

EPCIS

Tables/Fields Set

for Ambulance Providers

Table: Assess_Table

Name	Type	Size	Description
Incident_Number	Text	9 characters	Unique identification number assigned to each EMS incident by the EMS dispatch agency
Assessment_Time	Date/Time		Time at which Assessment was conducted
Systolic_BP	Number (Integer)	3 characters	Patient's systolic blood pressure
Diastolic_BP	Text	3 characters	Patient's diastolic blood pressure
Pulse	Number (byte)	3 characters	Patient's pulse rate
Resp	Number (byte)	3 characters	Patient's respiratory rate
Eye_Opening	Number (byte)	1 character	Patient's Glasgow Coma Scale eye score
Verbal_Response	Number (byte)	1 character	Patient's Glasgow Coma Scale verbal score
Motor_Response	Number (byte)	1 character	Patient's Glasgow Coma Scale motor score
ECG*	Number (byte)	3 characters	Patient's ECG rhythm
Cap_Refill*	Number (byte)	1 character	Patient's Capillary Refill
Pulse_Ox	Number (Integer)	3 characters	Patient's Pulse Oximetry

*See EPCIS Code Sheet

Table: Med_Table

Name	Type	Size	Description
Incident_Number	Text	9 characters	Unique identification number assigned to each EMS incident by the EMS dispatch agency
Medication_No*	Number (Integer)	3 characters	Medication administered
Medication_Time	Date/Time		
EMTP_No	Text	6 characters	Paramedic number (assigned by EMS Agency)
Route*	Text	3 characters	Medication route
Dose	Number	9 characters	Medication dose
Dose Amount*	Number (Integer)	3 characters	Medication unit of measurement
Result	Text	30 characters	Result of medication, after administration

*See EPCIS Code Sheet

Table: Prehosp_Table

Name	Type	Size	Description
Incident_Number	Text	9 characters	Unique identification number assigned to each EMS incident by the EMS dispatch agency
Patient_No	Number (byte)	2 characters	Number assigned to patient in relationship to total number of patients
Number_of_Patients_at_Scene	Number (byte)		Total number of patients at scene
Agency_No	Text	20 characters	For Provider Agency Use
Call_Date	Date/Time		Date of call
Incident_Location	Text	60 characters	Location of incident
Zip_Code	Text	5 characters	Incident Zip Code
Map_Zone*	Text	5 characters	Incident Map Zone
Sub_Zones	Text	10 characters	
Call_Source*	Number (byte)	1 character	Source of call
Call_Type*	Number (byte)	1 character	Type of call
Call_Disposition*	Number (byte)		Disposition of call
Primary_Destination_Decision*	Number (byte)		Reason for Destination Decision
Provider_Agency	Text	3 characters	Identifier assigned by EMS Agency for Provider Agency
Primary_Patient_Attendant*	Text	6 characters	Identifier assigned by EMS Agency for Primary Attendant
Secondary_Patient_Attendant*	Text	6 characters	Identifier assigned by EMS Agency for Secondary Attendant
First_Responder_Unit	Text	20 characters	Name of First Response Unit
First_Responder_Arrival_Time	Date/Time		Time of First Responder arrival on scene
First_Responder_Other_Care	Text	20 characters	Care provided by First Responders
Primary_EMT_Name	Text	25 characters	Other on-scene care giver
Secondary_EMT_Name	Text	25 characters	Other on-scene care giver
Unit_Veh_No*	Text	10 characters	Vehicle ID
Unit_Disp_Time	Date/Time		Dispatch time
Unit_Disp_Code*	Number (byte)	6 characters	Code of dispatch
Unit_Resp_Time	Date/Time		Time enroute
Unit_Arr_Scene_Time	Date/Time		Time arrived on scene
Unit_Dpt_Scene	Date/Time		Time departed scene
Unit_Available	Date/Time		
Unit_Trans_Code*	Number (byte)	6 characters	Code of transport
Unit_Arr_Dest	Date/Time		Time arrived at destination
Unit_Destination	Number (byte)		
Patient_Delivered_To	Text 15		Name of care give who received patient
Receiving_Hospital*	Text	5 characters	Receiving hospital

