	H03.1 - PATIENT CARE MAP FORMAT	
	Version date: 2022-07-07	REFERENCE

The EMS/PT patient care maps are guidelines by which a clinical condition or patient care situation is to be managed, when all indications are met, and no contraindications exist.

Each clinical situation is unique and paramedics should use their best judgement in determining the appropriate management for the particular circumstances.

Appendix A illustrates an example of the standard format for patient care maps.

1. The patient care maps are listed in sections A through H in the tables of contents by both alphanumeric identifier and alphabetically.
2. The header appears on page 1 only. The page number appears at the top right corner of each page. The alphanumeric identifier and a brief running title are located at the bottom left corner of each page.
3. The top right row of the header on the front page will contain the alphanumeric identifier and title of each document.
4. The left column of the second right row contains the age group if applicable. If no age group is specified, the document applies to all ages.


Different care maps and medication orders may apply to patients of different age. These cohorts are standardized as follows, and may be indicated by a suffix in the map's alphanumeric indicator (*eg. E04A ACS & STEMI - ADULT; E02AB AGITATION - ADULT & ADOLESCENT*). When a care map applies to patients of all ages, or a clinical condition (rather than an age cohort) the suffix will be deleted (*eg. D02 - PREHOSPITAL DELIVERY*).

- ADULT (A): seventeen (17) years and older
 - ADOLESCENT (B): - ten (10) up to seventeen (17) years
 - CHILD (C): one (1) up to ten (10) years
 - INFANT (D): 72 hours up to twelve (12) months
 - NEWBORN (E): birth up to seventy-two (72) hours post-partum
5. The right column of the second row contains the care map category. The care maps are grouped into the following categories:
 - Section A - POLICIES & PROCEDURES
 - Section B - DESTINATION
 - Section C - RESUSCITATION
 - Section D - MATERNAL & NEWBORN CARE
 - Section E - MEDICAL CONDITIONS
 - Section F - TRAUMA
 - Section G - PATIENT TRANSPORT
 - Section H - REFERENCES
 6. The third row contains the scope of work statement that indicates the level of work scope to which the medication standing order applies. The work scopes are represented by three-letter identifiers.
 - **ALL** - Paramedics with all work scopes will follow this care map.

- **EMR** - Paramedics with the basic and primary work scopes will follow this care map.
 - **PCP** - Paramedics with the primary and intermediate work scopes will follow this care map.
 - **ICP** - Paramedics with the intermediate work scope will follow this care map.
7. In some circumstances some steps in a care map will apply to all paramedics, while some may apply to a specific work scope (appendix B).
 - **ALL** - Paramedics with all work scopes will follow this care map, except as indicated by **PCP** (primary and intermediate work scopes only).
 8. The **VERSION DATE** is important for ensuring that the most up-to-date document is being used.
 9. The **EFFECTIVE DATE** indicates the day on which the care map comes into effect. It will usually be different than the version date. New or revised care maps will always come into effect at 0700 hr, unless stated otherwise.
 10. Most patient care maps will have a **FLOW CHART** that will help with a quick review of the approach to a clinical condition.

In each flow chart there may be superscript numbers that refer to specific items in the notes section (appendix C).
 11. Where applicable, a care map may include a **QUICK REFERENCE GUIDE** (QRG) which may illustrate a key medication dose, age-adjusted vital signs, or other information that will be helpful at the point of care.
 12. The **INDICATIONS** section includes the medical conditions under which a particular care map is to be applied.
 13. The **CONTRAINDICATIONS** includes the circumstances under which a care map is not to be applied.
 14. The **NOTES** section will include more detailed information that helps in the correct application of various steps in the care map. This section may also highlight pertinent information from the training materials for this care map.
 15. The **LINKS** section will include other documents related to the care map.
 16. The **APPROVAL** section must be signed, there must be an implementation date indicated (7) , and the must be no DRAFT watermark for a version to be in effect.
 17. The **VERSION CHANGES** sections will include the most recent revisions to this current version of each document. The tracking of historical changes will be listed in **SECTION X - CHANGE TRACKING**.
 18. Some care maps may have additional information in the form of an **APPENDIX**.

EXAMPLE A: SAMPLE PATIENT CARE MAP FORMAT

	ALPHANUMERIC IDENTIFIER - CARE MAP TITLE ³	
	Age ⁴	CARE MAP CATEGORY ⁵
3 - letter scope of work indication & scope of work statement. ⁶		
Version date ⁸	Effective date (0700 hrs) ⁹	

