AZ PIERS
Registry Users Group
(EMSRUG)

Agenda
Monday April 27, 2015 – 10:00 a.m. – 12:00 p.m.
Arizona Dept. of Health Services
150 North 18th Avenue Phoenix AZ 85007
5th Floor – 540A Conference Room
AZ PIERS Contacts:
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A) Welcome & Introductions

B) AZ-PIERS Version 2 & Version 3 Timeline Update

1) Updated NEMSIS V2 closing, and V3 3.3.4 to 3.4 transition

Defined: Major v. Minor Revisions

- A major release would be any change to the underlying XML structure and breaks backward compatibility.
- A minor release would be any change that does not change the underlying XML structure and does not break backward compatibility.

National NEMSIS Timelines/Deadlines

- Version 3.3.4 will not close on 12/31/2015 and will now be maintained until 12/31/2017
- Version 3.4 will still be available to move to and will become required affective 1/1/2018.
- Major revisions will occur on a four year cycle (next major change could be 2019).
- It is recommended that NEMSIS continue to collect version 2 from states until 12/31/2016.

2) AZ-PIERS V2 closing/ updating recommendations, comments

a) A revised closing date was discussed. Proposal to move AZ-PIERS V2 closing out past the current Oct. 2015 date. EMSRUG agreed to move the AZ-PIERS V2 closing out to April 2016. This new closing date will allow for flexibility and additional time for agencies to transition to V3. The primary reason for shifting this deadline is that agencies switching vendors by the end of 2016 will need to build this cost into their new fiscal year, which would start July 1, 2016. To do this, agencies would normally need to anticipate this need by no later than April 2016 in order to build the cost into their budgets.

3) AZ-PIERS V3 update

a) How will AZ-PIERS work with the national standardized lists NEMSIS requires to be used in Version 3?

Values active in AZ-PIERS v3 are drawn from large standardized national lists. Given the size of these lists, a limited number of these values are active, while the rest are available but remain inactive. How it affects end users:

- Agencies using the AZ-PIERS directly can use only active values. **If a value is needed but is missing, the agency should notify Anne Vossbrink and request it be activated/added.**
- Agencies sending ePCRs from a stand-alone system or 3rd party vendor may send any valid value from the national list, whether or not it is active or inactive in AZ-PIERS.
    - If the code sent is not valid, has no fall back code, or is not mapped to a valid code, the value will not come through. **The record or the entire file may be rejected from the AZ-PIERS system.**

b) V3 Protocols needed

- Please see the current list of ALL POSSIBLE PROTOCOL codes in AZ-PIERS V3. If your agency uses any protocols that are not on this list, please email Anne Vossbrink with what should be added. Otherwise, the code/protocol will either not be available to select, not import into AZ-PIERS, or will cause the ePCR to be rejected.

Code	Value
it9914.017	Abdominal Injuries (Penetrating)
9914001	Airway
9914003	Airway-Failed
9914005	Airway-Obstruction/Foreign Body
9914007	Airway-Rapid Sequence Induction (RSI-Paralytic)
9914009	Airway-Sedation Assisted (Non-Paralytic)
it9914.004	Automatic External Defibrillator (AED)
9914011	Cardiac Arrest-Asystole
9914169	Cardiac Arrest-Do Not Resuscitate
9914013	Cardiac Arrest-Hypothermia-Therapeutic
9914019	Cardiac Arrest-Post Resuscitation Care
9914015	Cardiac Arrest-Pulseless Electrical Activity
9914171	Cardiac Arrest-Special Resuscitation Orders
9914017	Cardiac Arrest-Ventricular Fibrillation/ Pulseless Ventricular Tachycardia
it9914.005	Cardiogenic Shock
it9914.016	Chemical Burns
9914021	Environmental-Altitude Sickness
9914023	Environmental-Cold Exposure
9914025	Environmental-Frostbite/Cold Injury
9914027	Environmental-Heat Exposure/Exhaustion
9914029	Environmental-Heat Stroke/Hyperthermia
9914031	Environmental-Hypothermia
9914033	Exposure-Airway/Inhalation Irritants
9914035	Exposure-Biological/Infectious
9914037	Exposure-Blistering Agents
9914167	Exposure-Carbon Monoxide
9914039	Exposure-Carbon Monoxide/Smoke Inhalation
9914041	Exposure-Chemicals to Eye
9914043	Exposure-Cyanide

