061 | | Portacath | |
|  | |  | |
| 9927063 | | Auto Injector | |
|  | |  | |
| 9927065 | | BVM | |
|  | |  | |
| 9927067 | | CPAP | |
|  | |  | |
| 9927069 | | IV Pump | |
|  | |  | |
| 9927071 | | Nebulizer | |
|  | |  | |
| 9927073 | | Umbilical Artery Catheter | |
|  | |  | |
| 9927075 | | Umbilical Venous Catheter | |

**NOT Values (NV)**

None

**Pertinent Negatives**

8801023 – Unable to Complete

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

KEMSIS: Kansas does not allow NEMSIS Pertinent Negatives for this element.

NEMSIS: This medication route list represents a sub-group of values from the Data Elements for Emergency Department Systems (DEEDS), pertaining to prehospital care.

NEMSIS: DEEDS Version 1.0 was utilized for this list: <http://www.sciencedirect.com/science/article/pii/S0196064498703178>

NEMSIS: The list can be found on page 152 of 274 of the PDF document in Section 5, 5.13 Current Therapeutic Medication Route.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Administered Route is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Administered Route has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Medication Administered Route has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e146 | Warning | Medication Administered Route should be recorded, unless Medication Administered Prior to this Unit's EMS Care is "Yes". |

eMedications.05

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.05 – Medication Dosage | | |

**Definition**

The dose or amount of the medication administered to the patient.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Decimal Total-Digits: 9 Fraction-Digits: 3

**Comments**

KEMSIS: Kansas does not allow NEMSIS Not Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Dosage is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Dosage has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e147 | Warning | Medication Dosage should be recorded, unless Medication Administered Prior to this Unit's EMS Care is "Yes". |

eMedications.06

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.06 – Medication Dosage Units | | |

**Definition**

The unit of medication dosage administered to the patient.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3706001 | | Grams (gms) | |
|  | |  | |
| 3706003 | | Inches (in) | |
|  | |  | |
| 3706005 | | International Units (IU) | |
|  | |  | |
| 3706007 | | Keep Vein Open (kvo) | |
|  | |  | |
| 3706009 | | Liters (l) | |
|  | |  | |
| 3706013 | | Metered Dose (MDI) | |
|  | |  | |
| 3706015 | | Micrograms (mcg) | |
|  | |  | |
| 3706017 | | Micrograms per Kilogram per Minute (mcg/kg/min) | |
|  | |  | |
| 3706019 | | Milliequivalents (mEq) | |
|  | |  | |
| 3706021 | | Milligrams (mg) | |
|  | |  | |
| 3706023 | | Milligrams per Kilogram Per Minute (mg/kg/min) | |
|  | |  | |
| 3706025 | | Milliliters (ml) | |
|  | |  | |
| 3706027 | | Milliliters per Hour (ml/hr) | |
|  | |  | |
| 3706029 | | Other | |
|  | |  | |
| 3706031 | | Centimeters (cm) | |
|  | |  | |
| 3706033 | | Drops (gtts) | |
|  | |  | |
| 3706035 | | Liters Per Minute (LPM [gas]) | |
|  | |  | |
| 3706037 | | Micrograms per Minute (mcg/min) | |
|  | |  | |
| 3706039 | | Milligrams per Kilogram (mg/kg) | |
|  | |  | |
| 3706041 | | Milligrams per Minute (mg/min) | |
|  | |  | |
| 3706043 | | Puffs | |
|  | |  | |
| 3706045 | | Units per Hour (units/hr) | |
|  | |  | |
| 3706047 | | Micrograms per Kilogram (mcg/kg) | |
|  | |  | |
| 3706049 | | Units | |
|  | |  | |
| 3706051 | | Units per Kilogram per Hour (units/kg/hr) | |
|  | |  | |
| 3706053 | | Units per Kilogram (units/kg) | |
|  | |  | |
| 3706055 | | Milligrams per Hour (mg/hr) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Dosage Units is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Dosage Units has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e148 | Warning | Medication Dosage Units should be recorded, unless Medication Administered Prior to this Unit's EMS Care is "Yes". |

eMedications.07

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.07 – Response to Medication | | |

**Definition**

The patient’s response to the medication.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9916001 | | Improved | |
|  | |  | |
| 9916003 | | Unchanged | |
|  | |  | |
| 9916005 | | Worse | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Response to Medication is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Response to Medication has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e056 | Warning | Response to Medication required when a medication was given during this Unit's EMS care |

eMedications.08

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.08 – Medication Complication | | |

**Definition**

Any complication (abnormal effect on the patient) associated with the administration of the medication to the patient by EMS.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 3708001 | Altered Mental Status |
|  |  |  |
|  | 3708003 | Apnea |
|  |  |  |
|  | 3708005 | Bleeding |
|  |  |  |
|  | 3708007 | Bradycardia |
|  |  |  |
|  | 3708009 | Bradypnea |
|  |  |  |
|  | 3708011 | Diarrhea |
|  |  |  |
|  | 3708013 | Extravasation |
|  |  |  |
|  | 3708015 | Hypertension |
|  |  |  |
|  | 3708017 | Hyperthermia |
|  |  |  |
|  | 3708019 | Hypotension |
|  |  |  |
|  | 3708021 | Hypothermia |
|  |  |  |
|  | 3708023 | Hypoxia |
|  |  |  |
|  | 3708025 | Injury |
|  |  |  |
|  | 3708029 | Nausea |
|  |  |  |
|  | 3708031 | None |
|  |  |  |
|  | 3708033 | Other |
|  |  |  |
|  | 3708035 | Respiratory Distress |
|  |  |  |
|  | 3708037 | Tachycardia |
|  |  |  |
|  | 3708039 | Tachypnea |
|  |  |  |
|  | 3708041 | Vomiting |
|  |  |  |
|  | 3708043 | Itching |
|  |  |  |
|  | 3708045 | Urticaria |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Complication is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Complication has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Medication Complication has a Not Value, no other value should be recorded. |
| nemSch\_e149 | Warning | When Medication Complication is "None", no other value should be recorded. |
| ks\_e057 | Warning | Medication Complication required when a medication was given during this Unit's EMS care. |

eMedications.09

|  |
| --- |
| Kansas |
| eMedications.09 – Medication Crew (Healthcare Professionals) ID | |

**Definition**

|  |  |  |
| --- | --- | --- |
| |  |  | | --- | --- | | |  | | --- | | The statewide assigned ID number of the EMS crew member giving the treatment to the patient. | | |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length:2 Max-Length: 50

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: How should the state ID for an EMS professional be record when working on an event in 2 states. The ID used would typically be based on the EMS agency's state license specific to each EMS professional. Used for eProcedures.09 (Procedure Crew Members ID) as well.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Medication Crew (Healthcare Professionals) ID is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Medication Crew (Healthcare Professionals) ID has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e058 | Warning | Medication Crew ID required when a medication was given during this Unit's EMS care. |
| ks\_e059 | Warning | Medication Crew Member should be blank when the medication was given prior to this EMS Unit's care |

eMedications.10

|  |  |
| --- | --- |
| Kansas | National |
| eMedications.10 – Role/Type of Person Administering Medication | | |

**Definition**

The type (level) of EMS or Healthcare Professional Administering the Medication. For medications administered prior to EMS arrival, this may be a non-EMS healthcare professional.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9905001 | | Advanced Emergency Medical Technician (AEMT) | |
|  | |  | |
| 9905002 | | Emergency Medical Technician - Intermediate | |
|  | |  | |
| 9905003 | | Emergency Medical Responder (EMR) | |
|  | |  | |
| 9905005 | | Emergency Medical Technician (EMT) | |
|  | |  | |
| 9905007 | | Paramedic | |
|  | |  | |
| 9905019 | | Other Healthcare Professional | |
|  | |  | |
| 9905021 | | Other Non-Healthcare Professional | |
|  | |  | |
| 9905025 | | Physician | |
|  | |  | |
| 9905027 | | Respiratory Therapist | |
|  | |  | |
| 9905029 | | Student | |
|  | |  | |
| 9905031 | | Critical Care Paramedic | |
|  | |  | |
| 9905033 | | Community Paramedicine | |
|  | |  | |
| 9905035 | | Nurse Practitioner | |
|  | |  | |
| 9905037 | | Physician Assistant | |
|  | |  | |
| 9905039 | | Licensed Practical Nurse (LPN) | |
|  | |  | |
| 9905041 | | Registered Nurse | |
|  | |  | |
| 9905043 | | Patient | |
|  | |  | |
| 9905045 | | Lay Person | |
|  | |  | |
| 9905047 | | Law Enforcement | |
|  | |  | |
| 9905049 | | Family Member | |
|  | |  | |
| 9905051 | | Fire Personnel (non EMS) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to document the type of healthcare professional administering the medication.

NEMSIS: This could be auto-completed from the crew ID but is necessary to document medication administration prior to EMS arrival.

NEMSIS: State may maintain an enumerated list but must collapse to the National Standard.

NEMSIS: The category EMT-Intermediate includes EMS professionals with an "85" or "99" certification level.

NEMSIS: Added to better document the type of healthcare professional who administered the medication.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Role/Type of Person Administering Medication is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Role/Type of Person Administering Medication has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e150 | Warning | Role/Type of Person Administering Medication should be recorded, unless Medication Administered Prior to this Unit's EMS Care is "Yes". |

eMedications.11

|  |
| --- |
| Kansas |
| eMedications.11 – Medication Authorization | |

**Definition**

The type of treatment authorization obtained.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9918001 | | On-Line (Remote Verbal Order) | |
|  | |  | |
| 9918003 | | On-Scene | |
|  | |  | |
| 9918005 | | Protocol (Standing Order) | |
|  | |  | |
| 9918007 | | Written Orders (Patient Specific) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e060 | Warning | Medication Authorization is required when a medication was given during this EMS unit's care. |

eMedications.12

|  |
| --- |
| Kansas |
| eMedications.12 – Medication Authorizing Physician | |

**Definition**

The name of the authorizing physician ordering the medication administration if the order was provided by any manner other than protocol (standing order) in eMedications.11.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String minLength: 1 maxLength: 255

**Comments**

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e061 | Warning | Medication Authorizing Physician required when (eMedications.11) Medication Authorization identifies a medication was administered outside of protocols |

eNarrative.01

|  |
| --- |
| Kansas |
| eNarrative.01 – Patient Care Report Narrative | |

**Definition**

The narrative of the patient care report.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length:1 Max-Length: 10000

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Patient Care Report Narrative is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Patient Care Report Narrative has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e062 | Warning | Narrative is required on all patient contacts |

eOther.05

|  |
| --- |
| Kansas |
| eOther.05 – Suspected EMS Work Related Exposure, Injury, or Death | |

**Definition**

Indication of an EMS work related exposure, injury, or death associated with this EMS event.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9923001 | | No | |
|  | |  | |
| 9923003 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element

NEMSIS: Associated with eOther.04 (EMS Professional (Crew Member) ID)

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Suspected EMS Work Related Exposure, Injury, or Death is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Suspected EMS Work Related Exposure, Injury, or Death has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e063 | Warning | Suspected EMS Work Related Exposure, Injury, or Death is mandatory on all incident |

eOther.06

|  |
| --- |
| Kansas |
| eOther.06 – The Type of Work-Related Exposure, Injury, or Death | |

**Definition**

The type of EMS crew member work-related injury, death, or suspected exposure related to the EMS response.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 4506001 | | Death-Cardiac Arrest | |
|  | |  | |
| 4506003 | | Death-Injury Related | |
|  | |  | |
| 4506005 | | Death-Other | |
|  | |  | |
| 4506007 | | Exposure-Airborne Respiratory/Biological/Aerosolized Secretions | |
|  | |  | |
| 4506009 | | Exposure-Body Fluid Contact to Broken Skin | |
|  | |  | |
| 4506011 | | Exposure-Body Fluid Contact with Eye | |
|  | |  | |
| 4506013 | | Exposure-Body Fluid Contact with Intact Skin | |
|  | |  | |
| 4506015 | | Exposure-Body Fluid Contact with Mucosal Surface | |
|  | |  | |
| 4506017 | | Exposure-Needle Stick with Body Fluid Injection | |
|  | |  | |
| 4506019 | | Exposure-Needle Stick without Body Fluid Injection | |
|  | |  | |
| 4506021 | | Exposure-Toxin/Chemical/Hazmat | |
|  | |  | |
| 4506023 | | Injury-Lifting/Back/Musculoskeletal | |
|  | |  | |
| 4506025 | | Injury-Other | |
|  | |  | |
| 4506027 | | None | |
|  | |  | |
| 4506029 | | Other | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element

NEMSIS: Associated with eOther.04 (EMS Professional (Crew Member) ID)

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When The Type of Work-Related Injury, Death or Suspected Exposure is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When The Type of Work-Related Injury, Death or Suspected Exposure has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When The Type of Work-Related Injury, Death or Suspected Exposure has a Not Value, no other value should be recorded. |
| Ks\_e064 | Warning | The Type of Work-Related Injury, Death, or Suspected Exposure is required when (eOther.05) Suspected EMS Work Related Exposure, Injury, or Death equals "Yes" |

eOther.08

|  |
| --- |
| Kansas |
| eOther.08 – Crew Member Completing this Report | |

**Definition**

|  |  |  |
| --- | --- | --- |
| |  |  | | --- | --- | | |  | | --- | | The statewide assigned ID number of the EMS crew member which completed this patient care report. | | |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 50

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element

NEMSIS: If the EMS Professional has a specific ID associated with two states, the ID used would typically be based on the EMS Agencies state license.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Crew Member Completing this Report is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Crew Member Completing this Report has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e065 | Warning | Crew Member Completing this Report is Mandatory on all PCRs |

eOutcome.01

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.01 – Emergency Department Disposition | | |

**Definition**

|  |
| --- |
| The known disposition of the patient from the Emergency Department (ED). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 01 | | Discharged to home or self care (routine discharge) | |
|  | |  | |
| 02 | | Discharged/transferred to another short term general hospital for inpatient care | |
|  | |  | |
| 03 | | Discharged/transferred to a skilled nursing facility (SNF) | |
|  | |  | |
| 04 | | Discharged/transferred to an intermediate care facility (ICF) | |
|  | |  | |
| 05 | | Discharged/transferred to another type of institution not defined elsewhere in this code list | |
|  | |  | |
| 06 | | Discharged/transferred to home under care of organized home health service organization in anticipation of covered skills care | |
|  | |  | |
| 07 | | Left against medical advice or discontinued care | |
|  | |  | |
| 09 | | Admitted as an inpatient to this hospital. | |
|  | |  | |
| 20 | | Deceased/Expired (or did not recover - Religious Non Medical Health Care Patient) | |
|  | |  | |
| 21 | | Discharged/transferred to court/law enforcement | |
|  | |  | |
| 30 | | Still a patient or expected to return for outpatient services. | |
|  | |  | |
| 43 | | Discharged/transferred to a Federal Health Care Facility (e.g., VA or federal health care facility) | |
|  | |  | |
| 50 | | Discharged/transferred to Hospice - home. | |
|  | |  | |
| 51 | | Discharged/transferred to Hospice - medical facility | |
|  | |  | |
| 61 | | Discharged/transferred within this institution to a hospital based Medicare approved swing bed. | |
|  | |  | |
| 62 | | Discharged/transferred to a inpatient rehabilitation facility including distinct part units of a hospital. | |
|  | |  | |
| 63 | | Discharged/transferred to long term care hospitals | |
|  | |  | |
| 64 | | Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare | |
|  | |  | |
| 65 | | Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital. | |
|  | |  | |
| 66 | | Discharged/transferred to a Critical Access Hospital (CAH). | |
|  | |  | |
| 70 | | Discharged/transferred to another type of health care institution not defined elsewhere in the code list. | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

**Comments**

NEMSIS: The list of values and codes is based on and in compliance with the Medicare Claims Processing Manual Chapter 25 Completing and Processing the Form CMS-1450 Data Set, referencing the Uniform Bill - Form CMS-1450 (UB-04) and the FL 17 - Patient Discharge Status Required. (For all Part A inpatient, SNF, hospice, home health agency (HHA) and outpatient hospital services.)