Table: Prehosp_Table

Name	Type	Size	Description
Patient_LName	Text	20 characters	Patient's last name
Patient_FName	Text	20 characters	Patient's first name
Patient_Gender*	Text	1 character	Patient's gender
Date_of_Birth	Date/Time		Patient's date of birth
Patient_Age	Number (byte)		Patient's age
Patient_Age_Units*	Text	1 character	Age units (years, months, days)
Weight	Integer		Patient's weight
Insurance_Code*	Text	2 characters	Patient's insurance status
SS_or_ID_Nbr	Text	15 characters	Patient's Social Security number
History	Text	255 characters	Medical history of patient
Medications	Text	255 characters	Patient's current medications
Allergies	Text	255 characters	Patient's current allergies
Chief_Complaint	Memo		
Type_of_Patient*	Integer		Type of patient
Protocol_Followed*	Text	6 characters	Protocol followed
Mechanism_of_Injury	Number (byte)	2 characters	Mechanism of injury
Triage_Criteria*	Number (byte)	2 characters	Triage Code
Safety_Equipment_Used_i	Number (byte)		Safety equipment used
Safety_Equipment_Used_2	Number (byte)		Safety equipment used
Safety_Equipment_Used_3	Number (byte)		Safety equipment used
Safety_Equipment_Used_4	Number (byte)		Safety equipment used
Special_Scene_Conditions_i	Number (byte)		Special scene condition
Special_Scene_Conditions_2	Number (byte)		Special scene condition
Base_hospital_Contact*	Number (byte)		
Consult_Time	Date/Time		Time of Base contact
Base_hospital*	Text	5 characters	
MICN	Text	6 characters	
MD	Text	20 characters	
PMD	Text	15 characters	

*See EPCIS Code Sheet

Table: Proc_Table

Name	Type	Size	Description
Incident_Number	Text	9 characters	Unique identification number assigned to each EMS incident by the EMS dispatch agency
Procedure_No	Number (Integer)		
EMTP_No	Text	6 characters	
Choice_i	Number (byte)		
Choice_2	Number (byte)		
Amount	Number (Integer)		
Successful	Yes/No	0 or 1	
Remarks	Text	35 characters	
Time_Performed	Date/Time		
Order_Done	Single		
Not_Charted	Yes/No	0 or 1	
Prior_to_arrival	Yes/No	0 or 1	

*See EPCIS Code Sheet

EPCIS

Codes Sheet

for Ambulance Providers

**EPCIS Code Sets (updated October 2004)
for Ambulance Providers**

CODE	Initial ECG Name
6	Asystole
7	Atrial fibrillation/flutter
9	AV block 1st degree
10	AV block 2nd degree
11	AV block 3rd degree
1	Normal Sinus rhythm
99	Other
8	PSVT
2	Sinus bradycardia
3	Sinus tachycardia
5	Ventricular fibrillation
4	Ventricular tachycardia

CODE	Cap_Refill
1	≤ 2 seconds
2	> 2 seconds

CODE	Route
IV	Intervenous
IM	Intermuscular
IO	Interosseus
ET	ET Tube
SQ	Subcutaneous
SL	Sublingual
PO	By mouth
RTL	Rectal
BVM	BVM
NEB	Nebulizer

CODE	Call_Source
1	911
3	Facility
2	Private

CODE	Call_Type
2	Inter-facility transfer
9	Other
1	Scene
0	Unknown

CODE	Dispatch_Code
1	2
2	3
3	2 to 3
4	3 to 2

CODE	Call_Disposition Name
44	Call cancelled (by unit dispatcher)
42	Dead at scene
43	No patient contact made
45	No treatment required
99	Other
46	Private vehicle transport
41	Released on scene
31	Transport by another unit from scene
21	Transport by unit to a nursing home
10	Transport by unit to ED
11	Transport by unit to hospital (non-ED)
32	Transport by unit to LZ/Airport
20	Transport by unit to non-hospital medical facility
22	Transport by unit to other location
30	Transport by unit to rendezvous point
40	Treatment/transport refused

