

ADDITIONAL FILE 1. Written fictional mission descriptions, EMS reports and HEMS reports.

Study period: 24-hour shift on Saturday 17-9-2016 to Sunday 18-9-2016

For missions 2., 3., 5. and 6. please see the attached FH- and SV210-forms.

Not all variables have been filled in on the FH and SV 210 forms to enable us to observe how respondents apply information gathered from different sources. However, the FinnHEMS database is to be completed as comprehensively as possible according to the information given and at respondent's discretion.

Duty begins at 9:00 at the base

At 9:30 gear check and maintenance activities begin

At 10:12 Study town's emergency response centre gives the call-out for mission 1.

Mission 1.

Study town's emergency response centre dispatches on 17.9.2016 at 10:13:

"A700 Care home Iltatähti, Tutkimuskuja 3 [Study Alley 3], Study town; call began at 10:12; care home nurses performing resuscitation; ETU01, ETU3221, FH90"

Description of the situation:

FH90 departs on the mission with copter at 10:18. At 10:22 FH90 is still on the way to the scene and ETU01 calls for FH90 on Virve radio (Used by Finnish Fire and Rescue, Police and Emergency Medical Service): "Here's a 91-year-old male patient with numerous primary diseases and advanced Alzheimer's. DNR decision exists. Last seen in bed awake half an hour ago. Primary rhythm asystole."

FH90 instructs to stop resuscitation and cancels the mission. ETU01 and 3221 handle the rest of the situation. FH90 turns back to the station at 10:24.

At 10:33 back at the base with copter, gear check and maintenance of gear continues

At 11:30 gear check and maintenance completed

At 11:35 registration of mission 1 begins

At 11:41 registration of mission 1 completed.

At 14:10 ETU1221 calls for FH90 on Virve and requests backup: "At the railway station of study town mission B202, there's a patient with no pulse, ventricular fibrillation, resuscitation initiated, will you join the mission?"

At 14:10 FH 90 calls emergency response center and asks for FH90 to join ETU 1221's mission.

At 14:11 Study town's emergency response centre dispatches on mission 2.

Mission 2. + ATTACHMENTS (FH-form and SV 210)

Study town's emergency response centre dispatches on 17.9.2016 at 14:11:

"B202 At the railway station, Tutkimuskatu [Study street], Study town, beginning of call 14:00; a small Fiat has crashed into a lamp post, driver in the car; ETU1221, RTU4125, FH90"

Description of the situation:

FH 90 departs on the mission with copter at 14:15. FH90 is at the scene at 14:27 and encounters the patient at 14:29.

A small private car has crashed into a lamp-post. The front bumper a little crushed, no other damage to the car. Driver's door is open, the patient lying down next to the car. The paramedic of ETU1221 is ventilating with breathing bag, I-Gel inserted. No external signs of trauma.

Advance information from the paramedic of ETU 1221: "A 72-year-old male, Pasi Ryhänen according to driving license. Found sitting in the car with seatbelt on. Safety devices didn't go off. Wasn't breathing, no pulse. Was removed from the vehicle and resuscitation commenced. The first analysis of rhythm at 14:08, then VF and shocked. Sinus rhythm restored at second shock and ROSC 12 min after beginning of call. IO access established but no drugs administered."

After ROSC haemodynamics unstable. Instructed by the FH 90 physician: the ETU 1221 paramedic inserts an i.v. cannula at the bend of the elbow and noradrenaline-infusion is initiated with it. Patient's level of consciousness is still low, keeps his eyes closed, makes no sounds, flexes on pain symmetrically with limbs on both sides. Makes spontaneous efforts at respiration. Decision to intubate with sedation, in addition an arterial cannula is inserted.

The patient is transported by ambulance to Y9 (university hospital of study town) escorted by the physician. Patient enrolled and handed over to the ED at 15:30. In this context information on patient's primary diseases: "Hypertension, prostate cancer operated on in 2008 and in remission."

At 16:00 back at base, supplies replenished

At 16:15 registration of mission 2 begins

At 16:18 Study town's emergency response center dispatches on mission 3.

Mission 3. + ATTACHMENTS (FH form and SV 210s)

Study town's emergency response centre dispatches on 17.9.2016 at 16:18:

"A203 freeway ramp, study town; RTA two cars, head-on collision, four affected, 80 km/h speed limit; ETU1241, ETU1231, ETU2221, RTU331, RTU231, FH90"

Description of the situation:

FH 90 departs on the mission with copter at 16:24. ETU1231 the first EMS unit at the scene and on the orders of the EMS supervisor, the paramedic of ETU1231 is the on-scene medical commander. FH90 at the scene at 16:32.