NEMSIS: This code indicates the patient's status as of the "Through" date of the billing period (FL 6).

NEMSIS: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1104CP.pdf> Search for: "FL 17 – Patient Status"

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Emergency Department Disposition is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Emergency Department Disposition has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.02

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.02 – Hospital Disposition | | |

**Definition**

|  |
| --- |
| The known disposition of the patient from the hospital, if admitted. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 01 | | Discharged to home or self care (routine discharge) | |
|  | |  | |
| 02 | | Discharged/transferred to another short term general hospital for inpatient care | |
|  | |  | |
| 03 | | Discharged/transferred to a skilled nursing facility (SNF) | |
|  | |  | |
| 04 | | Discharged/transferred to an intermediate care facility (ICF) | |
|  | |  | |
| 05 | | Discharged/transferred to another type of institution not defined elsewhere in this code list | |
|  | |  | |
| 06 | | Discharged/transferred to home under care of organized home health service organization in anticipation of covered skills care | |
|  | |  | |
| 07 | | Left against medical advice or discontinued care | |
|  | |  | |
| 20 | | Deceased/Expired (or did not recover - Religious Non Medical Health Care Patient) | |
|  | |  | |
| 21 | | Discharged/transferred to court/law enforcement | |
|  | |  | |
| 30 | | Still a patient or expected to return for outpatient services. | |
|  | |  | |
| 43 | | Discharged/transferred to a Federal Health Care Facility (e.g., VA or federal health care facility) | |
|  | |  | |
| 50 | | Discharged/transferred to Hospice - home. | |
|  | |  | |
| 51 | | Discharged/transferred to Hospice - medical facility | |
|  | |  | |
| 61 | | Discharged/transferred within this institution to a hospital based Medicare approved swing bed. | |
|  | |  | |
| 62 | | Discharged/transferred to a inpatient rehabilitation facility including distinct part units of a hospital. | |
|  | |  | |
| 63 | | Discharged/transferred to long term care hospitals | |
|  | |  | |
| 64 | | Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare | |
|  | |  | |
| 65 | | Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital. | |
|  | |  | |
| 66 | | Discharged/transferred to a Critical Access Hospital (CAH). | |
|  | |  | |
| 70 | | Discharged/transferred to another type of health care institution not defined elsewhere in the code list. | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

**Comments**

NEMSIS: The list of values and codes is based on and in compliance with the Medicare Claims Processing Manual Chapter 25 Completing and Processing the Form CMS-1450 Data Set, referencing the Uniform Bill - Form CMS-1450 (UB-04) and the FL 17 - Patient Discharge Status Required. (For all Part A inpatient, SNF, hospice, home health agency (HHA) and outpatient hospital services.)

NEMSIS: <https://www.cms.gov/transmittals/downloads/R1104CP.pdf> Page 35-36

NEMSIS: Codes are available from Medicare contractors and the National Uniform Billing company (NUBC [http://www.nubc.org](http://www.nubc.org/)) via the NUBC's Official UB-04 Data Specifications Manual.

NEMSIS: Contractor site, Knowledge Trek: <http://www.ub04.net/downloads/Medicare_Pub_Ch_25.pdf> Please reference the section "FL 17 - Patient Status" found on page 23-25 of 126.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Hospital Disposition is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Hospital Disposition has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.09

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.09 – Emergency Department Procedures | | |

**Definition**

|  |
| --- |
| The procedures performed on the patient during the emergency department visit. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9A-HJ-NP-Z]{3,7}

**Comments**

NEMSIS: ICD-10-PCS has a seven character alphanumeric code structure.

NEMSIS: Each character contains up to 34 possible values.

NEMSIS: Each value represents a specific option for the general character definition (e.g., stomach is one of the values for the body part character).

NEMSIS: The ten digits 0-9 and the 24 letters A-H,J-N and P-Z may be used in each character.

NEMSIS: The letters O and I are not used in order to avoid confusion with the digits 0 and 1.

Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

NEMSIS: Added to better evaluate EMS care.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Emergency Department Procedures is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Emergency Department Procedures has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.10

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.10 – Emergency Department Diagnosis | | |

**Definition**

|  |
| --- |
| The practitioner's description of the condition or problem for which Emergency Department services were provided. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

Pattern [A-Z][0-9][0-9A-Z]((\.[0-9A-Z]{1,4})?)

**Comments**

NEMSIS: Code list is represented in ICD-10-CM: Diagnosis Codes.  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

NEMSIS: Added to better evaluate EMS care.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Emergency Department Diagnosis is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Emergency Department Diagnosis has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Emergency Department Diagnosis has a Not Value, no other value should be recorded. |

eOutcome.11

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.11 – Date/Time of Hospital Admission | | |

**Definition**

|  |
| --- |
| The date and time the patient was admitted to the hospital. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

NEMSIS: Added to better evaluate EMS care.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time of Hospital Admission is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time of Hospital Admission has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.12

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.12 – Hospital Procedures | | |

**Definition**

|  |
| --- |
| Hospital Procedures performed on the patient during the hospital admission. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9A-HJ-NP-Z]{3,7}

**Comments**

NEMSIS: ICD-10-PCS has a seven character alphanumeric code structure. Each character contains up to 34 possible values. Each value represents a specific option for the general character definition (e.g., stomach is one of the values for the body part character). The ten digits 0-9 and the 24 letters A-H,J-N and P-Z may be used in each character. The letters O and I are not used in order to avoid confusion with the digits 0 and 1.  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

NEMSIS: Added to better evaluate EMS care.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Hospital Procedures is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Hospital Procedures has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.13

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.13 – Hospital Diagnosis | | |

**Definition**

|  |
| --- |
| Hospital Procedures performed on the patient during the hospital admission. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

Pattern [A-Z][0-9][0-9A-Z]((\.[0-9A-Z]{1,4})?)

**Comments**

NEMSIS: Code list is represented in ICD-10-CM: Diagnosis Codes.  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

NEMSIS: Added to better evaluate EMS care.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Hospital Diagnosis is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Hospital Diagnosis has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Hospital Diagnosis has a Not Value, no other value should be recorded. |

eOutcome.16

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.16 – Date/Time of Hospital Discharge | | |

**Definition**

|  |
| --- |
| The date the patient was discharged from the hospital. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

NEMSIS: Added to better evaluate EMS care.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time of Hospital Discharge is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time of Hospital Discharge has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.18

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.18 – Date/Time of Emergency Department Admission | | |

**Definition**

|  |
| --- |
| The date and time the patient was admitted to the emergency department. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time of Emergency Department Admission is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time of Emergency Department Admission has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.19

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.19 – Date/Time Emergency Department Procedure Performed | | |

**Definition**

|  |
| --- |
| The date/time the emergency department procedure was performed on the patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Emergency Department Procedure Performed is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional) |
| nemSch\_e002 | Error | When Date/Time Emergency Department Procedure Performed has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eOutcome.20

|  |  |
| --- | --- |
| Kansas | National |
| eOutcome.20 – Date/Time Hospital Procedure Performed | | |

**Definition**

|  |
| --- |
| The date/time the hospital procedure was performed on the patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Hospital Procedure Performed is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time Hospital Procedure Performed has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

ePatient.02

|  |
| --- |
| Kansas |
| ePatient.02 – Last Name | |

**Definition**

|  |
| --- |
| The patient’s last (family) name. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

String Min-Length: 1 Max-Length: 60

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for these elements.

NEMSIS: Pertinent negatives accepted with option of "Unable to Complete" or "Refused".

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_001 | Error | When Last Name is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Last Name has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Last Name has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e066 | Warning | Patient's Last Name required when (eDisposition.27) Unit Disposition identifies Patient Contact Made |

ePatient.03

|  |
| --- |
| Kansas |
| ePatient.03 – First Name | |

**Definition**

|  |
| --- |
| The patient’s first (given) name. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recomended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

String Min-Length: 1 Max-Length: 50

**Comments**

NEMSIS: Pertinent negatives accepted with option of "Unable to Complete" or "Refused".

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When First Name is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When First Name has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When First Name has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e067 | Warning | Patient's First Name or a pertinent negative is required when (eDisposition.27) Unit Disposition identifies Patient Contact Made |

ePatient.05

|  |
| --- |
| Kansas |
| ePatient.05 – Patient’s Home Address | |

**Definition**

|  |
| --- |
| Patient’s address of residence. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801023 – Unable to Complete

**Data Type**

String Min-Length: 1 Max-Length: 255

**Comments**

NEMSIS: This is a CMS standard. According to the Medicare Claims Processing Manual, Chapter 15 - Ambulance, Ambulance suppliers bill using CMS-1500 form or CMS-1450 form for institution-based ambulance providers. This standard adheres to CMS-1500 and 1450.

NEMSIS: This element allows for a two line documentation of the address. For out of country addresses the second line should be used to document, city, country, postal code and any other pertinent information.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Patient's Home Address is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e008 | Error | When Patient's Home Address has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e068 | Warning | Patient's Home Address required when (eDisposition.27) Unit Disposition identifies Patient Contact Made and Alternate Home Residence is Blank |

ePatient.06

|  |
| --- |
| Kansas |
| ePatient.06 – Patient’s Home City | |

**Definition**

|  |
| --- |
| The patient’s primary city or township of residence. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801023 – Unable to Complete

**Data Type**

**Comments**

NEMSIS: City codes are based on GNIS Feature Class. The primary Feature Class to use is "Civil" with "Populated Place" and "Military" code as additional options.  
Definitions for each GNIS City Feature Class can be found on the GNIS Codes website.  
GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Patient's Home City is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e008 | Error | When Patient's Home City has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| Ks\_e069 | Warning | Patient Home City required when (ePatient.05) Patient's Home Address is not blank |

ePatient.07

|  |  |
| --- | --- |
| Kansas | National |
| ePatient.07 – Patient’s Home County | | |

**Definition**

|  |
| --- |
| The patient’s home county or parish of residence. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9]{5}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Based on the ANSI Code Single Choice based on the County Name but stored as the ANSI code (combined 5 digit State and County codes) Should be required if there is a patient associated with the event.  
GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Patient's Home County is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Patient's Home County has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e057 | Warning | Patient's Home County should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| nemSch\_e058 | Warning | Patient's Home County should belong within the Patient's Home State. |
| Ks\_e070 | Warning | Patient's Home County required when (ePatient.05) Patient's Home Address is not blank. |

ePatient.08

|  |  |
| --- | --- |
| Kansas | National |
| ePatient.08 – Patient’s Home State | | |

**Definition**

|  |
| --- |
| The state, territory, or province where the patient resides. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: The ANSI Code Selection by text but stored as ANSI code.  
GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Patient's Home State is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Patient's Home State has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e059 | Warning | Patient's Home State should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| ks\_e071 | Warning | Patient's Home State required when (ePatient.05) Patient's Home Address is not blank |

ePatient.09

|  |  |
| --- | --- |
| Kansas | National |
| ePatient.09 – Patient’s Home ZIP Code | | |

**Definition**

|  |
| --- |
| The patient’s ZIP code of residence. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9]{5}|[0-9]{5}-[0-9]{4}|[0-9]{5}-[0-9]{5}|[A-Z][0-9][A-Z] [0-9][A-Z][0-9]

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: ZIP Codes Product Website: <https://www.zipcodedownload.com/Products/Product/Z5Commercial/Standard/Overview/>   
Product: USA - 5-digit ZIP Code Database, Commercial Edition

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Patient's Home ZIP Code is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Patient's Home ZIP Code has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e060 | Warning | Patient's Home ZIP Code should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| ks\_e072 | Warning | Patient's Home Zip Code required when (ePatient.05) Patient's Home Address is not blank. |

ePatient.12

|  |
| --- |
| Kansas |
| ePatient.12 – Social Security Number | |

**Definition**

|  |
| --- |
| The patient’s social security number |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

date Min-Inclusive: 1890-01-01 Max-Inclusive: 2050-01-01

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Social Security Number is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e008 | Error | When Social Security Number has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| Ks\_e073 | Warning | Social Security Number required when (eDisposition.28) Patient Evaluation/Care equals patient evaluated and care provided |

ePatient.13

|  |  |
| --- | --- |
| Kansas | National |
| ePatient.13 - Gender | | |

**Definition**

|  |
| --- |
| The patient’s gender. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9906001 | | Female | |
|  | |  | |
| 9906003 | | Male | |
|  | |  | |
| 9906007 | | Female-to-Male, Transgender Male | |
|  | |  | |
| 9906009 | | Male-to-Female, Transgender Female | |
|  | |  | |
| 9906011 | | Other, neither exclusively male or female | |
|  | |  | |
| 9906005 | | Unknown (Unable to Determine) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Code list referenced from: <https://www.healthit.gov/isa/sex-birth-sexual-orientation-and-gender-identity>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Gender is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Gender has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e061 | Warning | Gender should be recorded when Patient Evaluation/Care is “Patient Evaluated and Care Provided”. |
| ks\_074 | Warning | Patient's Gender required when (eDisposition.27) Unit Disposition identifies Patient was evaluated |

ePatient.14

|  |  |
| --- | --- |
| Kansas | National |
| ePatient.14 - Race | | |

**Definition**

|  |
| --- |
| The patient’s race as defined by the OMB (US Office of Management and Budget). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2514001 | | American Indian or Alaska Native | |
|  | |  | |
| 2514003 | | Asian | |
|  | |  | |
| 2514005 | | Black or African American | |
|  | |  | |
| 2514007 | | Hispanic or Latino | |
|  | |  | |
| 2514009 | | Native Hawaiian or Other Pacific Islander | |
|  | |  | |
| 2514011 | | White | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: OMB requirements are provided at: https://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-089.html. Using single multiple choice question methodology to improve the completion of ethnicity information.  
Ethnicity (Version 2.2.1: E06\_13) has been merged with this data element and retired.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Race is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Race has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Race has a Not Value, no other value should be recorded. |
| nemSch\_e062 | Warning | Race should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| ks\_e075 | Warning | Patient's Race required when (eDisposition.27) Unit Disposition identifies Patient Contact Made |

ePatient.15

|  |  |
| --- | --- |
| Kansas | National |
| ePatient.15 - Age | | |

**Definition**

|  |
| --- |
| The patient’s age (either calculated from date of birth or best approximation) |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Integer Min-Inclusive: 1 Max-Inclusive: 120

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Age is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Age has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e063 | Warning | Age should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |

ePatient.16

|  |  |
| --- | --- |
| Kansas | National |
| ePatient.16 – Age Units | | |

**Definition**

|  |
| --- |
| The unit used to define the patient’s age. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2516001 | | Days | |
|  | |  | |
| 2516003 | | Hours | |
|  | |  | |
| 2516005 | | Minutes | |
|  | |  | |
| 2516007 | | Months | |
|  | |  | |
| 2516009 | | Years | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Age Units is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Age Units has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e064 | Warning | Age Units should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| nemSch\_e065 | Warning | Age Units should be recorded when Age is recorded. |

ePatient.17

|  |
| --- |
| Kansas |
| ePatient.17 – Date of Birth | |

**Definition**

|  |
| --- |
| The patient’s date of birth |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

date Min-Inclusive: 1890-01-01 Max-Inclusive: 2050-01-01

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date of Birth is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date of Birth has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Date of Birth has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e076 | Warning | Date of Birth or a pertinent negative is required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated |

ePayment.01

|  |  |
| --- | --- |
| Kansas | National |
| ePayment.01 – Primary Method of Payment | | |