CODE	Primary_Destination_Decision Name
3	Diversion
2	Hospital order
1	Most accessible receiving facility
9	Other
5	Patient/family request
4	Physician request
8	Triage to Level II Trauma Center
10	Triage to Level III Trauma Center
7	Triage to other specialty center
6	Triage to trauma center

CODE	Hosp_Name	County	City
03001	Sutter Amador Hospital	03	Jackson
05001	Mark Twain St Jos Hospital	05	San Andreas
08001	Sutter Coast Hospital	08	Crescent City
09001	Marshall Hospital	09	Placerville
09002	Barton Memorial Hospital	09	South Lake Tahoe
10004	Cedar Vista Hospital	10	Fresno
10005	Fresno Community Hospital	10	Fresno
10006	Saint Agnes Hospital	10	Fresno
10007	Sierra Community Hospital	10	Fresno
10008	Valley Childrens Hospital	10	Fresno
10009	Valley Medical Center of Fresno	10	Fresno
10010	Veterans Administration Medical Ctn	10	Fresno
20001	Chowchilla District Memorial Hosp.	20	Chowchilla
20002	Madera Community Hospital	20	Madera
22001	John C. Fremont Hospital	22	Mariposa
24001	Bloss Memorial Hospital District	24	Atwater
24002	93rd Strategic Hospital U.S.A.F.	24	Castle AFB
24003	Dos Palos Memorial Hospital	24	Dos Palos
24004	Memorial Hospital Los Banos	24	Los Banos
24007	Mercy Community Medical Center	24	Merced
24008	Mercy Dominican Medical Centerl	24	Merced
29001	Sierra Nevada Memorial Hospital	29	Grass Valley
29002	Tahoe Forest District Hospital	29	Truckee
31001	Sutter Auburn Faith Hospital	31	Auburn
31002	Sutter Roseville Medical Center	31	Roseville
31003	Kaiser Hospital, Roseville	31	Roseville
34001	American River Hospital	34	Carmichael
34002	Mercy San Juan Hospital	34	Carmichael
34003	Vencor Hospital	34	Folsom
34004	Fair Oaks Hospital	34	Fair Oaks
34005	Mercy Hospital of Folsom	34	Folsom
34006	U.S. Air Force Hospital	34	Mather AFB
34007	Kaiser Hospital North, Sacramento	34	Sacramento
34008	Kaiser Hospital South, Sacramento	34	Sacramento
34009	Mercy General Hospital	34	Sacramento
34010	Methodist Hospital-Sacramento	34	Sacramento
34011	Sierra Vista Hospital	34	Sacramento
34013	Sutter Roseville	34	Sacramento
34014	Sutter Memorial Hospital	34	Sacramento
34015	U.C. Davis/Sacramento Medical Ctn.	34	Sacramento
34016	Shriner's Hospital	34	Sacramento
38001	Children's Hospital San Francisco	38	San Francisco
38003	Davies Medical Center	38	San Francisco
38010	San Francisco General Hospital	38	San Francisco
38012	St. Francis Memorial Hospital	38	San Francisco
38013	St. Lukes Hospital	38	San Francisco
38014	St. Mary's Medical Center	38	San Francisco
38015	U.C.S.F. Medical Center	38	San Francisco
38016	Veterans Administration Medical Ctn	38	San Francisco
39001	Doctors Hospital of Lodi	39	Lodi
39002	Lodi Memorial Hospital	39	Lodi
39003	Doctor's Hospital of Manteca	39	Manteca
39004	St. Dominic's Hospital	39	Manteca