At the scene in its own lane front facing forward a green Audi, front bonnet crushed, airbags activated, driver in the car, rescue detaching, back doors open. In addition, in front of the Audi a red Skoda in the ditch on its left side, bonnet to bonnet with Audi, front bonnet crushed, driver's side of the car crushed, safety devices activated, driver in the car, rescue detaching.

L5 gives further information: " One red patient (Rami Eskola, 27 years) in the Skoda, one yellow in the Audi (Mirja Juusela, 38 years) and two green in the Audi (Kyllikki Juusela 69 years and Erkki Juusela 74 years). The green ones got out of the car by themselves and called the emergency response centre. The red patient is breathing, thin radial pulse, unalert. The yellow one awake, radial pulse present, no pain, can't get out of the car by herself. ETU2221 treats the green woman. ETU1241 treats the green man. We will treat the yellow driver once released. Will you treat the red patient?"

FH90 doc quickly goes round the other patients, instructs on pain medication and transport with trauma pre-alert to the university hospital. The doc takes a photo with a cell phone of the other patients' SV210 forms. After this the doc moves to the red patient who is just being transferred by rescue onto a spine board, a collar is in position. In prone position the patient opens his eyes to speech, makes sounds and indicates pain sites. Is very pale and hypotensive, cold peripherally. Intra-abdominal bleeding suspected. According to "Load and go" principle taken to Y9 by helicopter. By road from the accident scene to Y9 110 km, estimated transportation time by copter 20 min.

Before transportation the FH90 doc establishes i.v. access on the patient. During transportation eFAST and administration of pain medication by FH90 doctor. Pre-alert on the patient to Y9 ED.

At 17:05 FH90 is on hospital helipad and at 17:15 the patient has been handed over to the ED at study town university hospital.

At 17:45 back at base by copter

At 18:00 replenishing of supplies

At 18:15 registration of mission 2. continues

At 18:30 registration of mission 2. completed, and registration of mission 3 begins

At 18:59 registration of mission 3. completed

At 19:37 study town's emergency response centre dispatches on mission 4

Mission 4.

Study town's emergency response centre dispatches on 17.9.2016 at 19:37

"A700 Tutkimuskuja 2 [Study alley 2], Study town; beginning of call 19:33; not breathing; ETU3221, ETU4882, FH90"

Description of the situation:

At 19:39 the copter is being moved on the dolly from the hangar, the copter's engine not running. The emergency response centre informs: "Advising units en route for Tutkimuskuja, mission code changed to C772"

At 19:40 FH90 doc states that (s)he isn't going on the mission after the change of code and begins the registration of mission 4.

At 19:50 registration of mission 4. completed.

Day changes Sun 18.9.2016

At 00:18 ETU3221 consults FH 90 physician about giving medication, they are on a B772-mission. The patient is a 2.5 year-old boy with developmental delays and epilepsy. The parents have given 5 mg of midazolam buccally and the paramedics have given 2.5 mg x 3 i.v. of Stesolid. Regardless of this, the seizure continues, has already lasted for 15 min. In light of phone talk FH90 doc decides to join the mission at 00:21.

At 00:22 FH90 physician calls study town's emergency response centre and reports that the code for ETU3221's mission has changed to A772. Requests that FH90 join the mission.

At 00:23 Study town's emergency response centre dispatches on mission 5.

Mission 5. + ATTACHMENTS (FH-form and SV210)

Study town's emergency response centre dispatches on 18.9.2016 at 00:23

"A772 Tutkimuskatu 10 [Study street 10], Study town; beginning of call 00:06; 2-year-old child patient, epilepsy; ETU 3221, FH90"

Description of the situation:

FH 90 departs on the mission with ground unit at 00:23. The ground unit is used because weather prevents flying the copter. The patient is encountered on the way along the freeway at 00:42. Patient's seizure has abated, lying on his side eyes closed, breathing spontaneously without problems. Doesn't open eyes, makes sounds, reacts to pain with movement of both pairs of limbs. Gaze strays to the right. Stesolid 2.5 mg i.v. also administered.

Transportation continues at 00:44, FH 90 physician escorts with ETU 3221. The patient is lying on his side, breathing spontaneously. At 00:45 physician calls the paediatrician on-call at the study town university hospital, who advises to go directly to paediatric ICU. When approaching the hospital, the patient is clearly waking up, opens eyes and seems to be making eye contact, makes sounds and moves all limbs. According to the mother the situation already seems very normal, in any case the child can't yet speak. The patient is handed over to the paediatric ICU at 01:30 in good condition.