9914045	Exposure-Explosive/ Blast Injury
it9914.009	Exposure-Hazardous Material Exposure
9914047	Exposure-Nerve Agents
9914049	Exposure-Radiologic Agents
9914173	Exposure-Smoke Inhalation
it9914.015	General Bariatric Patient Management
it9914.003	General-Air Medical Transport
9914051	General-Back Pain
it9914.002	General-Behavioral/Combative Patient
9914053	General-Behavioral/Patient Restraint
9914055	General-Cardiac Arrest
9914175	General-Community Paramedicine / Mobile Integrated Healthcare
9914057	General-Dental Problems
9914059	General-Epistaxis
9914177	General-Exception Protocol
9914179	General-Extended Care Guidelines
9914061	General-Fever
9914063	General-Individualized Patient Protocol
9914065	General-Indwelling Medical Devices/Equipment
9914181	General-Interfacility Transfers
9914067	General-IV Access
9914185	General-Law Enforcement - Assist with Law Enforcement Activity
9914183	General-Law Enforcement - Blood for Legal Purposes
9914069	General-Medical Device Malfunction
9914187	General-Neglect or Abuse Suspected
it9914.012	General-Non EMS Medical Personnel On-Scene
9914071	General-Pain Control
9914189	General-Refusal of Care
9914073	General-Spinal Immobilization/Clearance
9914075	General-Universal Patient Care/ Initial Patient Contact
it9914.006	Hypothermia (Severe - with No Signs of Life)
9914077	Injury-Amputation
9914079	Injury-Bites and Envenomations-Land
9914081	Injury-Bites and Envenomations-Marine
9914083	Injury-Bleeding/ Hemorrhage Control
9914085	Injury-Burns-Thermal
9914087	Injury-Cardiac Arrest
9914089	Injury-Crush Syndrome
9914091	Injury-Diving Emergencies
9914093	Injury-Drowning/Near Drowning
9914095	Injury-Electrical Injuries
9914097	Injury-Extremity
9914099	Injury-Eye
9914101	Injury-Head

it9914.014	Injury-Hypovolemic Shock (Traumatic Shock)
9914103	Injury-Impaled Object
9914191	Injury-Mass/Multiple Casualties
9914105	Injury-Multisystem
it9914.001	Injury-Sexual Assault
9914107	Injury-Spinal Cord
9914193	Injury-Thoracic
9914109	Medical-Abdominal Pain
9914195	Medical-Adrenal Insufficiency
9914111	Medical-Allergic Reaction/Anaphylaxis
9914113	Medical-Altered Mental Status
9914197	Medical-Apparent Life Threatening Event (ALTE)
9914115	Medical-Bradycardia
9914117	Medical-Cardiac Chest Pain
9914119	Medical-Diarrhea
9914121	Medical-Hyperglycemia
9914123	Medical-Hypertension
9914125	Medical-Hypoglycemia/Diabetic Emergency
9914127	Medical-Hypotension/Shock (Non-Trauma)
9914129	Medical-Influenza-Like Illness/ Upper Respiratory Infection
it9914.010	Medical-Left Ventricular Assist Device Management
9914131	Medical-Nausea/Vomiting
it9914.011	Medical-Newborn Care
it9914.013	Medical-Septic Shock or Spesis
it9914.007	Minimum Landing Zone Area
it9914.008	Respiratory Arrest
it9914.018	Spinal Motion Restriction

C) V3 Validation Rules & Comparisons Draft - & State Schematron

1) List of V3 Validation Rules & Validation Rule Comparisons: Validation Rules have been completed. Please email Anne Vossbrink with any questions or issues with the validation rules function or an issue. See #3 below to view V3 rules.
2) State Schematron status: The AZ-PIERS State Schematron is up and running. At this time, all State Schematron levels (with the exception of the requirement of a Disposition) are set to ‘Warning’. This level will allow vendors and agencies submitting V3 data files to AZ-PIERS to receive warnings on State Schematron errors but will still allow the data to import with the errors. The State Schematron rule level will be upgraded to ‘error’ or ‘fatal’ once an initial period has passed, to allow for agency and vendor adjustments. Estimated date is Dec. 2015.
3) A separate ‘view’ only account will be set up for vendors to allow them to see all the validation rules, comparisons, and active data values. Agencies may also use this account to view the Validation Rules.
    - Username: AZView Password: View3

D) Hospital Name Changes

For a complete list of destination codes in AZ-PIERS log into:
AZ-PIERS V2: Data Exchange → NHTSA/NISE 2.2.1 XML Data Exchange → Getting Started → Destination (E20.2) Code List
Or
AZ-PIERS V3: Community → Library → select 'Facilities' under Find Books and click Search → Select "AZ-PIERS V3 Facilities"