CODE	Hosp_Name	County	City
39005	Dameron Hospital	39	Stockton
39006	San Joaquin General Hospital	39	French Camp
39007	St. Joseph's Medical Center	39	Stockton
39009	Sutter Tracy Community Hospital	39	Tracy
50001	Memorial Hospital Ceres	50	Ceres
50002	Doctor's Medical Center	50	Modesto
50003	Memorial Medical Center	50	Modesto
50004	Modesto City Hospital	50	Modesto
50007	Oak Valley District Hospital	50	Oakdale
50009	Emanuel Medical Center	50	Turlock
55001	Sonora Community Hospital	55	Sonora
55002	Tuolumne General Hospital	55	Sonora
57002	Sutter Davis Hospital	57	Davis
57003	Woodland Memorial Hospital	57	Woodland
57004	Yolo General Hospital	57	Woodland
99001	Carson-Tahoe Hospital	99	Carson City
99002	Washoe Medical Center	99	Reno
99003	St. Mary's Regional Medical Center	99	Reno
99999	Outcome for Specific PCRs	98	

CODE	Patient_Gender
M	Male
F	Female
O	Other

CODE	Patient_Age_Units
Y	Years
M	Months
D	days

CODE	Insurance_Code
00	Unknown
01	Self pay/Uninsured
02	HMO
03	PPO
04	Private Insurance
05	Champus
06	Workers Comp
07	Medicare
08	MediCal
09	Victims Assistance
10	California Childrens Services
11	County Program (MIA)
19	Other Public Assistance
99	Other

CODE	Type_of_Patient Name
101	Abdominal pain
102	Airway obstruction
103	Allergic reaction
104	Altered level of consciousness
105	Cardiac Arrest
122	Cardiac dysrhythmia
106	Chest discomfort, cardiac
107	Chest discomfort, non-cardiac
108	CVA/Stroke/TIA
109	Diabetes complication
110	Drug/alcohol intoxication
114	Heat illness
112	Hypertension
111	Hypotension/non-traumatic shock
113	Hypothermia/frostbite
200	Obstetric
199	Other Illness
115	Pain
116	Poisoning/OD
300	Psychiatric
118	Respiratory distress
119	Seizure
121	Syncope/near-Syncope
400	Trauma/traumatic shock
120	Unconscious, cause unknown

CODE	Protocol_Code
554.01	Cardiopulmonary Arrest - VF/VT
554.02	Cardiopulmonary Arrest - PEA
554.03	Cardiopulmonary Arrest - Asystole
554.04	Dysrhythmias - Bradycardia
554.05	Dysrhythmias - V.T., pulse present
554.06	Dysrhythmias - SVT
554.07	Wide Complex Tach of Uncertain type w/Pulses
554.08	Atrial Fibrillation - Atrial Flutter
554.09	Corinary Eschemic Chest Discomfort
554.10	Congestive Heart Failure
554.21	Airway Obstruction - Stridor
554.22	COPD - Asthma - Bronchospasm
554.23	Tension Pneumothorax
554.31	ALOC
554.32	Acute Cerebral Vascular Accident
554.33	Status Seizures
554.41	Non-Traumatic Shock
554.42	Blood Sugar Emergencies
554.43	Allergic Reaction / Anaphylaxis
554.44	Adult Pain Management
554.45	Abdominal Pain
554.51	Beta Blocker and Calcium Channel Blocker Overdose
554.52	Caustics - Corrosives
554.53	Cyclic Antidepressants
554.54	Dystonic Reactions to Phenothiazines
554.55	Narcotics