At 01:38 returning with ground unit from mission 5, when study town's emergency response centre dispatches on mission 6

Mission 6. + ATTACHMENTS (FH-form)

Study town's emergency response centre dispatches on 18.9.2016 at 01:50.

"A752, Hämäräkuja 16 F 78 [Dark street 16 F 78], study town; injected with fentanyl, not breathing; ETU1221, ETU01, FH90"

Description of the situation:

FH90 responds to the mission while on return journey at 01:50. The scene is close by so the journey continues by car. Arrival at the scene as the first EMS unit at 01:54, patient encountered at 01:55. The patient is a youngish male "Pate", identity not established. A friend says that "Pate" injected fentanyl shortly before the beginning of emergency call. When "Pate" lost consciousness and his face began to turn blue the friend had called the emergency response centre.

Patient's respiration rate is 4/min. FH90 doc initiates mask ventilation. ETU1221 and ETU01 are soon assisting at the scene. I.V. access is established, and he gets 0.4 mg i.v. naloxone on doc's orders. With this, the patient quickly regains consciousness and starts breathing spontaneously. Vital signs are ok, no external trauma discovered. The patient totally refuses to go anywhere for treatment. Says that he accidentally injected too much fenta and promises not to inject anything more. 0.8 mg i.m. of naloxone is administered and the scene becomes X-6 [patient refuses transportation] at 02:17.

At 02:42 back at base with ground unit. Supplies replenished.

At 02:59 replenishing of supplies completed.

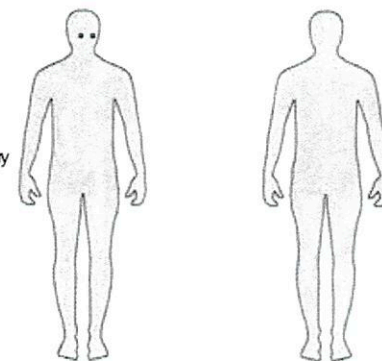
At 03:12 registration of mission 5. is started

At 03:25 registration of mission 5. completed and the registration of mission 6. is begun

At 03:50 registration of mission 6. completed

At 09:00 report to the next doc on call

At 09:30 the shift ends

<input type="checkbox"/> Kuopio <input type="checkbox"/> Tampere		<input type="checkbox"/> Oulu <input type="checkbox"/> Turku		<input type="checkbox"/> Rovaniemi <input type="checkbox"/> Vantaa <input checked="" type="checkbox"/> STUDY BASE		Mission ID	Dispatch code ??	Transp / canc code ??
Date 17.9.2016	Scene address TUTKIMUSKATU			<input type="checkbox"/> = home address Emerg call 14:00		Amb ETO 1221	<input type="checkbox"/> Ground unit <input checked="" type="checkbox"/> Other	
Patient name RYHÄNEN PASI			Municipality TUTKIMUSKAUPUNKI		Alarm	??		
Identity number 72 YEARS OLD	Home municipality / country TUTKIMUSKAUPUNKI		Dispatcher ??		On scene	14:27		
Hospital 49	Reported / scene <input checked="" type="checkbox"/> Police <input type="checkbox"/> Family		Point of departure Station other		At patient	14:29		
	Tel				Transp start	14:57		
Transportation <input checked="" type="checkbox"/> Amb + <input checked="" type="checkbox"/> DOC/param. <input type="checkbox"/> Helicopter			HBS 0-8 ??		At hospital	15:20		
<input type="checkbox"/> Other					Free	15:30		
Physician / paramedic STUDY PHYSICIAN					Mission end	??		
Description of the situation PATIENT COLLIDED IN HIS CAR WITH A LAMP-POST. LOW TRAUMA ENERGY. NO PULSE WHEN MET BY ETO 1221, PRIMARY RHYTHM VF.								
Primary impression ETO 1221 ALS RESUSCITATION. 1-BEL PLACED, VENTILATES WELL. 2X DEFIBRILLATED. ROSC 12 MINUTES. RR 120/60, FA 140, SpO2 99, NO SPONTANEOUS BREATHING. SYMMETRICAL, SMALL PUPILS, NO REACTION TO LIGHT. ECG SHOWS FA 102.								
Response to treatment ANAESTHETIC INTUBATION (VIDEOLARYNGOSCOPE + BOUGIE), IO AND IV ALLES, NORADRENALINE INFUSION, ARTERIAL LINE + PRESSURE MONITOR.								
Primary diseases, home medication NOT KNOWN.								
Trauma patient					GCS			
<input checked="" type="checkbox"/> open fracture <input type="checkbox"/> fracture <input checked="" type="checkbox"/> fracture / laceration / tenderness <input type="checkbox"/> deep / penetrating injury <input checked="" type="checkbox"/> no findings					14:29			
					Eye-opening 1-4 4 spontaneously 3 to speech 2 to pain 1 no response			
					Verbal response 1-5 5 oriented 4 confused 3 inappropriate words 2 sounds 1 no response			
Working diagnosis RESUSCITATION WITH ROSC					Motor response 1-6 6 obeys commands 5 moves to pain 4 withdrawal from pain 3 abnormal flexion 2 abnormal extension 1 no response			
					Total 3			
Resuscitation			Primary rhythm			Acute coronary event		
<input type="checkbox"/> Witnessed OHCA ? <input type="checkbox"/> During treatment <input type="checkbox"/> Unwitnessed OHCA <input type="checkbox"/> Bystander CPR <input type="checkbox"/> No ACLS, reason			<input checked="" type="checkbox"/> VF <input type="checkbox"/> PEA <input type="checkbox"/> ASY <input type="checkbox"/> Other			Ecg at _____ Ecg at _____ Pain started app. at _____ Continuous pain at _____		
<input type="checkbox"/> Temporary ROSC at _____			Delays since the start of call (min): First response FinnHEMS 1. DC 8 ROSC 12 , permanent at 14:12			Delay of thrombolysis _____ min thrombolysis at _____ since the start / aggravation of pain <input type="checkbox"/> contraindication check <input type="checkbox"/> PCI/ UAP -treatment <input type="checkbox"/> Cardiolog consultation		