**Definition**

|  |
| --- |
| The primary method of payment or type of insurance associated with this EMS encounter. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2601001 | | Insurance | |
|  | |  | |
| 2601003 | | Medicaid | |
|  | |  | |
| 2601005 | | Medicare | |
|  | |  | |
| 2601007 | | Not Billed (for any reason) | |
|  | |  | |
| 2601009 | | Other Government | |
|  | |  | |
| 2601011 | | Self Pay | |
|  | |  | |
| 2601013 | | Workers Compensation | |
|  | |  | |
| 2601015 | | Payment by Facility | |
|  | |  | |
| 2601017 | | Contracted Payment | |
|  | |  | |
| 2601019 | | Community Network | |
|  | |  | |
| 2601021 | | No Insurance Identified | |
|  | |  | |
| 2601023 | | Other Payment Option | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

No

**Data Type**

None

**Comments**

None

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Primary Method of Payment is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Primary Method of Payment has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e066 | Warning | Primary Method of Payment should be recorded when Transport Disposition is "Transport by This EMS Unit...". |

ePayment.50

|  |  |
| --- | --- |
| Kansas | National |
| ePayment.50 – CMS Service Level | | |

**Definition**

|  |
| --- |
| The CMS service level for this EMS encounter. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2650001 | | ALS, Level 1 | |
|  | |  | |
| 2650003 | | ALS, Level 1 Emergency | |
|  | |  | |
| 2650005 | | ALS, Level 2 | |
|  | |  | |
| 2650007 | | BLS | |
|  | |  | |
| 2650009 | | BLS, Emergency | |
|  | |  | |
| 2650011 | | Fixed Wing (Airplane) | |
|  | |  | |
| 2650013 | | Paramedic Intercept | |
|  | |  | |
| 2650015 | | Specialty Care Transport | |
|  | |  | |
| 2650017 | | Rotary Wing (Helicopter) | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

No

**Data Type**

None

**Comments**

None

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When CMS Service Level is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When CMS Service Level has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eProcedures.01

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.01 – Date/Time Procedure Performed | | |

**Definition**

|  |
| --- |
| The date/time the procedure was performed on the patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Inclusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |   Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | | | |
|  |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Procedure Performed is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time Procedure Performed has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e151 | Warning | Date/Time Procedure Performed should be recorded, unless Procedure Performed Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e152 | Warning | Date/Time Procedure Performed should not be earlier than Unit Notified by Dispatch Date/Time, unless Procedure Performed Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e153 | Warning | Date/Time Procedure Performed should not be earlier than Arrived at Patient Date/Time, unless Procedure Performed Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e154 | Warning | Date/Time Procedure Performed should not be later than Destination Patient Transfer of Care Date/Time. |
| nemSch\_e155 | Warning | Date/Time Procedure Performed should not be later than Unit Back in Service Date/Time. |
| nemSch\_e156 | Warning | Date/Time Procedure Performed should not be later than Arrived at Patient Date/Time when Procedure Performed Prior to this Unit's EMS Care is "Yes". |

eProcedures.02

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.02 – Procedure Performed Prior to this EMS Unit’s EMS Care | | |

**Definition**

|  |
| --- |
| Indicates that the procedure which was performed and documented was performed prior to this EMS units care. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9923001 | | No | |
|  | |  | |
| 9923003 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This is the NEMSIS Version 3 method to document prior aid.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Procedure Performed Prior to this Unit's EMS Care is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Procedure Performed Prior to this Unit's EMS Care has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e077 | Warning | Procedure Performed PTA required when either Date/Time Procedure Performed or Procedure is not blank |

eProcedures.03

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.03 – Procedure | | |

**Definition**

|  |
| --- |
| The procedure performed on the patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  |  | |
|  |  | |
|  | |  | |
|  | |  | |
|  | |  | |

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801001 – Contradiction Noted 8801003 – Denied by Order 8801019 – Refused

8801023 – Unable to Complete 8801027 – Order Criteria Not Met

**Data Type**

Integer Max-Inclusive: 999999999999999 Min-Inclusive: 100000

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Procedures which are recorded as a Vital Sign do not have to be documented in the Procedure Section.  
Code list is represented in SNOMEDCT. Reference the NEMSIS Suggested Lists at: <https://nemsis.org/technical-resources/version-3/version-3-resource-repository/>

NEMSIS: SNOMEDCT  
Website: <http://www.nlm.nih.gov/research/umls/Snomed/snomed_main.html>   
Product: Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Procedure is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Procedure has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e007 | Error | When Procedure has a Pertinent Negative, it should have a value and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e157 | Warning | Procedure should be recorded when a procedure is performed. |

eProcedures.04

|  |
| --- |
| Kansas |
| eProcedures.04 – Size of Procedure Equipment | |

**Definition**

|  |
| --- |
| The size of the equipment used in the procedure on the patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

string Min-Length: 1 Max-Length: 20

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e078 | Warning | Size of Procedure Equipment required when the procedure is a device with multiple sizes |

eProcedures.05

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.05 – Number of Procedure Attempts | | |

**Definition**

|  |
| --- |
| The number of attempts taken to complete a procedure or intervention regardless of success. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Integer Min-Inclusive: 1 Max-Inclusive: 10

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Number of Procedure Attempts is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Number of Procedure Attempts has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e079 | Warning | Number of Procedure Attempts Required when procedure has the potential of multiple attempts. |

eProcedures.06

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.06 – Procedure Successful | | |

**Definition**

|  |
| --- |
| Indicates that this individual procedure attempt which was performed on the patient was successful. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9923001 | | No | |
|  | |  | |
| 9923003 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Procedure Successful is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Procedure Successful has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e080 | Warning | Procedure Successful required when a procedure was performed |

eProcedures.07

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.07 – Procedure Complication | | |

**Definition**

|  |
| --- |
| Indicates that this individual procedure attempt which was performed on the patient was successful. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3907001 | | Altered Mental Status | |
|  | |  | |
| 3907003 | | Apnea | |
|  | |  | |
| 3907005 | | Bleeding | |
|  | |  | |
| 3907007 | | Bradypnea | |
|  | |  | |
| 3907009 | | Diarrhea | |
|  | |  | |
| 3907011 | | Esophageal Intubation-immediately | |
|  | |  | |
| 3907013 | | Esophageal Intubation-other | |
|  | |  | |
| 3907015 | | Extravasation | |
|  | |  | |
| 3907017 | | Hypertension | |
|  | |  | |
| 3907019 | | Hyperthermia | |
|  | |  | |
| 3907021 | | Hypotension | |
|  | |  | |
| 3907023 | | Hypothermia | |
|  | |  | |
| 3907025 | | Hypoxia | |
|  | |  | |
| 3907027 | | Injury | |
|  | |  | |
| 3907031 | | Nausea | |
|  | |  | |
| 3907033 | | None | |
|  | |  | |
| 3907035 | | Other | |
|  | |  | |
| 3907039 | | Respiratory Distress | |
|  | |  | |
| 3907041 | | Tachycardia | |
|  | |  | |
| 3907043 | | Tachypnea | |
|  | |  | |
| 3907045 | | Vomiting | |
|  | |  | |
| 3907047 | | Bradycardia | |
|  | |  | |
| 3907049 | | Itching | |
|  | |  | |
| 3907051 | | Urticaria | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Procedure Complication is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Procedure Complication has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Procedure Complication has a Not Value, no other value should be recorded. |
| nemSch\_e158 | Warning | When Procedure Complication is "None", no other value should be recorded. |
| ks\_e081 | Warning | Procedure Complication required when a procedure is performed. |

eProcedures.08

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.08 – Response to Procedure | | |

**Definition**

|  |
| --- |
| The patient’s response to the procedure. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9916001 | | Improved | |
|  | |  | |
| 9916003 | | Unchanged | |
|  | |  | |
| 9916005 | | Worse | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Response to Procedure is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Response to Procedure has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_082 | Warning | Response to Procedure required on certain procedures |

eProcedures.09

|  |
| --- |
| Kansas |
| eProcedures.09 – Procedure Crew Members ID | |

**Definition**

|  |
| --- |
| The statewide assigned ID number of the EMS crew member performing the procedure on the patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 50

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: For an incident that occurs in multiple states, the certification ID number the EMS agency would typically use is based on the EMS agency's state license specific to each EMS professional. If the incident needs to be reported to each state, then the EMS Agency Number for each state should be submitted as well as the certification ID numbers for each EMS professional on the unit.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Procedure Crew Members ID is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Procedure Crew Members ID has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e083 | Warning | Procedure Crew ID required when a procedure was performed by this EMS unit |
| ks\_e084 | Warning | Procedure Crew member should be blank when the procedure occurred prior to this EMS Unit's care. |

eProcedures.10

|  |  |
| --- | --- |
| Kansas | National |
| eProcedures.10 – Role/Type of Person Performing the Procedure | | |

**Definition**

|  |
| --- |
| The type (level) of EMS or Healthcare Professional performing the procedure. For procedures performed prior to EMS arrival, this may be a non-EMS healthcare professional. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9905001 | | Advanced Emergency Medical Technician (AEMT) | |
|  | |  | |
| 9905002 | | Emergency Medical Technician - Intermediate | |
|  | |  | |
| 9905003 | | Emergency Medical Responder (EMR) | |
|  | |  | |
| 9905005 | | Emergency Medical Technician (EMT) | |
|  | |  | |
| 9905007 | | Paramedic | |
|  | |  | |
| 9905019 | | Other Healthcare Professional | |
|  | |  | |
| 9905021 | | Other Non-Healthcare Professional | |
|  | |  | |
| 9905025 | | Physician | |
|  | |  | |
| 9905027 | | Respiratory Therapist | |
|  | |  | |
| 9905029 | | Student | |
|  | |  | |
| 9905031 | | Critical Care Paramedic | |
|  | |  | |
| 9905033 | | Community Paramedicine | |
|  | |  | |
| 9905035 | | Nurse Practitioner | |
|  | |  | |
| 9905037 | | Physician Assistant | |
|  | |  | |
| 9905039 | | Licensed Practical Nurse (LPN) | |
|  | |  | |
| 9905041 | | Registered Nurse | |
|  | |  | |
| 9905043 | | Patient | |
|  | |  | |
| 9905045 | | Lay Person | |
|  | |  | |
| 9905047 | | Law Enforcement | |
|  | |  | |
| 9905049 | | Family Member | |
|  | |  | |
| 9905051 | | Fire Personnel (non EMS) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to document the type of healthcare professional administering the medication. This could be auto-completed from the crew ID but is necessary to document medication administration prior to EMS arrival. State may maintain an enumerated list but must collapse to the National Standard.  
  
The category EMT-Intermediate includes EMS professionals with an "85" or "99" certification level.

NEMSIS: Added to document the type of healthcare professional performing the procedure.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Role/Type of Person Performing the Procedure is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Role/Type of Person Performing the Procedure has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e159 | Warning | Role/Type of Person Performing the Procedure should be recorded, unless Procedure Performed Prior to this Unit's EMS Care is "Yes". |

eProcedures.11

|  |
| --- |
| Kansas |
| eProcedures.11 – Procedure Authorization | |

**Definition**

|  |
| --- |
| The type of treatment authorization obtained. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9918001 | | On-Line (Remote Verbal Order) | |
|  | |  | |
| 9918003 | | On-Scene | |
|  | |  | |
| 9918005 | | Protocol (Standing Order) | |
|  | |  | |
| 9918007 | | Written Orders (Patient Specific) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| Ks\_e085 | Warning | Procedure Authorization required when a procedure was performed during this EMS unit's care. |

eProcedures.12

|  |
| --- |
| Kansas |
| eProcedures.12 – Procedure Authorizing Physician Missing | |

**Definition**

|  |
| --- |
| The name of the authorizing physician ordering the procedure, if the order was provided by any manner other than protocol (standing order) in eProcedures.11. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 255

**Comments**

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e086 | Warning | Procedure Authorizing Physician required when (eProcedures.11) Procedure Authorization identifies a procedure was performed outside of protocols |

eProcedures.13

|  |
| --- |
| Kansas |
| eProcedures.13 – Vascular Access Location | |

**Definition**

|  |
| --- |
| The location of the vascular access site attempt on the patient, if applicable. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3913001 | | Antecubital-Left | |
|  | |  | |
| 3913003 | | Antecubital-Right | |
|  | |  | |
| 3913005 | | External Jugular-Left | |
|  | |  | |
| 3913007 | | External Jugular-Right | |
|  | |  | |
| 3913009 | | Femoral-Left IV | |
|  | |  | |
| 3913011 | | Femoral-Right IV | |
|  | |  | |
| 3913013 | | Foot-Right | |
|  | |  | |
| 3913015 | | Foot-Left | |
|  | |  | |
| 3913017 | | Forearm-Left | |
|  | |  | |
| 3913019 | | Forearm-Right | |
|  | |  | |
| 3913021 | | Hand-Left | |
|  | |  | |
| 3913023 | | Hand-Right | |
|  | |  | |
| 3913025 | | Internal Jugular-Left | |
|  | |  | |
| 3913027 | | Internal Jugular-Right | |
|  | |  | |
| 3913029 | | IO-Iliac Crest-Left | |
|  | |  | |
| 3913031 | | IO-Iliac Crest-Right | |
|  | |  | |
| 3913033 | | IO-Femoral-Left Distal | |
|  | |  | |
| 3913035 | | IO-Femoral-Right Distal | |
|  | |  | |
| 3913037 | | IO-Humeral-Left | |
|  | |  | |
| 3913039 | | IO-Humeral-Right | |
|  | |  | |
| 3913041 | | IO-Tibia-Left Distal | |
|  | |  | |
| 3913043 | | IO-Sternum | |
|  | |  | |
| 3913045 | | IO-Tibia-Right Distal | |
|  | |  | |
| 3913047 | | IO-Tibia-Left Proximal | |
|  | |  | |
| 3913049 | | IO-Tibia-Right Proximal | |
|  | |  | |
| 3913051 | | Lower Extremity-Left | |
|  | |  | |
| 3913053 | | Lower Extremity-Right | |
|  | |  | |
| 3913055 | | Other Peripheral | |
|  | |  | |
| 3913057 | | Other Central (PICC, Portacath, etc.) | |
|  | |  | |
| 3913059 | | Scalp | |
|  | |  | |
| 3913061 | | Subclavian-Left | |
|  | |  | |
| 3913063 | | Subclavian-Right | |
|  | |  | |
| 3913065 | | Umbilical | |
|  | |  | |
| 3913067 | | Venous Cutdown-Left Lower Extremity | |
|  | |  | |
| 3913069 | | Venous Cutdown-Right Lower Extremity | |
|  | |  | |
| 3913071 | | Upper Arm-Left | |
|  | |  | |
| 3913073 | | Upper Arm-Right | |
|  | |  | |
| 3913075 | | Radial-Left | |
|  | |  | |
| 3913077 | | Radial-Right | |
|  | |  | |
| 3913079 | | Wrist-Left | |
|  | |  | |
| 3913081 | | Wrist-Right | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This is now associated with the Date/Time of the procedure and therefore changed to single choice. This allows the location to be documented with each procedure and attempt. If the vascular access has been established prior to EMS, this should be documented as such.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Vascular Access Location is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Vascular Access Location has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e087 | Warning | Vascular Access Location required when vascular access is performed. |

eRecord.01

|  |  |
| --- | --- |
| Kansas | National |
| eRecord.01 – Patient Care Report Number | | |

**Definition**

|  |
| --- |
| The unique number automatically assigned by the EMS agency for each Patient Care Report (PCR). This should be a unique number for the EMS agency for all of time. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 3 Max-Length: 50

**Comments**

None

**Validation Rules**

NEMSIS Mandatory Element

eRecord.02

|  |  |
| --- | --- |
| Kansas | National |
| eRecord.02 – Software Creator | | |

**Definition**

|  |
| --- |
| The name of the vendor, manufacturer, and developer who designed the application that created this record. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 50

**Comments**

NEMSIS: This is required to document the software used to generate the Patient Care Report. This is not the last software which aggregated/stored the Patient Care Report after it was sent from another software.

