



TOLEDO FIRE & RESCUE DEPARTMENT



Directive: 24-11 - EMS Incident Report Writing

2024 Directives

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This directive is to add clarity to some questions which have arisen with the new EMS system. Moving forward, crews are to follow the outline below to standardize and streamline the report writing process.

First responding unit (FR) arrives on-scene prior to the medic unit: The Officer on the FR will complete a report and transfer data to the medic unit. The medic unit will import that data and start their report when they receive the patient. There will be (2) completed electronic health records (EHRs) for these incidents.

Medic unit arrives on-scene prior to the FR and then transports the patient: The medic unit will complete the report on patients who are transported to the hospital by TFRD. The FR Unit will not have to complete a report. There will be (1) completed EHR for these incidents.

Medic unit arrives on-scene prior to the FR but does not transport the patient: When the medic unit arrives on scene first and the patient is not transported by TFRD, the following will occur. Either the medic unit will cancel the FR and complete the EHR or if patient care is passed off to the Officer on the arriving FR unit, both the medic unit and the FR will complete an EHR (i.e., AMA, Code18, Treat & Release, Refusal, etc.). This allows documentation of the entire patient interaction. There will be (1 or 2) completed EHRs for these incidents.

First responding unit and medic unit arrive at approximately the same time: The medic unit will complete the EHR if the patient is transported by TFRD. If the patient is left at home or transported by other means (i.e., POV, Taxi, Law Enforcement, etc.) the FR Officer will complete the report. There will be (1) completed EHR for these incidents.

Any TFRD patient transport requires a medic unit EHR to be completed regardless of the above circumstances!

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