Existing Hospitals with name changes (MED Code did not change)

Name	Code	Address	City	County	State	Postal Code
Abrazo Arizona Heart Hospital	MED1442	1930 E. Thomas Rd.	Phoenix	Maricopa	AZ	85016
Abrazo Arrowhead Campus (was Arrowhead Hospital)	MED0209	18701 N. 67th Ave.	Glendale	Maricopa	AZ	85308
Abrazo Central Campus (was Phoenix Baptist Hospital)	MED0228	2000 W. Bethany Home Rd.	Phoenix	Maricopa	AZ	85015
Abrazo Maryvale Campus (was Maryvale Hospital)	MED0224	5102 W. Campbell Ave.	Phoenix	Maricopa	AZ	85031
Abrazo Scottsdale Campus (was Paradise Valley Hospital)	MED2149	3929 E. Bell Rd.	Phoenix	Maricopa	AZ	85032
Abrazo West Campus (was West Valley Hospital)	MED2640	13677 W. McDowell Rd.	Goodyear	Maricopa	AZ	85338
Banner - University Medical Center Phoenix Campus (was Good Sam)	MED0219	1111 E. McDowell Rd.	Phoenix	Maricopa	AZ	85006
Banner - University Medical Center South Campus	MED2863	2800 E. Ajo Way	Tucson	Pima	AZ	85713
Banner - University Medical Center Tucson Campus	MED0257	1501 N. Campbell Ave.	Tucson	Pima	AZ	85724
Greenbaum Specialty Surgical Hospital	MED2568	3535 N. Scottsdale Rd.	Scottsdale	Maricopa	AZ	85251
HonorHealth Deer Valley Medical Center (was JCL Deer Valley)	MED0230	19829 N. 27th Ave.	Phoenix	Maricopa	AZ	85027
HonorHealth John C. Lincoln Medical Center (was JCL North Mountain)	MED0222	250 E. Dunlap Ave.	Phoenix	Maricopa	AZ	85020
HonorHealth Scottsdale Osborn Medical Center	MED0235	7400 E. Osborn Rd.	Scottsdale	Maricopa	AZ	85251
HonorHealth Scottsdale Shea Medical Center	MED0236	9003 E. Shea Blvd.	Scottsdale	Maricopa	AZ	85260

HonorHealth Scottsdale Thompson Peak Medical Center	MED3513	7400 E. Thompson Peak Pkwy.	Scottsdale	Maricopa	AZ	85255

New Hospitals with new MED Codes

Name	Code	Address	City	County	State	Postal Code
Dignity Health Arizona General Hospital (Laveen)	MED5829	7171 South 51st Avenue	Laveen	Maricopa	AZ	85339
Dignity Health Arizona General Hospital Emergency (Chandler)	MED6089	2977 E. Germann Rd.	CHANDLER	MARICOPA	AZ	85286
Green Valley Hospital	MED6142	4455 S. I-19 Frontage Rd.	GREEN VALLEY	PIMA	AZ	85614
Phoenix Children's Hospital - Gilbert	MED5828	3555 South Val Vista Drive	Gilbert	Maricopa	AZ	85297
Quail Run Behavioral Health	MED5753	2545 W. Quail Ave.	PHOENIX	MARICOPA	AZ	85027
TMC - Geropsychiatric Center at Handmaker	MED5972	2221 N. Rosemont Blvd., Bldg 3, Suite 200	Tucson	Pima	AZ	85712

Hospital with new name and new address but same MED Code

Name	Code	Address	City	County	State	Postal Code
Canyon Vista Medical Center	MED0198	5700 E Highway 90	Sierra Vista	Cochise	AZ	85635

Canyon Vista Medical Center is a new name and address but uses the same MED Code as what had been the now closed Sierra Vista Regional Medical Center

E) Discussion of Premier EMS Agency Program requirements – Jim Bratcher

Premier EMS Agency Program (Rogelio)

- EMS Agencies discussed the various levels of the Premier EMS Agency Program. Currently, to achieve participating status, agencies need to meet three of the five requirements, whereas to achieve the premier level agencies need to attain all five requirements for recognition.
- Discussion followed regarding the most difficult step in attaining premier level: data submission. An idea was discussed of using Participating status as a stepping stone to Premier status, with a limited time to reach premier status.
- Also discussed potentially updating the guidelines to include a Provisional premier level and potentially remove Participating status.
- Provisional premier agencies will have a timeline of 6 months to submit data.
- Proposed PEAP policy changes will be distributed on list serve for further feedback.