**Validation Rules**

NEMSIS Mandatory Element

eRecord.03

|  |  |
| --- | --- |
| Kansas | National |
| eRecord.03 – Software Name | | |

**Definition**

|  |
| --- |
| The name of the application used to create this record. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 50

**Comments**

NEMSIS: This is the EMS Agency's software, not the state or other level software which electronically received the data from the local EMS Agency.

**Validation Rules**

NEMSIS Mandatory Element

eRecord.04

|  |  |
| --- | --- |
| Kansas | National |
| eRecord.04 – Software Version | | |

**Definition**

|  |
| --- |
| The version of the application used to create this record. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 50

**Comments**

None

**Validation Rules**

NEMSIS Mandatory Element

eResponse.01

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.01 – EMS Agency Number | | |

**Definition**

|  |
| --- |
| The state-assigned provider number of the responding agency. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 15

**Comments**

NEMSIS: The EMS Agency Number in eResponse.01 can auto-populate from dAgency.02 EMS Agency Number in the demographic section.

**Validation Rules**

NEMSIS Mandatory Element

|  |  |  |
| --- | --- | --- |
| nemSch\_e011 | Warning | EMS Agency Number in the patient care report should match EMS Agency Number in the agency demographic information. |

eResponse.02

|  |
| --- |
| Kansas |
| eResponse.02 – EMS Agency Name | |

**Definition**

|  |
| --- |
| The EMS agency’s name. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 100

**Comments**

KEMSIS: This is a mandatory element in Kansas.

NEMSIS: Added to better identify the EMS Agency associated with the EMS event.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e088 | Error | EMS Agency Name is mandatory. |

eResponse.03

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.03 – Incident Number | | |

**Definition**

|  |
| --- |
| The incident number assigned by the 911 Dispatch System. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 3 Max-Length: 50

**Comments**

NEMSIS: This number can be used to associate multiple EMS responses, dispatch information, and other information to the same EMS event or patient.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Incident Number is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Incident Number has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e089 | Warning | Incident Number (assigned by dispatch) or "Not" value must be entered. |

eResponse.04

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.04 – EMS Response Number | | |

**Definition**

|  |
| --- |
| The internal EMS response number which is unique for each EMS Vehicle's (Unit) response to an incident within an EMS Agency. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 3 Max-Length: 50

**Comments**

KEMSIS: This is a mandatory element in Kansas.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e090 | Error | EMS Response Number (assigned by your agency) is mandatory. |

eResponse.05

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.05 – Type of Service Requested | | |

**Definition**

|  |
| --- |
| The type of service or category of service requested of the EMS Agency responding for this specific EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2205001 | | Emergency Response (Primary Response Area) | |
|  | |  | |
| 2205003 | | Emergency Response (Intercept) | |
|  | |  | |
| 2205009 | | Emergency Response (Mutual Aid) | |
|  | |  | |
| 2205005 | | Hospital-to-Hospital Transfer | |
|  | |  | |
| 2205015 | | Hospital to Non-Hospital Facility Transfer | |
|  | |  | |
| 2205017 | | Non-Hospital Facility to Non-Hospital Facility Transfer | |
|  | |  | |
| 2205019 | | Non-Hospital Facility to Hospital Transfer | |
|  | |  | |
| 2205007 | | Other Routine Medical Transport | |
|  | |  | |
| 2205011 | | Public Assistance | |
|  | |  | |
| 2205013 | | Standby | |
|  | |  | |
| 2205021 | | Support Services | |
|  | |  | |
| 2205023 | | Non-Patient Care Rescue/Extrication | |
|  | |  | |
| 2205025 | | Crew Transport Only | |
|  | |  | |
| 2205027 | | Transport of Organs or Body Parts | |
|  | |  | |
| 2205029 | | Mortuary Services | |
|  | |  | |
| 2205031 | | Mobile Integrated Health Care Encounter | |
|  | |  | |
| 2205033 | | Evaluation for Special Referral/Intake Programs | |
|  | |  | |
| 2205035 | | Administrative Operations | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

NEMSIS: Values for "911 Response (Scene)", "Intercept", and "Mutual Aid" have been relabeled to start with "Emergency Response" to more easily identify these options.

NEMSIS: "Interfacility Transport" was relabeled to "Hospital-to-Hospital Transfer" to be more accurate; options for "Sending Hospital Staff" and "Critical or Specialty Care" were added to better track resource utilization at local and state levels and support reimbursement levels.

NEMSIS: "Medical Transport" was relabeled to "Other Medical Needs Transport" to cover any other medical transports such as transports to and from dialysis, doctor appointments, return home, or nursing homes.

NEMSIS: Values added to consolidate types of service previously captured in "Primary Role of Unit" and eDisposition.12 as found in V3.4.0.

NEMSIS: Additional values added to reflect emerging service types.

**Validation Rules**

NEMSIS Mandatory Element

eResponse.06

|  |
| --- |
| Kansas |
| eResponse.06 – Standby Purpose | |

**Definition**

|  |
| --- |
| The main reason the EMS Unit is on Standby as the Primary Type of Service for the EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2206001 | | Disaster Event-Drill/Exercise | |
|  | |  | |
| 2206003 | | Disaster Event-Live Staging | |
|  | |  | |
| 2206005 | | Education | |
|  | |  | |
| 2206007 | | EMS Staging-Improve Coverage | |
|  | |  | |
| 2206009 | | Fire Support-Rehab | |
|  | |  | |
| 2206011 | | Fire Support-Standby | |
|  | |  | |
| 2206013 | | Mass Gathering-Concert/Entertainment Event | |
|  | |  | |
| 2206015 | | Mass Gathering-Fair/Community Event | |
|  | |  | |
| 2206017 | | Mass Gathering-Sporting Event | |
|  | |  | |
| 2206019 | | Other | |
|  | |  | |
| 2206021 | | Public Safety Support | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: This is a required element in Kansas.

NEMSIS: Added to document the reason for "Standby" when populated in eResponse.05 (Type of Service Requested). This information will assist in administrative analysis of EMS service delivery, special event coverage, etc.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e091 | Warning | Standby Purpose is mandatory when (eResponse.05) Type of Service Requested equals "Standby" |

eResponse.07

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.07 – Unit Transport and Equipment Capability | | |

**Definition**

|  |
| --- |
| The transport and equipment capabilities of the EMS Unit which responded to this specific EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2207011 | | Air Transport-Helicopter | |
|  | |  | |
| 2207013 | | Air Transport-Fixed Wing | |
|  | |  | |
| 2207015 | | Ground Transport (ALS Equipped) | |
|  | |  | |
| 2207017 | | Ground Transport (BLS Equipped) | |
|  | |  | |
| 2207019 | | Ground Transport (Critical Care Equipped) | |
|  | |  | |
| 2207021 | | Non-Transport-Medical Treatment (ALS Equipped) | |
|  | |  | |
| 2207023 | | Non-Transport-Medical Treatment (BLS Equipped) | |
|  | |  | |
| 2207025 | | Wheel Chair Van/Ambulette | |
|  | |  | |
| 2207027 | | Non-Transport-No Medical Equipment | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

NEMSIS: Element relabeled from "Primary Role of Unit" to "Unit Transport and Equipment Capability" to better reflect its new defined purpose and allow the deprecation of eResponse.15 "Level of Care of This Unit".

NEMSIS: V3.4.0 Non-Transport values deprecated as these are types of service and were moved to eResponse.05 "Type of Service Requested".

NEMSIS: Values have been added to better capture transport capability and available equipment. These values should be tied to the capabilities and role of the unit and not reflect the level of providers responding to an event.

NEMSIS: Supervisor clarified to Administrative Only. If the Supervisor is responding to assist, that would be considered Non-Transport. Transport separated into Air and Ground. In Version 2 there was no way to identify Air Transport.

**Validation Rules**

NEMSIS Mandatory Element

eResponse.08

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.08 – Type of Dispatch Delay | | |

**Definition**

|  |
| --- |
| The dispatch delays, if any, associated with the dispatch of the EMS unit to the EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2208001 | | Caller (Uncooperative) | |
|  | |  | |
| 2208003 | | Diversion/Failure (of previous unit) | |
|  | |  | |
| 2208005 | | High Call Volume | |
|  | |  | |
| 2208007 | | Language Barrier | |
|  | |  | |
| 2208009 | | Incomplete Address Information Provided | |
|  | |  | |
| 2208011 | | No EMS Vehicles (Units) Available | |
|  | |  | |
| 2208013 | | None/No Delay | |
|  | |  | |
| 2208015 | | Other | |
|  | |  | |
| 2208017 | | Technical Failure (Computer, Phone etc.) | |
|  | |  | |
| 2208019 | | Communication Specialist-Assignment Error | |
|  | |  | |
| 2208021 | | No Receiving MD, Bed, Hospital | |
|  | |  | |
| 2208023 | | Specialty Team Delay | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: A dispatch delay is any time delay that occurs from the time of PSAP call (eTimes.01) to the time the unit is notified by dispatch (eTimes.03).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of Dispatch Delay is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of Dispatch Delay has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Type of Dispatch Delay has a Not Value, no other value should be recorded. |
| nemSch\_e012 | Warning | When Type of Dispatch Delay is "None/No Delay", no other value should be recorded. |
| ks\_e092 | Warning | Type of Dispatch Delay required when (eResponse.05) Type of Service Requested includes "Emergency Response" |

eResponse.09

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.09 – Type of Response Delay | | |

**Definition**

|  |
| --- |
| The response delays, if any, of the EMS unit associated with the EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2209001 | | Crowd | |
|  | |  | |
| 2209003 | | Directions/Unable to Locate | |
|  | |  | |
| 2209005 | | Distance | |
|  | |  | |
| 2209007 | | Diversion (Different Incident) | |
|  | |  | |
| 2209009 | | HazMat | |
|  | |  | |
| 2209011 | | None/No Delay | |
|  | |  | |
| 2209013 | | Other | |
|  | |  | |
| 2209015 | | Rendezvous Transport Unavailable | |
|  | |  | |
| 2209017 | | Route Obstruction (e.g., Train) | |
|  | |  | |
| 2209019 | | Scene Safety (Not Secure for EMS) | |
|  | |  | |
| 2209021 | | Staff Delay | |
|  | |  | |
| 2209023 | | Traffic | |
|  | |  | |
| 2209025 | | Vehicle Crash Involving this Unit | |
|  | |  | |
| 2209027 | | Vehicle Failure of this Unit | |
|  | |  | |
| 2209029 | | Weather | |
|  | |  | |
| 2209031 | | Mechanical Issue-Unit, Equipment, etc. | |
|  | |  | |
| 2209033 | | Flight Planning | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Rendezvous Transport Unavailable added for situations where there is a wait for an EMS Transport Unit, a Ferry, Air Medical, etc. to return to service.

NEMSIS: A response delay is any time delay that occurs from the time the unit is notified by dispatch (eTimes.03) to the time the unit arrived on scene (eTimes.06).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of Response Delay is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of Response Delay has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Type of Response Delay has a Not Value, no other value should be recorded. |
| nemSch\_e013 | Warning | When Type of Response Delay is "None/No Delay", no other value should be recorded. |
| ks\_093 | Warning | Type of Response Delay is required when (eResponse.05) Type of Service Requested includes "Emergency Response" |

eResponse.10

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.10 – Type of Scene Delay | | |

**Definition**

|  |
| --- |
| The scene delays, if any, of the EMS unit associated with the EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 2210001 | Awaiting Air Unit |
|  |  |  |
|  | 2210003 | Awaiting Ground Unit |
|  |  |  |
|  | 2210005 | Crowd |
|  |  |  |
|  | 2210007 | Directions/Unable to Locate |
|  |  |  |
|  | 2210009 | Distance |
|  |  |  |
|  | 2210011 | Extrication |
|  |  |  |
|  | 2210013 | HazMat |
|  |  |  |
|  | 2210015 | Language Barrier |
|  |  |  |
|  | 2210017 | None/No Delay |
|  |  |  |
|  | 2210019 | Other |
|  |  |  |
|  | 2210021 | Patient Access |
|  |  |  |
|  | 2210023 | Safety-Crew/Staging |
|  |  |  |
|  | 2210025 | Safety-Patient |
|  |  |  |
|  | 2210027 | Staff Delay |
|  |  |  |
|  | 2210029 | Traffic |
|  |  |  |
|  | 2210031 | Triage/Multiple Patients |
|  |  |  |
|  | 2210033 | Vehicle Crash Involving this Unit |
|  |  |  |
|  | 2210035 | Vehicle Failure of this Unit |
|  |  |  |
|  | 2210037 | Weather |
|  |  |  |
|  | 2210039 | Mechanical Issue-Unit, Equipment, etc. |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: A scene delay is any time delay that occurs from the time the unit arrived on scene (eTimes.06) to the time the unit left the scene (eTimes.09).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of Scene Delay is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of Scene Delay has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Type of Scene Delay has a Not Value, no other value should be recorded. |
| nemSch\_e014 | Warning | When Type of Scene Delay is "None/No Delay", no other value should be recorded. |
| ks\_e094 | Warning | Type of Scene Delay required when (eDisposition.27) Unit Disposition identifies the unit arrived on scene. |

eResponse.11

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.11 – Type of Transport Delay | | |

**Definition**

|  |
| --- |
| The transport delays, if any, of the EMS unit associated with the EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2211001 | | Crowd | |
|  | |  | |
| 2211003 | | Directions/Unable to Locate | |
|  | |  | |
| 2211005 | | Distance | |
|  | |  | |
| 2211007 | | Diversion | |
|  | |  | |
| 2211009 | | HazMat | |
|  | |  | |
| 2211011 | | None/No Delay | |
|  | |  | |
| 2211013 | | Other | |
|  | |  | |
| 2211015 | | Rendezvous Transport Unavailable | |
|  | |  | |
| 2211017 | | Route Obstruction (e.g., Train) | |
|  | |  | |
| 2211019 | | Safety | |
|  | |  | |
| 2211021 | | Staff Delay | |
|  | |  | |
| 2211023 | | Traffic | |
|  | |  | |
| 2211025 | | Vehicle Crash Involving this Unit | |
|  | |  | |
| 2211027 | | Vehicle Failure of this Unit | |
|  | |  | |
| 2211029 | | Weather | |
|  | |  | |
| 2211031 | | Patient Condition Change (e.g., Unit Stopped) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Rendezvous Transport Unavailable added for situations where there is a wait for an EMS Transport Unit, a Ferry, Air Medical, etc.

NEMSIS: A transport delay is any time delay that occurs from the time the unit left the scene (eTimes.09) to the time the patient arrived at the destination (eTimes.10).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of Transport Delay is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of Transport Delay has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Type of Transport Delay has a Not Value, no other value should be recorded. |
| nemSch\_e015 | Warning | When Type of Transport Delay is "None/No Delay", no other value should be recorded. |
| ks\_e095 | Warning | Type of Transport Delay required when (eDisposition.30) Transport Disposition identifies a transport. |

eResponse.12

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.12 – Type of Turn-Around Delay | | |

**Definition**

|  |
| --- |
| The turn-around delays, if any, of EMS unit associated with the EMS event. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2212001 | | Clean-up | |
|  | |  | |
| 2212003 | | Decontamination | |
|  | |  | |
| 2212005 | | Distance | |
|  | |  | |
| 2212007 | | Documentation | |
|  | |  | |
| 2212009 | | ED Overcrowding / Transfer of Care | |
|  | |  | |
| 2212011 | | Equipment Failure | |
|  | |  | |
| 2212013 | | Equipment/Supply Replenishment | |
|  | |  | |
| 2212015 | | None/No Delay | |
|  | |  | |
| 2212017 | | Other | |
|  | |  | |
| 2212019 | | Rendezvous Transport Unavailable | |
|  | |  | |
| 2212021 | | Route Obstruction (e.g., Train) | |
|  | |  | |
| 2212023 | | Staff Delay | |
|  | |  | |
| 2212025 | | Traffic | |
|  | |  | |
| 2212027 | | Vehicle Crash of this Unit | |
|  | |  | |
| 2212029 | | Vehicle Failure of this Unit | |
|  | |  | |
| 2212031 | | Weather | |
|  | |  | |
| 2212033 | | EMS Crew Accompanies Patient for Facility Procedure | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Rendezvous Transport Unavailable added for situations where there is a wait for an EMS Transport Unit, a Ferry, Air Medical, etc. to return to service.