CODE	Protocol_Code
554.56	Organophosphates
554.57	Petroleum Distillates
554.58	Amphetamines/Cocaine OD or Psychosis w/ Agitation
554.61	Envenomation
554.62	Hypothermia
554.63	Frostbite
554.64	Heat Illness
554.71	Child Birth
554.81	Burns
554.82	Traumatic Shock
554.83	Traumatic Cardiac Arrest
554.84	Head - Neck - Facial Trauma
554.85	Chest Trauma
554.86	Abdominal Trauma
554.87	Extremity Trauma
555.10	Neonatal Resuscitation
555.11	Pediatric Ventricular Tachycardia
555.12	Pediatric Pulseless Electrical Activity
555.13	Pediatric Asystole
555.14	Pediatric Bradycardia
555.15	Pediatric Tachycardia w/Pulses
555.21	Pediatric Airway Obstruction
555.22	Pediatric Respiratory Arrest
555.23	Croup/Epiglottitis
555.31	Pediatric Altered Level of Consciousness
555.32	Pediatric Seizure
555.41	Pediatric Shock
555.42	Pediatric Allergic Reaction
555.43	Pediatric Pain Management
555.51	Pediatric Caustics - Corrosives
555.52	Pediatric Cyclic Antidepressants
555.53	Pediatric Dystonic Reaction to Phenothiazines
555.54	Pediatric Narcotics
555.55	Pediatric Organophosphates
555.56	Pediatric Petroleum Distillates
555.61	Pediatric Envenomation
555.62	Pediatric Hypothermia
555.63	Pediatric Frost Bite
555.64	Pediatric Heat Illness
555.81	Pediatric Burns
555.82	Pediatric Traumatic Shock
555.83	Pediatric Traumatic Arrest
555.84	Pediatric Head - Neck - Chest Trauma
555.85	Pediatric Chest Trauma
555.86	Pediatric Abdominal Trauma
555.87	Pediatric Extremity Trauma
99999	N/A

CODE	Triage_Criteria
03	T1_GCS<5 ADULT TIER I: GCS Motor Score <5
04	T1_SYS<85 ADULT TIER I:Systolic BP <85 (Age 14 or greater)
05	T1_PEN ADULT TIER I: Penetrating trauma to: head, neck,chest or torso
06	T1_J_CARD ADULT TIER I: Paramedic/Nurse judgement- Cardiac Tamponade
07	T1_J_AIR ADULT TIER I: Paramedic/Nurse judgement- Inadequate airway protection
08	T1_J_OBS ADULT TIER I: Paramedic/Nurse judgement- airway obstruction
09	T1_J_FLAIL ADULT TIER I: Paramedic/Nurse judgement- flail chest
10	T1_J_TENSION ADULT TIER I: Paramedic/Nurse judgement- tension pneumothorax
11	T1_J_PNEUMO ADULT TIER I: Paramedic/Nurse judgement- open pneumothorax
12	T1_J_HEMO ADULT TIER I: Paramedic/Nurse judgement- massive hemothorax
13	T1_J_HYPO ADULT TIER I: Paramedic/Nurse judgement- severe hypothermia
14	T1_J_HEM ADULT TIER I: Paramedic/Nurse judgement- severe shock from hemorrhage
15	T2_PEN TIER II: Penetrating injuries to extremities proximal to elbow and knee
16	T2_FLAIL TIER II: Flail Chest
17	T2_BURN TIER II: Burns less than or equal to 15% TBSA
18	T2_2BONE TIER II: Two or more proximal long-bone fractures
19	T2_PELFX TIER II: Pelvic fractures
20	T2_SMPFX TIER II: Open and depressed skull fracture
21	T2_PARAL TIER II: New Onset traumatic paralysis
22	T2_AMP TIER II: Amputation proximal to wrist and ankle
23	T2_FALL TIER II: Falls greater than 20 feet
24	T2_THROWN TIER II: Pedestrian throw or run over by vehicle
25	T2_PREG TIER II: Combination Trauma with Pregnancy greater than 20 weeks gestational
26	T2_J_CARD TIER II: Paramedic/Nurse judgement- cardiac tamponade
27	T2_J_AIR TIER II: Paramedic/Nurse judgement- inadequate airway protection
28	T2_J_OBS TIER II: Paramedic/Nurse judgement- airway obstruction
29	T2_J_FLAIL TIER II: Paramedic/Nurse judgement- flail chest
30	T2_J_TENSION TIER II: Paramedic/Nurse judgement- tension pneumothorax
31	T2_J_PNEUMO TIER II: Paramedic/Nurse judgement- open pneumothorax
32	T2_J_HEMO TIER II: Paramedic/Nurse judgement- massive hemothorax
33	T2_J_HYPO TIER II: Paramedic/Nurse judgement- severe hypothermia
34	T2)J_HEM TIER II: Paramedic/Nurse judgement- severe shock from hemorrhage
35	TRAN_HL Transfer for Higher Level of Care (excluding isolated ortho injuries)
41	PED_GCS<5 PEDIATRIC: GCS Motor <5 AND SYSBP <80 (age 6-13), SYSBP <70 (age under 6)
42	PED_AIR PEDIATRIC: Airway=Advanced airway or continuous support of airway
43	PED_PEN PEDIATRIC: Penetrating trauma: head, neck, chest, torso or proximal to elbow/
44	PED_FLAIL PEDIATRIC: Flail chest
45	PED_PARAL PEDIATRIC: Traumatic paralysis
46	PED_PELVIC PEDIATRIC: Pelvic Fracture
61	BURN_>15% BURN: Burns involving >15% TBSA
62	BURN_THICK BURN: Partial/Full thickness burns of face, perineum, or circumferential to
63	BURN_WHEEZ BURN: Burn with airway compromise of wheezing
64	BURN_STRID BURN: Burn with airway compromise of strider
65	BURN_CARBON BURN: Burn with airway compromise of carbonaceous sputum
66	BURN_NASAL BURN: Burn with airway compromise of nasal singeing
67	BURN_FACIAL BURN: Burn with airway compromise of facial edema
68	BURN_INTUB BURN: Burn with airway compromise of intubation
69	BURN_ELEC BURN: Electrical injuries, especially those resulting in loss of distal pulses

