



Central Ohio Trauma System

An affiliate of the Columbus Medical Association

Figure D – Data Collection Tool r2

PILOT PROJECT – DATA COLLECTION ONLY:

COTS REGIONAL EMS WORKGROUP ON HAND-OFFS

Patient hand-off (EMS to EM staff) Developed - August 15, 2016

CASE TYPE: ___ Trauma ___ Medical ___ Stroke ___ AMI STEMI

Was the patient ___ Stable ___ Urgent ___ Emergent?

WAS THE FOLLOWING INFORMATION GIVEN?

CALL IN?	YES	/	NO	N/A
Name:	YES	/	NO	N/A
DOB:	YES	/	NO	N/A
Past medical history:	YES	/	NO	N/A
Mechanism of Injury	YES	/	NO	N/A
Allergies:	YES	/	NO	N/A
Medications:	YES	/	NO	N/A
Events surround presentation:	YES	/	NO	N/A
Injuries/Problem specifics:	YES	/	NO	N/A
Vital signs:				
Blood pressure	YES	/	NO	N/A
Pulse	YES	/	NO	N/A
Respiratory status	YES	/	NO	N/A
Pulse Ox	YES	/	NO	N/A
GCS	YES	/	NO	N/A
Consciousness	YES	/	NO	N/A
IV access / Fluids	YES	/	NO	N/A
Treatment/interventions:	YES	/	NO	N/A
TOTAL TIME HAND-OFF:				<hr/>
REPORT GIVEN TO	___ RN	___ MD	___ UNKNOWN	

Note – mark all that apply above

Observer transfer of care worksheet for objective data collection.

Return 20 observations (5 in each of the above categories) by **Sept** ____, 2016 to:

Figure D – Data Collection Tool r2 (continued)

This is an optional part of the survey to be completed if time permits.

ASK QUESTIONS TO EMS:

“Hi, I’m _____. We are doing a quality assessment project concerning transfer of care in the ED. Your answers are anonymous.

- 1. How effective was this transfer of care? (1-10, worse-best) _____
- 2. Do you believe staff was listening to your presentation? (1-10) _____

ASK QUESTIONS TO PHYSICIAN / NURSE:

“Hi, I’m _____. We are doing a quality assessment project concerning transfer of care in the ED. Your answers are anonymous.

- 1. How effective was this transfer of care? (1-10, worse-best) _____
- 2. Do you believe you were listening to the presentation? (1-10) _____
- 3. Nurse / Physician _____

ASSESSMENT OF CARE TRANSFER

- 1. Were pertinent aspects of the transfer of care presented: YES / NO
a. If no, what was missing? _____
- 2. Was professionalism maintained between EMS and staff?
a. 1-10, worse-best _____
b. What happened? _____
- 3. Were there significant interruptions/distractions during the transfer of care
YES / NO
- 4. Did these interruptions/distractions jeopardize a good transfer of care?
a. 1-10, worse-best _____