NEMSIS: If a patient is being transported by the unit, turn-around delay is any time delay that occurs from the time the patient arrived at the destination (eTimes.11) until the time the unit is back in service (eTimes.13) or unit back at the home location (eTimes.15) [whichever is the greater of the two times].

NEMSIS: If no patient is being transported by the unit, turn-around delay is any time delay that occurs from the time the unit arrived on scene (eTimes.06) until the unit is back in service (eTimes.13) or the unit back at the home location (eTimes.15) [whichever is the greater of the two times].

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Type of Turn-Around Delay is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Type of Turn-Around Delay has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Type of Turn-Around Delay has a Not Value, no other value should be recorded. |
| nemSch\_e016 | Warning | When Type of Turn-Around Delay is "None/No Delay", no other value should be recorded. |
| ks\_e096 | Warning | Type of Turn-Around Delay required on all incidents. |

eResponse.13

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.13 – EMS Vehicle (Unit) Number | | |

**Definition**

|  |
| --- |
| The unique physical vehicle number of the responding unit. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 25

**Comments**

NEMSIS: This is recommended to be the State Vehicle Permit Number if unique to the vehicle. If the vehicle is not licensed by the state, this should be a unique number only associated with a specific vehicle.

NEMSIS: This element should be populated from dVehicle.01 - Unit/Vehicle Number.

**Validation Rules**

NEMSIS Mandatory Element

eResponse.14

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.14 – EMS Unit Call Sign | | |

**Definition**

|  |
| --- |
| The EMS unit number used to dispatch and communicate with the unit. This may be the same as the EMS Unit/Vehicle Number in many agencies. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 50

**Comments**

NEMSIS: "This element could be populated from a list created in dVehicle.03 EMS Unit Call Sign or dConfiguration.16 (Crew Call Sign).

**Validation Rules**

NEMSIS Mandatory Element

eResponse.19

|  |
| --- |
| Kansas |
| eResponse.19 – Beginning Odometer Reading of Responding Vehicle | |

**Definition**

|  |
| --- |
| The mileage (counter or odometer reading) of the vehicle at the beginning of the call (when the wheels begin moving). If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of Boat, Fixed Wing, or Rotor Craft in eDisposition.16 (EMS Transport Method). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Decimal Fraction-Digits: 2 Total-Digits: 8

**Comments**

NEMSIS: If a mileage counter is being used instead of an odometer, this value would be 0.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e097 | Warning | Beginning Odometer Reading required on all responses |

eResponse.20

|  |
| --- |
| Kansas |
| eResponse.20 – On-Scene Odometer Reading of Responding Vehicle | |

**Definition**

|  |
| --- |
| The mileage (counter or odometer reading) of the vehicle when it arrives at the scene. If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of Boat, Fixed Wing, or Rotor Craft in eDisposition.16 (EMS Transport Method). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Decimal Fraction-Digits: 2 Total-Digits: 8

**Comments**

NEMSIS: If using a counter, this is the mileage traveled from dispatch to the scene starting from 0.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| Ks\_e098 | Warning | On-Scene Odometer required when the EMS unit makes the scene |

eResponse.21

|  |
| --- |
| Kansas |
| eResponse.21 – Patient Destination Odometer Reading of Responding Vehicle | |

**Definition**

|  |
| --- |
| The mileage (counter or odometer reading) of the vehicle when it arrives at the patient's destination. If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of Boat, Fixed Wing, or Rotor Craft in eDisposition.16 (EMS Transport Method). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Decimal Fraction-Digits: 2 Total-Digits: 8

**Comments**

NEMSIS: If using a counter, this is the mileage traveled from dispatch to the patient's transport destination starting from 0.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e099 | Warning | Patient Destination Odometer required when (eDisposition.30) Transport Disposition identifies a patient was transported by this unit. |

eResponse.22

|  |
| --- |
| Kansas |
| eResponse.22 – Ending Odometer Reading of Responding Vehicle | |

**Definition**

|  |
| --- |
| If using a counter, this is the mileage traveled beginning with dispatch through the transport of the patient to their destination and ending when back in service, starting from 0. If EMS vehicle/unit is via water or air travel document the number in "hours" as it relates to the documentation of boat, Fixed Wing, or Rotor Craft in eDisposition.16. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Decimal Fraction-Digits: 2 Total-Digits: 8

**Comments**

None

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e100 | Warning | Ending Odometer required on all responses. |

eResponse.23

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.23 – Response Mode to Scene | | |

**Definition**

|  |
| --- |
| The indication whether the response was emergent or non-emergent. An emergent response is an immediate response. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2223001 | | Emergent (Immediate Response) | |
|  | |  | |
| 2223003 | | Emergent Downgraded to Non-Emergent | |
|  | |  | |
| 2223005 | | Non-Emergent | |
|  | |  | |
| 2223007 | | Non-Emergent Upgraded to Emergent | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

NEMSIS: Information now split between eResponse.23 (Response Mode to Scene) and eResponse.24 (Additional Response Mode Descriptors)

**Validation Rules**

NEMSIS Mandatory Element

eResponse.24

|  |  |
| --- | --- |
| Kansas | National |
| eResponse.24 – Additional Response Mode Descriptors | | |

**Definition**

|  |
| --- |
| The documentation of response mode techniques used for this EMS response. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
|  | |  | |
| 2224015 | | Lights and Sirens | |
|  | |  | |
|  | |  | |
| 2224019 | | No Lights or Sirens | |
|  | |  | |
| 2224021 | | Initial No Lights or Sirens, Upgraded to Lights and Sirens | |
|  | |  | |
| 2224023 | | Initial Lights and Sirens, Downgraded to No Lights or Sirens | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: This is a Kansas Mandatory Element.

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Descriptors have been added to better describe the EMS Response. This includes information on whether the EMS event was schedule or unscheduled.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Additional Response Mode Descriptors is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Additional Response Mode Descriptors has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Additional Response Mode Descriptors has a Not Value, no other value should be recorded. |
| ks\_e101 | Warning | Additional Response Mode Descriptors is Mandatory on all responses. |
| ks\_e102 | Warning | If Light & Sirens is selected there should not be another answer regarding lights & sirens use. |
| ks\_e103 | Warning | If No Light & Sirens is selected there should not be another answer regarding lights & sirens use. |
| ks\_e104 | Warning | If Light & Sirens with Downgrade is selected there should not be another answer regarding lights & sirens use. |

eScene.01

|  |  |
| --- | --- |
| Kansas | National |
| eScene.01 – First EMS Unit on Scene | | |

**Definition**

|  |
| --- |
| Documentation that this EMS Unit was the first EMS Unit among all EMS Agencies on the Scene. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9923001 | | No | |
|  | |  | |
| 9923003 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to improve the evaluation of Response Times when multiple EMS units are responding to the same scene.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When First EMS Unit on Scene is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When First EMS Unit on Scene has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e105 | Warning | First EMS Unit on Scene is required based on (eResponse.05) Type of Service Requested and (eDisposition.27) Unit Disposition. |

eScene.06

|  |  |
| --- | --- |
| Kansas | National |
| eScene.06 – Number of Patients at Scene | | |

**Definition**

|  |
| --- |
| Indicator of how many total patients were at the scene. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2707001 | | Multiple | |
|  | |  | |
| 2707003 | | None | |
|  | |  | |
| 2707005 | | Single | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Number of Patients at Scene is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Number of Patients at Scene has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e067 | Warning | Number of Patients at Scene should be "Multiple" or "Single" when Unit Disposition is "Patient Contact Made". |
| nemSch\_e068 | Warning | Number of Patients at Scene should be "Multiple" when Mass Casualty Incident is "Yes". |

eScene.07

|  |  |
| --- | --- |
| Kansas | National |
| eScene.07 – Mass Casualty Incident | | |

**Definition**

|  |
| --- |
| Indicator if this event would be considered a mass casualty incident (overwhelmed existing EMS resources). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9923001 | | No | |
|  | |  | |
| 9923003 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Mass Casualty Incident is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Mass Casualty Incident has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e106 | Warning | Mass Casualty Incident required when (eScene.06) Number of Patients equals "Multiple" |

eScene.08

|  |  |
| --- | --- |
| Kansas | National |
| eScene.08 – Triage Classification for MCI Patient | | |

**Definition**

|  |
| --- |
| The color associated with the initial triage assessment/classification of the MCI patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2708001 | | Red - Immediate | |
|  | |  | |
| 2708003 | | Yellow - Delayed | |
|  | |  | |
| 2708005 | | Green - Minimal (Minor) | |
|  | |  | |
| 2708007 | | Gray - Expectant | |
|  | |  | |
| 2708009 | | Black - Deceased | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This element is documented when eScene.07 (Mass Casualty Incident) = Yes.  
NEMSIS: Examples of triage systems include START and SALT.

NEMSIS: Adapted from: SALT mass casualty triage: concept endorsed by the American College of Emergency Physicians, American College of Surgeons Committee on Trauma, American Trauma Society, National Association of EMS Physicians, National Disaster Life Support Education Consortium, and State and Territorial Injury Prevention Directors Association. Disaster Med Public Health Prep. 2008 Dec;2(4):245-6.

NEMSIS: START reference: Benson M, Koenig KL, Schultz CH. Disaster triage: START, then SAVE-a new method of dynamic triage for victims of a catastrophic earthquake. Prehospital Disaster Med. 1996; Apr-Jun; 11(2): 117-24

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Triage Classification for MCI Patient is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Triage Classification for MCI Patient has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e069 | Warning | Triage Classification for MCI Patient should be recorded when Mass Casualty Incident is "Yes". |

eScene.09

|  |  |
| --- | --- |
| Kansas | National |
| eScene.09 – Incident Location Type | | |

**Definition**

|  |
| --- |
| The kind of location where the incident happened. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern Y92\.[0-9]{1,3}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Code list is represented in ICD-10-CM. Reference the NEMSIS Suggested Lists at: https://nemsis.org/technical-resources/version-3/version-3-resource-repository/  
ICD-10-CM  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Incident Location Type is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Incident Location Type has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e070 | Warning | Incident Location Type should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene". |

eScene.10

|  |
| --- |
| Kansas |
| eScene.10 – Incident Facility Code | |

**Definition**

|  |
| --- |
| The state, regulatory, or other unique number (code) associated with the facility if the Incident is a Healthcare Facility. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 50

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This may be populated from a list created within dFacility.03 (Facility Location Code) or dFacility.05 (Facility National Provider Identifier).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Incident Facility Code is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Incident Facility Code has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e107 | Warning | Incident Facility is required when (eScene.09) Incident Location Type identifies a hospital or nursing home. |

eScene.11

|  |
| --- |
| Kansas |
| eScene.11 – Scene GPS Location | |

**Definition**

|  |
| --- |
| The GPS coordinates associated with the Scene. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern

(\+|-)?(90(\.[0]{1,6})?|([1-8][0-9]|[0-9])(\.[0-9]{1,6})?),(\+|-)?(180(\.[0]{1,6})?|(1[0-7][0-9]|[1-9][0-9]|[0-9])(\.[0-9]{1,6})?)

**Comments**

KEMSIS: Added to better identify scene locations for improved geomapping, especially with motor vehicle accidents.

NEMSIS: The pattern for GPS location is in the format "*latitude*,*longitude*" where:  
- *latitude* has a minimum of -90 and a maximum of 90 with up to 6 decimal places  
- *longitude* has a minimum of -180 and a maximum of 180 with up to 6 decimal places

**Validation Rules**

None

eScene.15

|  |
| --- |
| Kansas |
| eScene.15 – Incident Street Address | |

**Definition**

|  |
| --- |
| The street address where the patient was found, or, if no patient, the address to which the unit responded. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 255

**Comments**

KEMSIS: This is a mandatory element in Kansas.

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e108 | Warning | Incident Street Address is Mandatory |

eScene.16

|  |
| --- |
| Kansas |
| eScene.16 – Incident Apartment, Suite, or Room | |

**Definition**

|  |
| --- |
| The number of the specific apartment, suite, or room where the incident occurred. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 15

**Comments**

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Incident Apartment, Suite, or Room is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Incident Apartment, Suite, or Room has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eScene.17

|  |
| --- |
| Kansas |
| eScene.17 – Incident City | |

**Definition**

|  |
| --- |
| The city or township (if applicable) where the patient was found or to which the unit responded (or best approximation). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: This is a mandatory element in Kansas.

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: City codes are based on GNIS Feature Class. The primary Feature Class to use is "Civil" with "Populated Place" and "Military" code as additional options.

NEMSIS: Definitions for each GNIS City Feature Class can be found on the GNIS Codes website.  
GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e109 | Warning | Incident City mandatory on all responses. |

eScene.18

|  |  |
| --- | --- |
| Kansas | National |
| eScene.18 – Incident State | | |

**Definition**

|  |
| --- |
| The state, territory, or province where the patient was found or to which the unit responded (or best approximation). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9]{2}

**Comments**

KEMSIS: This is a mandatory element in Kansas.

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Based on the ANSI State Code.  
GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e110 | Warning | Incident State mandatory on all records |

eScene.19

|  |  |
| --- | --- |
| Kansas | National |
| eScene.19 – Incident ZIP Code | | |

**Definition**

|  |
| --- |
| The ZIP code of the incident location. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9]{5}|[0-9]{5}-[0-9]{4}|[0-9]{5}-[0-9]{5}|[A-Z][0-9][A-Z] [0-9][A-Z][0-9]

**Comments**

KEMSIS: This is a mandatory element in Kansas.

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: ZIP Codes Product Website: <https://www.zipcodedownload.com/Products/Product/Z5Commercial/Standard/Overview/>  
Product: USA - 5-digit ZIP Code Database, Commercial Edition

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e111 | Warning | Incident Zip Code is mandatory |

eScene.21

|  |  |
| --- | --- |
| Kansas | National |
| eScene.21 – Incident County | | |

**Definition**

|  |
| --- |
| The county or parish where the patient was found or to which the unit responded (or best approximation). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern [0-9]{5}

**Comments**

KEMSIS: This is a mandatory element in Kansas.