CODE	Mechanism_of_Injury Name
15	Aircraft
71	Animal
13	Bicycle crash
65	Electrical
63	Explosion
51	Fall
62	Fire
31	Gunshot
64	Hazardous Material
81	Machinery
11	Motor Vehicle crash
12	Motorcycle crash
41	Near drowning/drowning
33	Other Assault
97	Other mechanism, blunt
99	Other mechanism, not specified
98	Other mechanism, penetrating
21	Pedestrian vs vehicle
91	Recreation/Sport
61	Smoke/fumes
32	Stabbing
14	Watercraft

CODE	Disposition
3	Admit - General Unit
1	Admit - ICU/CCU
4	Admit - L/D
2	Admit - OR
5	AMA
7	D/C from ED
6	Eloped from ED
8	Incarceration
9	Morgue
10	Transfer - Acute Hospital
12	Transfer - ECF
11	Transfer - Psych. Facility
13	Unknown

CODE	Trauma_Level
5	ED
4	EDAT
1	Level 1
2	Level 2
3	Level 3

CODE	Trauma_Specialty
1	Burn
3	NA
2	Pedi

CODE	Disposition_Entry
5	A - AMA
12	C - Convalescent Home Transfer
7	D - D/C from ED
6	E - Eloped from ED
3	G - General Unit Admit
1	I - ICU/CCU Admit
8	J - Incarceration
4	L - L/D Admit
9	M - Morgue
2	O - OR Admit
11	P - Psych. Facility Transfer
10	T - Transfer Acute Hospital
13	U - Unknown

CODE	ED_Disposition
1	1 - Released from ED
10	10 - OR
2	2 - Admit ICU/CCU
3	3 - Admit General
4	4 - DOA/died in ED
5	5 - Transfer
6	6 - AMA
7	7 - Unknown
8	8 - Surgery
9	9 - Cardiac Cath Lab