F) Hospital Hub
https://azemsis.azdhs.gov/azhub/default.cfm

- Overview of new Hospital Hub was given in a Demo Destination hospital. Hospitals can remain on Hospital Dashboard or move to Hospital Hub. Eventually all hospitals will need to move to hospital hub as agencies move to the new national Version 3 data standard (AZ-PIERS V3 for Arizona).

Hospital Dashboard allows for viewing of Version 2 format ePCRs only
Hospital Hub allows for viewing of Version 2 and Version 3 format ePCRs

For access, please contact Anne.Vossbrink@azdhs.gov

G) Version 3 Data Element & Value Usage

1) dConfiguration.01-.05 – we will not be importing these values into a state site (per NEMSIS' recommendation). This means each agency can send in whatever they choose because the import into our site will essentially ignore them. When we export to NEMSIS, these values will be configured in our Elite site and will be the same for all agencies.

2) Differences between eRecord.01, eResponse.03, eResponse.04, eResponse.13, eResponse.14

   a) These definitions for and usage of these elements have fallen into the category of frequently asked questions for AZ-PIERS V3 and as more agencies start planning their transition and set up, their proper use will likely come up often.
   Karen Jacobsen at NEMSIS sent some definitions and examples which are summed up below.

<u>Difference and usage of elements:</u>

1. eRecord.01 - Patient Care Report Number
2. eResponse.03 - Incident Number
3. eResponse.04 - EMS Response Number
4. eResponse.13 - EMS Vehicle (Unit) Number
5. eResponse.14 - EMS Unit Call Sign

- The EMS Response Number (eResponse.04) is assigned to the unit responding to an incident/event/call. Within ImageTrend it has historically been referred to as the Call Number (V2).
- The EMS Vehicle (Unit) Number (eResponse.13) is how each particular physical unit is identified. This could be Ambulance 1, Medic 4, Unit 3, Engine 11, Rescue 7, 220, 220, 307, 308, 309, etc.
    - An EMT could work out of multiple ambulances in one shift - ex: 3 ambulances in a 12 hour shift. The EMT's call sign remained the same but the physical vehicle number identifier changed.
- The EMS Unit Call Sign (eResponse.14) is how dispatch refers to the unit being dispatched. This could be the same as the EMS Vehicle (Unit) Number (eResponse.13).

- It depends on the size of the EMS agency. Smaller EMS agencies frequently use the same identifier for EMS Vehicle (Unit) Number (eResponse.13) as for EMS Unit Call Sign (eResponse.14).
- The EMS Unit Call Sign may also identify the capabilities of the Unit Crew. For example, an ambulance service used the leading number "2…or 200 numbers" to refer to an ALS unit. 500 numbers referred to a BLS unit.
- Some numbering conventions determine time of day the crew is working. There are many various scenarios and implementations across this nation.

<u>A Senario</u>
My crew number…or call sign is 223. The EMS Vehicle (Unit) Number (eResponse.13) I'm working in is called 220 (with a vin of 01c09nfd3q4).
I am dispatched to a nursing home with food poisoning… I will have:

1) An Incident Number (eResponse.03)
    a. An identifier for the 'incident'. There may be more than one ambulance dispatched to the event and more than one patient.
    b. For the same EMS agency the Incident Number should be the same for every EMS Unit dispatched to the incident.
2) An EMS Response Number (eResponse.04)
    a. To differentiate between my unit and other EMS units each unit should have its own Response Number
3) EMS Vehicle (Unit) Number (eResponse.13): 220
    a. The physical identifier of the physical ambulance.
4) EMS Unit Call Sign (eResponse.14) : 223
    a. The radio number for the crew or the EMS agency.
5) Patient Care Report Number (eRecord.01): For each patient a unique PCR # will be created

H) 2015 meeting scheduler – 150 N. 18th Ave. Suite 540, Phoenix, AZ 85007
Call in and iLinc join information will be sent out prior to each EMSRUG in the agenda

July 20th 10:00am – 12:00pm
Oct. 26th 10:00am – 12:00pm

I) Announcements

- Ceret Clark from EPIC TBI Project at UofA Emergency Medicine Department will be requesting access to records and will require approval by each agency – just email Anne Vossbrink to add the rights.

J) Questions/Requests

K) Topics of Future Discussion as proposed by group

L) Open floor