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Based on the ANSI Code Single Choice based on the County Name but stored as the ANSI code (combined 5 digit State and County codes) Should be required if there is a patient associated with the event.  
GNIS Codes Website: <http://geonames.usgs.gov/domestic/download_data.htm>

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e112 | Warning | Incident County mandatory on all records. |

eSituation.01

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.01 – Date/Time of Symptom Onset | | |

**Definition**

|  |
| --- |
| The date and time the symptom began (or was discovered) as it relates to this EMS event. This is described or estimated by the patient, family, and/or healthcare professionals. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

8801023 – Unable to Complete 8801029 - Approximate

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

NEMSIS: Added to better define the EMS patient event.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time of Symptom Onset is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time of Symptom Onset has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e003 | Error | When Date/Time of Symptom Onset has a Pertinent Negative of "Unable to Complete", it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e004 | Error | When Date/Time of Symptom Onset has a Pertinent Negative of "Approximate", it should have a value and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e075 | Warning | Date/Time of Symptom Onset should be recorded when Type of Service Requested is “Emergency Response (Primary Response Area)” and Patient Evaluation/Care is “Patient Evaluated and Care Provided”. |
| ks\_e113 | Warning | Date/Time of Symptom Onset or a pertinent negative is required when Type of Service Requested identifies an emergency response and when Patient Evaluation/Care identifies a patient was evaluated |

eSituation.02

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.02 – Possible Injury | | |

**Definition**

The ordering physician or medical provider diagnosis or stated reason for a hospital-to-hospital transfer, other medical transport, or Mobile Integrated Healthcare encounter.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9922001 | | No | |
|  | |  | |
| 9922003 | | Unknown | |
|  | |  | |
| 9922005 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This data element provides documentation to classify the EMS Reason for Encounter as either injury or non-injury related based on mechanism and not on actual injury. eSituation.02 (Possible Injury), eSituation.09 (Primary Symptom), eSituation.07 (Chief Complaint Anatomic Location), and eSituation.08 (Chief Complaint Organ System) are grouped together to form the EMS Reason for Encounter.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Possible Injury is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Possible Injury has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e076 | Warning | Possible Injury should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| nemSch\_e077 | Warning | Possible Injury should be "Yes" when a symptom or impression is injury-related. |
| ks\_e114 | Warning | Possible Injury required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated |

eSituation.03

|  |
| --- |
| Kansas |
| eSituation.03 – Complaint Type | |

**Definition**

|  |
| --- |
| The type of patient healthcare complaint being documented. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Recommended | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2803001 | | Chief (Primary) | |
|  | |  | |
| 2803003 | | Other | |
|  | |  | |
| 2803005 | | Secondary | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

NEMSIS: This was added to group complaints in a more efficient manner.

NEMSIS: Added to improve data integrity.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Complaint Type is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Complaint Type has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eSituation.04

|  |
| --- |
| Kansas |
| eSituation.04 – Complaint | |

**Definition**

|  |
| --- |
| The statement of the problem by the patient or the history provider. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Recommended | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 1 Max-Length: 255

**Comments**

None

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Complaint is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Complaint has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eSituation.05

|  |
| --- |
| Kansas |
| eSituation.05 – Duration of Complaint | |

**Definition**

|  |
| --- |
| The duration of the complaint. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Recommended | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

None

**Data Type**

Integer Min-Inclusive: 1 Max-Inclusive: 365

**Comments**

NEMSIS: Associated with eSituation.06 (Time Units of Duration of the Complaint).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Duration of Complaint is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Duration of Complaint has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eSituation.06

|  |
| --- |
| Kansas |
| eSituation.06 – Time Units of Duration of Complaint | |

**Definition**

|  |
| --- |
| The time units of duration of the patient’s complaint. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2806001 | | Seconds | |
|  | |  | |
| 2806003 | | Minutes | |
|  | |  | |
| 2806005 | | Hours | |
|  | |  | |
| 2806007 | | Days | |
|  | |  | |
| 2806009 | | Weeks | |
|  | |  | |
| 2806011 | | Months | |
|  | |  | |
| 2806013 | | Years | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

None

**Data Type**

**Comments**

NEMSIS: Associated with eSituation.05 (Duration of the Complaint).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Time Units of Duration of Complaint is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Time Units of Duration of Complaint has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eSituation.07

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.07 – Chief Complaint Anatomic Location | | |

**Definition**

The primary anatomic location of the chief complaint as identified by EMS personnel.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2807001 | | Abdomen | |
|  | |  | |
| 2807003 | | Back | |
|  | |  | |
| 2807005 | | Chest | |
|  | |  | |
| 2807007 | | Extremity-Lower | |
|  | |  | |
| 2807009 | | Extremity-Upper | |
|  | |  | |
| 2807011 | | General/Global | |
|  | |  | |
| 2807013 | | Genitalia | |
|  | |  | |
| 2807015 | | Head | |
|  | |  | |
| 2807017 | | Neck | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: eSituation.02 (Possible Injury), eSituation.09 (Primary Symptom), eSituation.07 (Chief Complaint Anatomic Location), and eSituation.08 (Chief Complaint Organ System) are grouped together to form the EMS Reason for Encounter.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Chief Complaint Anatomic Location is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Chief Complaint Anatomic Location has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty |
| nemSch\_e078 | Warning | Chief Complaint Anatomic Location should be recorded when Type of Service Requested is “Emergency Response (Primary Response Area)” and Patient Evaluation/Care is “Patient Evaluated and Care Provided”. |
| ks\_e115 | Warning | Chief Complaint Anatomic Location is required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated and (eResponse.05) Type of Service Requested identifies an emergency response. |

eSituation.08

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.08 – Chief Complaint Organ System | | |

**Definition**

The primary organ system of the patient injured or medically affected.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2808001 | | Behavioral/Psychiatric | |
|  | |  | |
| 2808003 | | Cardiovascular | |
|  | |  | |
| 2808005 | | CNS/Neuro | |
|  | |  | |
| 2808007 | | Endocrine/Metabolic | |
|  | |  | |
| 2808009 | | GI | |
|  | |  | |
| 2808011 | | Global/General | |
|  | |  | |
| 2808013 | | Lymphatic/Immune | |
|  | |  | |
| 2808015 | | Musculoskeletal/Skin | |
|  | |  | |
| 2808017 | | Reproductive | |
|  | |  | |
| 2808019 | | Pulmonary | |
|  | |  | |
| 2808021 | | Renal | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Altered to follow the anatomical organ systems as defined by general anatomy. Added Lymphatic/Immune; Merged Skin with Muscular-Skeletal. Changed OB/Gyn to Reproductive.

NEMSIS: Retained non-organ system designations for Global/General and Behavioral/Psychiatric.

NEMSIS: eSituation.02 (Possible Injury), eSituation.09 (Primary Symptom), eSituation.07 (Chief Complaint Anatomic Location), and eSituation.08 (Chief Complaint Organ System) are grouped together to form the EMS Reason for Encounter.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Chief Complaint Organ System is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Chief Complaint Organ System has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e079 | Warning | Chief Complaint Organ System should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| ks\_e116 | Warning | Chief Complaint Organ System or a pertinent negative is required when Patient Evaluation/Care identifies a patient was evaluated and Type of Service Requested identifies an emergency response. |

eSituation.09

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.09 – Primary Symptom | | |

**Definition**

The primary sign and symptom present in the patient or observed by EMS personnel.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

Pattern (R[0-6][0-9](\.[0-9]{1,4})?|(R73\.9)|(R99))|([A-QSTZ][0-9][0-9A-Z])((\.[0-9A-Z]{1,4})?)

**Comments**

NEMSIS: eSituation.02 (Possible Injury), eSituation.09 (Primary Symptom), eSituation.07 (Chief Complaint Anatomic Location), and eSituation.08 (Chief Complaint Organ System) are grouped together to form the EMS Reason for Encounter.

NEMSIS: Code list is represented in ICD-10-CM Diagnosis Codes. Reference the NEMSIS Suggested Lists at: https://nemsis.org/technical-resources/version-3/version-3-resource-repository/  
ICD-10-CM  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Primary Symptom is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Primary Symptom has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e080 | Warning | Other Associated Symptoms should only be recorded when Primary Symptom is recorded. |
| ks\_e117 | Warning | Primary Symptom or a pertinent negative is required when Patient Evaluation/Care identifies a patient was evaluated and Type of Service Requested identifies an emergency response. |

eSituation.10

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.10 – Other Associated Symptoms | | |

**Definition**

Other symptoms identified by the patient or observed by EMS personnel.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

8801031 – Symptom Not Present

**Data Type**

String Min-Length: 2 Max-Length: 255

Pattern (R[0-6][0-9](\.[0-9]{1,4})?|(R73\.9)|(R99))|([A-QSTZ][0-9][0-9A-Z])((\.[0-9A-Z]{1,4})?)

**Comments**

NEMSIS: Code list is represented in ICD-10-CM Diagnosis Codes. Reference the NEMSIS Suggested Lists at: https://nemsis.org/technical-resources/version-3/version-3-resource-repository/  
ICD-10-CM  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Other Associated Symptoms is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Other Associated Symptoms has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e005 | Error | When Other Associated Symptoms has a Pertinent Negative, it should have a value and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e009 | Warning | When Other Associated Symptoms has a Not Value, no other value should be recorded. |
| nemSch\_e010 | Warning | When Other Associated Symptoms has a Pertinent Negative, no other value should be recorded. |
| nemSch\_e081 | Warning | Other Associated Symptoms should only be recorded when Primary Symptom is recorded. |

eSituation.11

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.11 – Provider’s Primary Impression | | |

**Definition**

The EMS personnel's impression of the patient's primary problem or most significant condition which led to the management given to the patient (treatments, medications, or procedures).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern (R[0-6][0-9](\.[0-9]{1,4})?|(R73\.9)|(R99))|([A-QSTZ][0-9][0-9A-Z])((\.[0-9A-Z]{1,4})?)

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Code list is represented in ICD-10-CM. Reference the NEMSIS Suggested Lists at: https://nemsis.org/technical-resources/version-3/version-3-resource-repository/  
ICD-10-CM  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Provider's Primary Impression is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Provider's Primary Impression has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e082 | Warning | Provider's Primary Impression should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| ks\_e118 | Warning | Primary Impression required when Patient Evaluation/Care identifies a patient was evaluated. |

eSituation.12

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.12 – Provider’s Secondary Impression | | |

**Definition**

The EMS personnel's impression of the patient's secondary problem or most significant condition which led to the management given to the patient (treatments, medications, or procedures).

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:M |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

Pattern (R[0-6][0-9](\.[0-9]{1,4})?|(R73\.9)|(R99))|([A-QSTZ][0-9][0-9A-Z])((\.[0-9A-Z]{1,4})?)

**Comments**

NEMSIS: Code list is represented in ICD-10-CM. Reference the NEMSIS Suggested Lists at: https://nemsis.org/technical-resources/version-3/version-3-resource-repository/  
ICD-10-CM  
Website - [http://uts.nlm.nih.gov](http://uts.nlm.nih.gov/)  
Product - UMLS Metathesaurus

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Provider's Secondary Impressions is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Provider's Secondary Impressions has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Provider's Secondary Impressions has a Not Value, no other value should be recorded. |
| nemSch\_e083 | Warning | Provider's Secondary Impressions should only be recorded when Provider's Primary Impression is recorded. |

eSituation.13

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.13 – Initial Patient Acuity | | |

**Definition**

The acuity of the patient's condition upon EMS arrival at the scene.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2813001 | | Critical (Red) | |
|  | |  | |
| 2813003 | | Emergent (Yellow) | |
|  | |  | |
| 2813005 | | Lower Acuity (Green) | |
|  | |  | |
| 2813007 | | Dead without Resuscitation Efforts (Black) | |
|  | |  | |
| 2813009 | | Non-Acute/Routine | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

Pattern (R[0-6][0-9](\.[0-9]{1,4})?|(R73\.9)|(R99))|([A-QSTZ][0-9][0-9A-Z])((\.[0-9A-Z]{1,4})?)

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Definitions related to "Critical, Emergent, and Lower Acuity" can be found in the National EMS Core Content document from NHTSA EMS (DOT HS 809-898 July 2005) at  
<http://www.nhtsa.gov/people/injury/ems/emscorecontent/images/EMSCoreContent.pdf>

NEMSIS: Dead without Resuscitation Efforts would be appropriate if resuscitation was initiated by non-EMS personnel but discontinued immediately upon evaluation by first arriving EMS personnel.

NEMSIS: "Non-Acute/Routine" added for use with patients with no clinical issues-such as refusal for a life assist-or for routine transfers.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Initial Patient Acuity is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Initial Patient Acuity has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e084 | Warning | Initial Patient Acuity should be recorded when Type of Service Requested is "Emergency Response (Primary Response Area)" and Patient Evaluation/Care is "Patient Evaluated and Care Provided". |
| ks\_e119 | Warning | Initial acuity required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated. |

eSituation.14

|  |
| --- |
| Kansas |
| eSituation.14 – Work-Related Illness/Injury | |

**Definition**

|  |  |  |
| --- | --- | --- |
| |  |  | | --- | --- | | |  | | --- | | Indication of whether or not the illness or injury is work related. | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9922001 | | No | |
|  | |  | |
| 9922003 | | Unknown | |
|  | |  | |
| 9922005 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Moved from Version 2.2.1 E07\_15 to allow more complete documentation of work-related illness and injury.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Work-Related Illness/Injury is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Work-Related Illness/Injury has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e120 | Warning | Work-Related Illness/Injury required when (eResponse.05) Type of Service Requested identifies an emergency response and (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated. |

eSituation.18

|  |  |
| --- | --- |
| Kansas | National |
| eSituation.18 – Date/Time Last Known Well | | |

**Definition**

|  |
| --- |
| The estimated date and time the patient was last known to be well or in their usual state of health. This is described or estimated by the patient, family, and/or bystanders. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801023 – Unable to Complete

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: For stroke related events, this is the date and time the patient was last seen normal.

NEMSIS: For cardiac or respiratory arrest related events, this is the date and time the patient was last known to have a pulse or when interaction was had with the patient.

NEMSIS: For drowning related events, this is the date and time the patient was last seen.

NEMSIS: For injury or trauma related events, this is the date and time the patient was injured

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Last Known Well is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time Last Known Well has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Date/Time Last Known Well has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e085 | Warning | Date/Time Last Known Well should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Arrest is "Yes...". |
| nemSch\_e086 | Warning | Date/Time Last Known Well should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Stroke Scale Score is "Positive". |
| nemSch\_e087 | Warning | Date/Time Last Known Well should be recorded when Patient Evaluation/Care is "Patient Evaluated and Care Provided" and Cardiac Rhythm / Electrocardiography (ECG) is "STEMI...". |
| ks\_e121 | Warning | Date/Time Last Known Well required when Primary or Secondary Impression includes Cardiac Arrest, Stroke, TIA, or STEMI. |

eSituation.20

|  |
| --- |
| Kansas |
| eSituation.20 – Reason for Interfacility Transfer/Medical Transport | |

**Definition**

The general categories of the reason for an interfacility transfer/medical transport.

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | No | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 2820001 | | Cardiac Specialty | |
|  | |  | |
| 2820003 | | Convenience Transfer (Patient Request) | |
|  | |  | |
| 2820005 | | Diagnostic Testing | |
|  | |  | |
| 2820007 | | Dialysis | |
|  | |  | |
| 2820009 | | Drug and/or Alcohol Rehabilitation Care | |
|  | |  | |
| 2820011 | | Extended Care | |
|  | |  | |
| 2820013 | | Maternal/Neonatal | |
|  | |  | |
| 2820015 | | Medical Specialty Care (Other, Not Listed) | |
|  | |  | |
| 2820017 | | Neurological Specialty Care | |
|  | |  | |
| 2820019 | | Palliative/Hospice Care (Home or Facility) | |
|  | |  | |
| 2820021 | | Pediatric Specialty Care | |
|  | |  | |
| 2820023 | | Psychiatric/Behavioral Care | |
|  | |  | |
| 2820025 | | Physical Rehabilitation Care | |
|  | |  | |
| 2820027 | | Return to Home/Residence | |
|  | |  | |
| 2820029 | | Surgical Specialty Care (Other, Not Listed) | |
|  | |  | |
| 2820031 | | Trauma/Orthopedic Specialty Care | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This supports and works in combination with eSituation.19 Justification for Transfer or Encounter to provide defined categories for an interfacility transfer or other medical transport. This documentation provides support for reimbursement and a means for regions and states to evaluate transfer patterns and types.

NEMSIS: Element added with the release of v3.5.0

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Reason for Interfacility Transfer/Medical Transport is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Reason for Interfacility Transfer/Medical Transport has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e088 | Warning | Reason for Interfacility Transfer/Medical Transport should only be recorded when Type of Service Requested is "... Transfer" or "Other Routine Medical Transport". |
| ks\_e122 | Warning | Reason for Interfacility Transfer/Medical Transport required when |

eTimes.01

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.01 – PSAP Call Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the phone rings (911 call to public safety answering point or other designated entity) requesting EMS services. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

NEMSIS: This date/time might be the same as Dispatch Notified Date/Time (eTimes.02).