CODE	Medication Name
401	Activated charcoal
402	Adenosine (II)
403	Albuterol (Proventil)
500	Aspirin
405	Atropine
404	Atrovent
406	Bretylium (Bretylol)
407	Calcium Chloride
408	Dextrose 25% (D25)
409	Dextrose 50% (D50)
410	Diazepam (Valium)
411	Diphenhydramine (Benadryl)
412	Dopamine (Intropin)
413	Epinephrine
414	Furosemide (Lasix)
415	Glucagon (I)
301	Glucose, oral
416	Ipecac, syrup of
417	Isoproterenol (Isuprel)
418	Lidocaine (Xylocaine)
421	Morphine
422	Naloxone (Narcan)
423	Nitroglycerine
499	Other ALS medication
425	Oxytocin
501	Paralytic Agent

CODE Medication Name
426 Potassium Chloride
427 Sodium bicarbonate

CODE Dose Amount
401 Gm
427 M Eq
426 M Eq in NS
412 Mcg/Kg-Min
417 Mg/250 NS
416 MI
301 Tube
425 U

CODE Procedure_Name
201 12-Lead EKG
112 Airway adjuncts, OPA/nasal
111 Airway oral care
101 Assessment
202 Blood draw
221 Cardiovert
222 Carotid sinus massage
121 CPR
211 Cricothyrotomy, needle
210 Cricothyrotomy, surgical
223 Defibrillation
122 Defibrillation, automatic
123 Defibrillation, semi-automatic
131 Dress wounds/bandaging
213 Endotracheal intubation, nasal
212 Endotracheal intubation, oral
214 EOA/EGA/EGTA
205 External pacing
231 Fluid challenge
241 Foley catheter
203 Glucose determination
132 Hemorrhage control
232 Heparin lock
142 Immobilize back (back board)
233 Intraosseous infusion
151 IV monitoring
261 MAST
242 Naso-gastric tube
215 Needle thoracostomy
161 Obstetric assistance
299 Other ALS procedure
399 Other BLS Procedure
113 Oxygen mask/cannula
234 Peripheral IV
217 Plural Decompression
116 PPV, BVM
117 PPV, demand ventilator
115 PPV, mouth to mask
114 PPV, mouth to mouth/nose
251 Procainamide monitoring

CODE	Procedure_Name
171	Psychiatric assistance
204	Pulse oximetry
216	Removal of foreign body using McGill Forceps
143	Restraints
235	Saline lock
181	Snake bite care
141	Spinal Immobilization
144	Splint
119	Stoma Care
118	Suction
145	Traction splint
224	Vagal maneuver

CODE	Safety Equipment Used Name
5	Airbag
4	Child safety seat
8	Flotation Device
10	Harness
6	Helmet
2	Lap restraint
1	None
99	Other
9	Personal Protective Equip
7	Protective clothing
3	Shoulder restraints

CODE	Scene_Conditions
7	AMA
1	Complicated extrication
2	Do not resuscitate order form/medallion
3	Hazardous material/contaminated Pt.
4	Medical personnel on scene
0	None identified
99	Other
8	Possible crime scene
5	Possible provider exposure
6	Unsafe or unsecured scene

CODE	Intent_of_Injury
1	Intentional
2	Unintentional
0	Unknown or N/A

CODE	Hosp_Consult
2	Contact attempted but not made
1	Contact made
3	Contact not attempted
5	Early Trauma Notification
4	Report only

CODE	Destination
1	ED
2	Hosp
4	LZ
5	Other
3	Rdvs

CODE	Ectopy
0	None
1	PAC
4	PAC/PVC
2	PJC
3	PVC

CODE	tblCodes_Fields
6	Call Disposition
1	Call Type
11	Code to Hosp
20	Destination
12	Destination Decision
10	Dispatch Code
27	Ectopy
7	ED Disposition
18	EMTP Position
19	Hospital Consult
8	Initial ECG
15	Intent of Injury
4	Mechanism of Injury
9	Medication
16	Meds and Equip Used
26	Other Rhythm
17	Other Times
22	Position
13	Procedures
14	Safety Equipment
23	Skin Color
25	Skin Moisture
24	Skin Temp
3	Type of Patient
2	Type Run