FLOW CHART ¹⁰**QUICK REFERENCE GUIDE ¹¹****INDICATIONS ¹²****CONTRAINDICATIONS ¹³****NOTES ¹⁴****LINKS ¹⁵**

APPROVED BY ¹⁶

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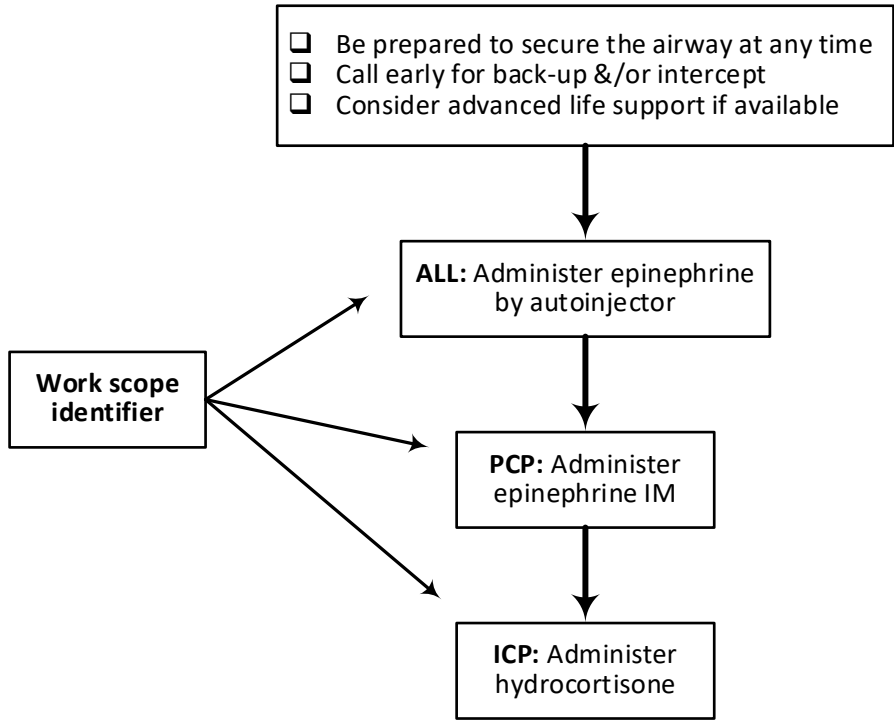
VERSION CHANGES (refer to Xxx for change tracking) ¹⁷

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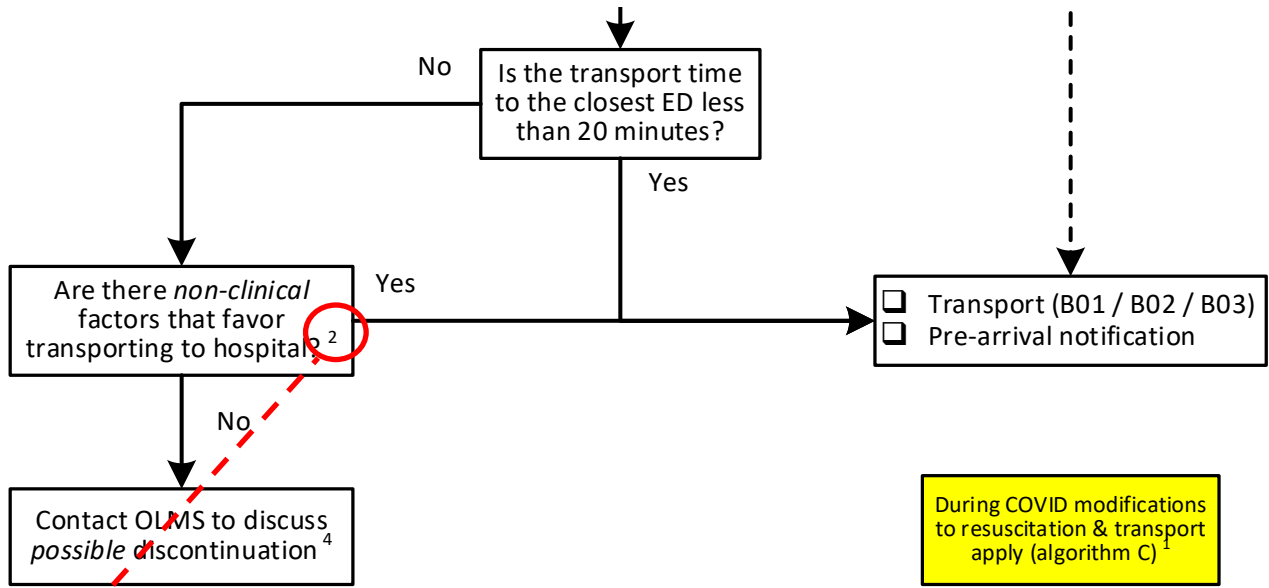
APPENDIX ¹⁸

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APPENDIX B: An example of how different steps in a care map apply to different work scopes.



EXAMPLE C:



During COVID modifications to resuscitation & transport apply (algorithm C)¹

NOTES

2. In certain non-clinical circumstances and even with little probability of survival, transporting to a health care facility and deferring the decision about discontinuation to a health care provider with additional training and experience may be in the best interest of the patient’s family and providers (e.g., pediatric cardiac arrest, distraught family).

APPROVED BY

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