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| Ks\_e123 | Warning | PSAP Date/Time is mandatory when (eResponse.05) equals emergency response, interfacility transfer, or medical transport. |
| Ks\_e124 | Warning | PSAP Date/Time is out of sequence with other recorded times. |

eTimes.03

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.03 – Unit Notified by Dispatch Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the responding unit was notified by dispatch. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

NEMSIS Mandatory Element

|  |  |  |
| --- | --- | --- |
| nemSch\_e017 | Warning | Unit Notified by Dispatch Date/Time should not be earlier than PSAP Call Date/Time. |

eTimes.05

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.05 – Unit En Route Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the unit responded; that is, the time the vehicle started moving. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Unit En Route Date/Time is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Unit En Route Date/Time has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e018 | Warning | Unit En Route Date/Time should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene". |
| nemSch\_e019 | Warning | Unit En Route Date/Time should not be earlier than Unit Notified by Dispatch Date/Time. |
| ks\_e124 | Warning | Unit En Route Date/Time required on all responses. |

eTimes.06

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.06 – Unit Arrived on Scene Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the responding unit arrived on the scene; that is, the time the vehicle stopped moving at the scene. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Unit Arrived on Scene Date/Time is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Unit Arrived on Scene Date/Time has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e020 | Warning | Unit Arrived on Scene Date/Time should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene". |
| nemSch\_e021 | Warning | Unit Arrived on Scene Date/Time should not be earlier than Unit Notified by Dispatch Date/Time. |
| nemSch\_e022 | Warning | Unit Arrived on Scene Date/Time should not be earlier than Unit En Route Date/Time. |

eTimes.07

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.07 – Arrived at Patient Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the responding unit arrived at the patient's side. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Arrived at Patient Date/Time is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Arrived at Patient Date/Time has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e023 | Warning | Arrived at Patient Date/Time should be recorded when Unit Disposition is "Patient Contact Made". |
| nemSch\_e024 | Warning | Arrived at Patient Date/Time should not be earlier than Unit Notified by Dispatch Date/Time. |

eTimes.08

|  |
| --- |
| Kansas |
| eTimes.08 – Transfer of EMS Patient Care Date/Time | |

**Definition**

|  |
| --- |
| The date/time the patient was transferred from this EMS agency to another EMS agency for care. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Transfer of EMS Patient Care Date/Time is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Transfer of EMS Patient Care Date/Time has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e125 | Warning | Transfer of EMS Patient Care Date/Time is required when Crew Disposition identifies patient care was transferred to another EMS crew. |
| ks\_e126 | Warning | Transfer of Patient Care Date/Time should be after Arrived at Patient Date/Time |
| ks\_e127 | Warning | Transfer of EMS Patient Care Date/Time should be before Unit Back in Service Date/Time. |

eTimes.09

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.09 – Unit Left Scene Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the responding unit left the scene (started moving). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Unit Left Scene Date/Time is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Unit Left Scene Date/Time has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e025 | Warning | Unit Left Scene Date/Time should be recorded unless Unit Disposition is "Cancelled Prior to Arrival at Scene". |
| nemSch\_e026 | Warning | Unit Left Scene Date/Time should not be earlier than Unit Notified by Dispatch Date/Time. |
| nemSch\_e027 | Warning | Unit Left Scene Date/Time should not be earlier than Unit En Route Date/Time. |
| nemSch\_e028 | Warning | Unit Left Scene Date/Time should not be earlier than Unit Arrived on Scene Date/Time. |
| nemSch\_e029 | Warning | Unit Left Scene Date/Time should not be earlier than Arrived at Patient Date/Time. |

eTimes.11

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.11 – Patient Arrived at Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the responding unit arrived with the patient at the destination or transfer point. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Patient Arrived at Destination Date/Time is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Patient Arrived at Destination Date/Time has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e030 | Warning | Patient Arrived at Destination Date/Time should be recorded when Transport Disposition is "Transport by This EMS Unit...". |
| nemSch\_e031 | Warning | Patient Arrived at Destination Date/Time should not be earlier than Unit Notified by Dispatch Date/Time. |
| nemSch\_e032 | Warning | Patient Arrived at Destination Date/Time should not be earlier than Unit En Route Date/Time. |
| nemSch\_e033 | Warning | Patient Arrived at Destination Date/Time should not be earlier than Unit Arrived on Scene Date/Time. |
| nemSch\_e034 | Warning | Patient Arrived at Destination Date/Time should not be earlier than Arrived at Patient Date/Time. |
| nemSch\_e035 | Warning | Patient Arrived at Destination Date/Time should not be earlier than Unit Left Scene Date/Time. |

eTimes.12

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.12 – Destination Patient Transfer of Care Date/Time | | |

**Definition**

|  |
| --- |
| The date/time that patient care was transferred to the destination healthcare staff. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Destination Patient Transfer of Care Date/Time is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Destination Patient Transfer of Care Date/Time has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e036 | Warning | Destination Patient Transfer of Care Date/Time should be recorded when Transport Disposition is "Transport by This EMS Unit...". |
| nemSch\_e037 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Unit Notified by Dispatch Date/Time. |
| nemSch\_e038 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Unit En Route Date/Time. |
| nemSch\_e039 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Unit Arrived on Scene Date/Time. |
| nemSch\_e040 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Arrived at Patient Date/Time. |
| nemSch\_e041 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Unit Left Scene Date/Time. |
| nemSch\_e042 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Patient Arrived at Destination Date/Time. |
| nemSch\_e043 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Date/Time of Symptom Onset. |
| nemSch\_e044 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Date/Time Last Known Well. |
| nemSch\_e045 | Warning | Destination Patient Transfer of Care Date/Time should not be earlier than Date/Time of Cardiac Arrest. |

eTimes.13

|  |  |
| --- | --- |
| Kansas | National |
| eTimes.13 – Unit Back in Service Date/Time | | |

**Definition**

|  |
| --- |
| The date/time the responding unit was notified by dispatch. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Mandatory | Pertinent Negatives | No |
| National Usage | Mandatory | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

NEMSIS Mandatory Element

|  |  |  |
| --- | --- | --- |
| nemSch\_e046 | Warning | Unit Back in Service Date/Time should not be earlier than Unit Notified by Dispatch Date/Time. |
| nemSch\_e047 | Warning | Unit Back in Service Date/Time should not be earlier than Unit En Route Date/Time. |
| nemSch\_e048 | Warning | Unit Back in Service Date/Time should not be earlier than Unit Arrived on Scene Date/Time. |
| nemSch\_e049 | Warning | Unit Back in Service Date/Time should not be earlier than Arrived at Patient Date/Time. |
| nemSch\_e050 | Warning | Unit Back in Service Date/Time should not be earlier than Unit Left Scene Date/Time. |
| nemSch\_e051 | Warning | Unit Back in Service Date/Time should not be earlier than Patient Arrived at Destination Date/Time. |
| nemSch\_e052 | Warning | Unit Back in Service Date/Time should not be earlier than Destination Patient Transfer of Care Date/Time. |
| nemSch\_e053 | Warning | Unit Back in Service Date/Time should not be earlier than Date/Time of Symptom Onset. |
| nemSch\_e054 | Warning | Unit Back in Service Date/Time should not be earlier than Date/Time Last Known Well. |
| nemSch\_e055 | Warning | Unit Back in Service Date/Time should not be earlier than Date/Time of Cardiac Arrest. |
| nemSch\_e056 | Warning | Unit Back in Service Date/Time should not be in the future (the current time according to this system is (value)). |

eTimes.14

|  |
| --- |
| Kansas |
| eTimes.14 – Unit Cancelled Date/Time | |

**Definition**

|  |
| --- |
| The date/time the unit was cancelled. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Optional | NOT Values | No |
| XML Usage | Required | Is Nillable | No |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

NEMSIS: This date/time is to be documented if the unit went en route but neither arrived on scene nor made patient contact.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| ks\_e128 | Warning | Unit canceled date/time required when (eDisposition.27) Unit Disposition identifies unit was canceled. |
| ks\_e129 | Warning | Unit canceled date/time should be after Unit notified by dispatch date/time |
| ks\_e130 | Warning | Unit canceled date/time should be before Unit back in service date/time |

eVitals.01

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.01 – Date/Time Vital Signs Taken | | |

**Definition**

|  |
| --- |
| The date/time vital signs were taken on the patient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

dateTime Min-Incusive: 1950-01-01T00:00:00-00:00 Max-Inclusive: 2050-01-01T00:00:00-00:00

Pattern [0-9]{4}-[0-9]{2}-[0-9]{2}T[0-9]{2}:[0-9]{2}:[0-9]{2}(\.\d+)?(\+|-)[0-9]{2}:[0-9]{2}

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

DateTime consists of finite-length characters of the form: yyyy '-' mm '-' dd 'T' hh ':' mm ':' ss ('.' s+)? (zzzzzz)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | yyyy | a four-digit numeral that represents the year | | '-' | separators between parts of the date portion | | mm | a two-digit numeral that represents the month | | dd | a two-digit numeral that represents the day | | T | separator that indicates time-of-day follows | | hh | a two-digit numeral that represents the hour | | ':' | a separator between parts of the time-of-day portion | | mm | a two-digit numeral that represents the minute | | ss | a two-integer-digit numeral that represents the whole seconds | | '.' s+ | (not required) represents the fractional seconds | | zzzzzz | (required) represents the timezone (as described below) | |

Timezones, required, are durations with (integer-valued) hour and minute properties in the form: ('+' | '-') hh ':' mm

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | hh | a two-digit numeral (with leading zeros as required) that represents the hours | | mm | a two-digit numeral that represents the minutes | | '+' | a nonnegative duration | | '-' | a nonpositive duration | |

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Date/Time Vital Signs Taken is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Date/Time Vital Signs Taken has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e125 | Warning | Date/Time Vital Signs Taken should be recorded, unless Obtained Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e126 | Warning | Date/Time Vital Signs Taken should not be earlier than Unit Notified by Dispatch Date/Time, unless Obtained Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e127 | Warning | Date/Time Vital Signs Taken should not be earlier than Arrived at Patient Date/Time, unless Obtained Prior to this Unit's EMS Care is "Yes". |
| nemSch\_e128 | Warning | Date/Time Vital Signs Taken should not be later than Destination Patient Transfer of Care Date/Time. |
| nemSch\_e129 | Warning | Date/Time Vital Signs Taken should not be later than Unit Back in Service Date/Time. |
| nemSch\_e130 | Warning | Date/Time Vital Signs Taken should not be later than Arrived at Patient Date/Time when Obtained Prior to this Unit's EMS Care is "Yes". |

eVitals.02

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.02 – Obtained Prior to this Unit’s EMS Care | | |

**Definition**

|  |
| --- |
| Indicates that the information which is documented was obtained prior to the documenting EMS unit’s care. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9923001 | | No | |
|  | |  | |
| 9923003 | | Yes | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: This is the NEMSIS Version 3 method to document prior aid.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | hen Obtained Prior to this Unit's EMS Care is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Obtained Prior to this Unit's EMS Care has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e131 | Warning | Obtained Prior to this Unit's EMS Care is required when one vitals element is documented. |

eVitals.03

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.03 – Cardiac Rhythm/Electrocardiography | | |

**Definition**

|  |
| --- |
| The cardiac rhythm / ECG and other electrocardiography findings of the patient as interpreted by EMS personnel. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 9901001 | | Agonal/Idioventricular | |
|  | |  | |
| 9901003 | | Asystole | |
|  | |  | |
| 9901005 | | Artifact | |
|  | |  | |
| 9901007 | | Atrial Fibrillation | |
|  | |  | |
| 9901009 | | Atrial Flutter | |
|  | |  | |
| 9901011 | | AV Block-1st Degree | |
|  | |  | |
| 9901013 | | AV Block-2nd Degree-Type 1 | |
|  | |  | |
| 9901015 | | AV Block-2nd Degree-Type 2 | |
|  | |  | |
| 9901017 | | AV Block-3rd Degree | |
|  | |  | |
| 9901019 | | Junctional | |
|  | |  | |
| 9901021 | | Left Bundle Branch Block | |
|  | |  | |
| 9901023 | | Non-STEMI Anterior Ischemia | |
|  | |  | |
| 9901025 | | Non-STEMI Inferior Ischemia | |
|  | |  | |
| 9901027 | | Non-STEMI Lateral Ischemia | |
|  | |  | |
| 9901029 | | Non-STEMI Posterior Ischemia | |
|  | |  | |
| 9901030 | | Non-STEMI Septal Ischemia | |
|  | |  | |
| 9901031 | | Other | |
|  | |  | |
| 9901033 | | Paced Rhythm | |
|  | |  | |
| 9901035 | | PEA | |
|  | |  | |
| 9901037 | | Premature Atrial Contractions | |
|  | |  | |
| 9901039 | | Premature Ventricular Contractions | |
|  | |  | |
| 9901041 | | Right Bundle Branch Block | |
|  | |  | |
| 9901043 | | Sinus Arrhythmia | |
|  | |  | |
| 9901045 | | Sinus Bradycardia | |
|  | |  | |
| 9901047 | | Sinus Rhythm | |
|  | |  | |
| 9901049 | | Sinus Tachycardia | |
|  | |  | |
| 9901051 | | STEMI Anterior Ischemia | |
|  | |  | |
| 9901053 | | STEMI Inferior Ischemia | |
|  | |  | |
| 9901055 | | STEMI Lateral Ischemia | |
|  | |  | |
| 9901057 | | STEMI Posterior Ischemia | |
|  | |  | |
| 9901058 | | STEMI Septal Ischemia | |
|  | |  | |
| 9901059 | | Supraventricular Tachycardia | |
|  | |  | |
| 9901061 | | Torsades De Points | |
|  | |  | |
| 9901063 | | Unknown AED Non-Shockable Rhythm | |
|  | |  | |
| 9901065 | | Unknown AED Shockable Rhythm | |
|  | |  | |
| 9901067 | | Ventricular Fibrillation | |
|  | |  | |
| 9901069 | | Ventricular Tachycardia (With Pulse) | |
|  | |  | |
| 9901071 | | Ventricular Tachycardia (Pulseless) | |

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| NemSch\_e001 | Error | When Cardiac Rhythm / Electrocardiography (ECG) is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Cardiac Rhythm / Electrocardiography (ECG) has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Cardiac Rhythm / Electrocardiography (ECG) has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e009 | Warning | When Cardiac Rhythm / Electrocardiography (ECG) has a Not Value, no other value should be recorded. |
| nemSch\_e010 | Warning | When Cardiac Rhythm / Electrocardiography (ECG) has a Pertinent Negative, no other value should be recorded. |

eVitals.04

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.04 – ECG Type | | |

**Definition**

|  |
| --- |
| The type of ECG associated with the cardiac rhythm. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3304000 | | 2 Lead ECG (pads or paddles) | |
|  | |  | |
| 3304001 | | 3 Lead | |
|  | |  | |
| 3304003 | | 4 Lead | |
|  | |  | |
| 3304005 | | 5 Lead | |
|  | |  | |
| 3304007 | | 12 Lead-Left Sided (Normal) | |
|  | |  | |
| 3304009 | | 12 Lead-Right Sided | |
|  | |  | |
| 3304011 | | 15 Lead | |
|  | |  | |
| 3304013 | | 18 Lead | |
|  | |  | |
| 3304015 | | Other | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Added to better document ECG results.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When ECG Type is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When ECG Type has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |

eVitals.05

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.05 – Method of ECG Interpretation | | |

**Definition**

|  |
| --- |
| The method of ECG interpretation. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3305001 | | Computer Interpretation | |
|  | |  | |
| 3305003 | | Manual Interpretation | |
|  | |  | |
| 3305005 | | Transmission with No Interpretation | |
|  | |  | |
| 3305007 | | Transmission with Remote Interpretation | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: "Transmission with no interpretation" may be used by EMS Agency Personnel that are not trained to interpret cardiac rhythms.

NEMSIS: Added to better document ECG results.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Method of ECG Interpretation is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Method of ECG Interpretation has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Method of ECG Interpretation has a Not Value, no other value should be recorded. |
| Ks\_e132 | Warning | Method of ECG Interpretation required when Cardiac Rhythm/ECG is not blank |

eVitals.06

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.06 – SBP (Systolic Blood Pressure) | | |

**Definition**

|  |
| --- |
| The patient’s systolic blood pressure. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801005 – Exam Finding Not Present 8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Integer Min-Inclusive: 0 Max-Inclusive: 500

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Required for ACS-Field Triage and other patient scoring systems.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When SBP (Systolic Blood Pressure) is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When SBP (Systolic Blood Pressure) has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When SBP (Systolic Blood Pressure) has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e133 | Warning | At least one Systolic Blood Pressure is required when Patient Evaluation/Care identifies a patient was evaluated. |
| ks\_e134 | Warning | Systolic BP cannot be less then Diastolic BP |

eVitals.07

|  |
| --- |
| Kansas |
| eVitals.07 – DBP (Diastolic Blood Pressure) | |

**Definition**

|  |
| --- |
| The patient’s diastolic blood pressure. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801005 – Exam Finding Not Present 8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Pattern [5][0][0]|[1-4][0-9][0-9]|[0-9]|[1-9][0-9]|P|p

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Diastolic blood pressure pattern allows for the following values:  
1) A number 0 through 500  
2) P  
3) p

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When DBP (Diastolic Blood Pressure) is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When DBP (Diastolic Blood Pressure) has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSc\_e008 | Error | When DBP (Diastolic Blood Pressure) has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e135 | Warning | At least one Diastolic Blood Pressure or pertinent negative is required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated. |

eVitals.08

|  |
| --- |
| Kansas |
| eVitals.08 – Method of Blood Pressure Measurement | |

**Definition**

|  |
| --- |
| Indication of method of blood pressure measurement. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Recommended | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 3308001 | Arterial Line |
|  |  |  |
|  | 3308003 | Doppler |
|  |  |  |
|  | 3308005 | Cuff-Automated |
|  |  |  |
|  | 3308007 | Cuff-Manual Auscultated |
|  |  |  |
|  | 3308009 | Cuff-Manual Palpated Only |
|  |  |  |
|  | 3308011 | Venous Line |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Method of Blood Pressure Measurement is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Method of Blood Pressure Measurement has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e136 | Warning | Method of Blood Pressure Measurement required when (eVitals.08) SBP is not blank. |
| ks\_e137 | Warning | Method of Blood Pressure cannot be palpated if (eVitals.07) Diastolic BP has a value greater than "0" |

eVitals.10

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.10 – Heart Rate | | |

**Definition**

|  |
| --- |
| The patient’s heart rate expressed as a number per minute. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801005 – Exam Finding Not Present 8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Integer Min-Inclusive: 0 Max-Inclusive: 500

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Pulse Rate and Electronic Monitor Rate have been merged with an additional data element for Method of Heart Rate Measurement.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Heart Rate is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Heart Rate has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Heart Rate has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| Ks\_e138 | Warning | Heart Rate is required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated. |

eVitals.12

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.12 – Pulse Oximetry | | |

**Definition**

|  |
| --- |
| The patient’s oxygen saturation. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801005 – Exam Finding Not Present 8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Integer Min-Inclusive: 0 Max-Inclusive: 100

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Pulse Oximetry is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Pulse Oximetry has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Pulse Oximetry has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |

eVitals.14

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.14 – Respiratory Rate | | |

**Definition**

|  |
| --- |
| The patient’s respiratory rate expressed as a number per minute. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801005 – Exam Finding Not Present 8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Integer Min-Inclusive: 0 Max-Inclusive: 300

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Respiratory Rate is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Respiratory Rate has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e003 | Error | When Respiratory Rate has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_139 | Warning | Respiratory Rate is required when (eDisposition.28) Patient Evaluation/Care identifies a patient was evaluated |

eVitals.16

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.16 – End Tidal Carbon Dioxide (ETCO2) | | |

**Definition**

|  |
| --- |
| The numeric value of the patient's exhaled end tidal carbon dioxide (ETCO2) level measured as a unit of pressure in millimeters of mercury (mmHg), percentage or, kilopascal (kPa). |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Decimal Min-Inclusive: 0 Max-Inclusive: 760 Total-Digits: 4 Fraction-Digits: 1

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When End Tidal Carbon Dioxide (ETCO2) is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When End Tidal Carbon Dioxide (ETCO2) has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When End Tidal Carbon Dioxide (ETCO2) has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| nemSch\_e131 | Warning | End Tidal Carbon Dioxide (ETCO2) should be no more than 100 when ETCO2 Type is "Percentage". |
| nemSch\_e132 | Warning | End Tidal Carbon Dioxide (ETCO2) should be no more than 100 when ETCO2 Type is "kPa". |

eVitals.18

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.18 – Blood Glucose | | |

**Definition**

|  |
| --- |
| The patient’s blood glucose level. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Pattern [2][0][0][0]|[1][0-9][0-9][0-9]|[1-9][0-9][0-9]|[1-9][0-9]|[0-9]|High|Low

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Blood Glucose Level is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Blood Glucose Level has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Blood Glucose Level has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| ks\_e140 | Warning | Two Blood Glucose Levels need documented when Dextrose, Glucagon, or Oral glucose were administered and Type of Service Requested equals Emergency Response (Primary Response Area. |
| ks\_e141 | Warning | Blood Glucose Level required when Procedure identifies a blood glucose check with a glucometer |
| ks\_e142 | Warning | Blood Glucose Level required when Stroke Scale Score equals positive or either Primary Impression or Secondary Impression identifies Stroke or TIA |

eVitals.19

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.19 – Glasgow Coma Score - Eye | | |

**Definition**

|  |
| --- |
| The patient's Glasgow Coma Score Eye opening response. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 1 | No eye movement when assessed (All Age Groups) |
|  |  |  |
|  | 2 | Opens Eyes to painful stimulation (All Age Groups) |
|  |  |  |
|  | 3 | Opens Eyes to verbal stimulation (All Age Groups) |
|  |  |  |
|  | 4 | Opens Eyes spontaneously (All Age Groups) |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

None

**Comments**

NEMSIS: Definitions now based on the National Trauma Data Standard (NTDS).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Glasgow Coma Score-Eye is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Glasgow Coma Score-Eye has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Glasgow Coma Score-Eye has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |

eVitals.20

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.20 – Glasgow Coma Score - Verbal | | |

**Definition**

|  |
| --- |
| The patient's Glasgow Coma Score Verbal opening response. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 1 | | No verbal/vocal response (All Age Groups) | |
|  | |  | |
| 2 | | Incomprehensible sounds (>2 Years); Inconsolable, agitated | |
|  | |  | |
| 3 | | Inappropriate words (>2 Years); Inconsistently consolable, moaning | |
|  | |  | |
| 4 | | Confused (>2 Years); Cries but is consolable, inappropriate interactions | |
|  | |  | |
| 5 | | Oriented (>2 Years); Smiles, oriented to sounds, follows objects, interacts | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

None

**Comments**

NEMSIS: Definitions now based on the National Trauma Data Standard (NTDS).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Glasgow Coma Score-Verbal is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Glasgow Coma Score-Verbal has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Glasgow Coma Score-Verbal has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |

eVitals.21

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.21 – Glasgow Coma Score - Motor | | |

**Definition**

|  |
| --- |
| The patient's Glasgow Coma Score Motor opening response. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
|  | **Code** | **Description** |
|  | 1 | No Motor Response (All Age Groups) |
|  |  |  |
|  | 2 | Extension to pain (All Age Groups) |
|  |  |  |
|  | 3 | Flexion to pain (All Age Groups) |
|  |  |  |
|  | 4 | Withdrawal from pain (All Age Groups) |
|  |  |  |
|  | 5 | Localizing pain (All Age Groups) |
|  |  |  |
|  | 6 | Obeys commands (>2Years); Appropriate response to stimulation |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

None

**Comments**

NEMSIS: Definitions now based on the National Trauma Data Standard (NTDS).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Glasgow Coma Score-Motor is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Glasgow Coma Score-Motor has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Glasgow Coma Score-Motor has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |

eVitals.22

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.22 – Glasgow Coma Score - Qualifier | | |

**Definition**

|  |
| --- |
| Documentation of factors which make the GCS score more meaningful. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:M |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3322001 | | Eye Obstruction Prevents Eye Assessment | |
|  | |  | |
| 3322003 | | Initial GCS has legitimate values without interventions such as intubation and sedation | |
|  | |  | |
| 3322005 | | Patient Chemically Paralyzed | |
|  | |  | |
| 3322007 | | Patient Chemically Sedated | |
|  | |  | |
| 3322009 | | Patient Intubated | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

None

**Data Type**

String Min-Length: 2 Max-Length: 255

**Comments**

NEMSIS: Definitions now based on the National Trauma Data Standard (NTDS).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Glasgow Coma Score-Qualifier is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Glasgow Coma Score-Qualifier has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e009 | Warning | When Glasgow Coma Score-Qualifier has a Not Value, no other value should be recorded. |
| nemSch\_e135 | Warning | When Glasgow Coma Score-Qualifier is "Initial GCS has legitimate values without interventions such as intubation and sedation", no other value should be recorded. |
| ks\_e143 | Warning | Glascow Coma Score Qualifier is required when Total Glascow Coma Score is not blank. |

eVitals.23

|  |
| --- |
| Kansas |
| eVitals.23 – Total Glasgow Coma Score | |

**Definition**

|  |
| --- |
| The patient’s total Glasgow Coma Score. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Integer Min-Inclusive: 3 Max-Inclusive: 15

**Comments**

NEMSIS: Can be documented or calculated from EVitals.19 (GCS-Eye), EVitals.20 (GCS-Verbal), and EVitals.21 (GCS-Motor).

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Total Glasgow Coma Score is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Total Glasgow Coma Score has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Total Glasgow Coma Score has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |

eVitals.24

|  |
| --- |
| Kansas |
| eVitals.24 - Temperature | |

**Definition**

|  |
| --- |
| The patient’s body temperature in degrees Celsius/centigrade. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Recommended | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 0:1 |

**Field Values**

None

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded 7701005 – Not Reporting

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Decimal Total-Digits: 3 Fraction-Digits: 1 Min-Inclusive: 3 Max-Inclusive: 15

**Comments**

None

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Temperature is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Temperature has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Temperature has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |

eVitals.26

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.26 – Level of Responsiveness (AVPU) | | |

**Definition**

|  |
| --- |
| The patient’s highest level of responsiveness. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3326001 | | Alert | |
|  | |  | |
| 3326003 | | Verbal | |
|  | |  | |
| 3326005 | | Painful | |
|  | |  | |
| 3326007 | | Unresponsive | |

**NOT Values (NV)**

None

**Pertinent Negatives**

None

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: Definition changed to indicate highest level of responsiveness.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Level of Responsiveness (AVPU) is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Level of Responsiveness (AVPU) has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| Ks\_e144 | Warning | At least one Level of Responsiveness (AVPU) is required when Patient Evaluation/Care identifies a patient was evaluated. |

eVitals.27

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.27 – Pain Scale Score | | |

**Definition**

|  |
| --- |
| The patient’s indication of pain from a scale of 0-10. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

None

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

Integer Min-Inclusive: 0 Max-Inclusive: 10

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

NEMSIS: The Pain Score can be obtained from several pain measurement tools or pain scale types (eVitals.28).

NEMSIS: The pain scale type used should have a numeric value associated with each diagram as appropriate. If the pain scale type utilizes multiple indicators/categories, the total should be calculated and entered for the pain score associated with the patient assessment.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Pain Scale Score is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Pain Scale Score has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Pain Scale Score has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| Ks\_e145 | Warning | Pain Scale Score required when Possible Injury equals "yes" or Primary or Secondary Symptom identifies potential pain, or Primary or Secondary Impression identifies potential pain |

eVitals.29

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.29 – Stroke Scale Score | | |

**Definition**

|  |
| --- |
| The findings or results of the Stroke Scale Type (eVitals.30) used to assess the patient exhibiting stroke-like symptoms. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | Yes |
| National Usage | Required | NOT Values | No |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3329001 | | Negative | |
|  | |  | |
| 3329003 | | Non-Conclusive | |
|  | |  | |
| 3329005 | | Positive | |

**NOT Values (NV)**

None

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

None

**Comments**

KEMSIS: Kansas does not allow NEMSIS NOT Values for this element.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Stroke Scale Score is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Stroke Scale Score has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| nemSch\_e008 | Error | When Stroke Scale Score has a Pertinent Negative, it should be empty and it should not have a Not Value (Not Applicable, Not Recorded, or Not Reporting). |
| Ks\_e146 | Warning | Stroke Scale Score required when (eSituation.11) Primary Impression or (eSituation.12) Secondary Impression identify a Stroke or TIA |
| Ks\_e147 | Warning | Stroke Scale Score required when Stroke Scale Type is not blank. |

eVitals.30

|  |  |
| --- | --- |
| Kansas | National |
| eVitals.30 – Stroke Scale Type | | |

**Definition**

|  |
| --- |
| The type of stroke scale used. |

|  |  |  |  |
| --- | --- | --- | --- |
| Kansas Usage | Required | Pertinent Negatives | No |
| National Usage | Required | NOT Values | Yes |
| XML Usage | Required | Is Nillable | Yes |
| Version 3.4 Element | Yes | Recurrence | 1:1 |

**Field Values**

|  |  |  |
| --- | --- | --- |
| **Code** | **Description** | |
|  |  | |
| 3330001 | | Cincinnati Prehospital Stroke Scale (CPSS) | |
|  | |  | |
| 3330004 | | Los Angeles Prehospital Stroke Screen (LAPSS) | |
|  | |  | |
| 3330005 | | Massachusetts Stroke Scale (MSS) | |
|  | |  | |
| 3330007 | | Miami Emergency Neurologic Deficit Exam (MEND) | |
|  | |  | |
| 3330009 | | NIH Stroke Scale (NIHSS) | |
|  | |  | |
| 3330011 | | Other Stroke Scale Type | |
|  | |  | |
| 3330013 | | FAST-ED | |
|  | |  | |
| 3330015 | | Boston Stroke Scale (BOSS) | |
|  | |  | |
| 3330017 | | Ontario Prehospital Stroke Scale (OPSS) | |
|  | |  | |
| 3330019 | | Melbourne Ambulance Stroke Screen (MASS) | |
|  | |  | |
| 3330021 | | Rapid Arterial Occlusion Evaluation (RACE) | |
|  | |  | |
| 3330023 | | Los Angeles Motor Score (LAMS) | |

**NOT Values (NV)**

7701001 – Not Applicable 7701003 – Not Recorded

**Pertinent Negatives**

8801019 – Refused 8801023 – Unable to Complete

**Data Type**

None

**Comments**

NEMSIS: Added to include additional detail on the stroke scale used.

**Validation Rules**

|  |  |  |
| --- | --- | --- |
| nemSch\_e001 | Error | When Stroke Scale Type is empty, it should have a Not Value (Not Applicable, Not Recorded, or Not Reporting, if allowed for the element) or a Pertinent Negative (if allowed for the element), or it should be omitted (if the element is optional). |
| nemSch\_e002 | Error | When Stroke Scale Type has a Not Value (Not Applicable, Not Recorded, or Not Reporting), it should be empty. |
| ks\_e148 | Warning | Stroke Scale Type required when (eVitals.29) Stroke Scale Score is not blank or when the primary or secondary impression includes stroke. |