MISSION 2.

		14:30	15:00	15:30		
Vital functions	Pain <u>2</u> <u>80</u> kg					
	RR ∇ \blacktriangle					
	Heart rate •					
	A. rad/ A. car (+/-)					
	Respiration rate	12	14	16	16	16
	Breath sounds		+/+			
	Rhythm	FA		FA	FA	
	EtCO ₂ (kPa)	4,9	5,8	5,6	4,2	
	SpO ₂ (%)	99	84 99	97	97	97
	Gluc / pain				6,2 / -	
	Temperature					
						Yhteensä
	Medication	alfentan / fentan. (mg)		0,2	0,1	
		morphine/ oxycodone (mg)				
		adrenaline (mg)				
propofol (mg)			50			
suxamethonium (mg)						
rocuronium (mg)			80			
EFEDRIN (MG)						
Fluids	noradr. 0,04 mg/ml (ml/h)		10 ml/hour			
	propofol 10/20 mg/ml (ml/h)		10 ml/hour			
	Ringer NaCl 500 ml	-----				
	Ringer NaCl 500 ml	-----				
	Kolloidi _____ ml					
Interventions	Blood gases time <u>14:45</u> pH <u>7,19</u> pCO ₂ <u>6,0</u> pO ₂ <u>120</u> BE <u>5,0</u> Hb <u>141</u> K <u>3,8</u> Na <u>139</u>					
	<input checked="" type="checkbox"/> Art. can. rad. dx/ sin <u>8,0</u> <input type="checkbox"/> NGT, no. _____ <input checked="" type="checkbox"/> io-access: tibia/ humerus(dx)/ sin _____ <input type="checkbox"/> Other _____ STUDY PHYSICIAN					
	Intubation/ SAD no. _____, attempts <u>1</u> , depth <u>24</u> cm, time <u>14:40</u> Intubator, Resp. mode: CPAP/ BiPAP/ IPPV/ SIMV FIO ₂ <u>50</u> % V. vol. <u>500</u> ml Fr. <u>14</u> /min IPAP _____ EPAP/PEEP <u>5</u>					

MISSION 2.

Identity number 72 YEARS OLD		Travel date 17.09.16		Unit ETU 1221		Running no	
Subscribed <input checked="" type="checkbox"/> dispatch center <input type="checkbox"/> other, what? Origin <input type="checkbox"/> station <input type="checkbox"/> other, what?		Scene address <input type="checkbox"/> = home address <input type="checkbox"/> Onward transp		Dispatch code B 202		Transp / canc code ???	
Emergency call 1400		Patient name RYHANEN PASI		TUTKIMUSKATU, TUUKIMUSKAUPUNKI		Driving km total	
Mission start 1401		Patient on additional place <input type="checkbox"/> on stretchers <input type="checkbox"/> sitting		Home address (street and city)		Home municipality <input type="checkbox"/> Foreigner / form attached	
On scene 1406		Reference no		Cause of transport		No Kela reimbursement	
At patient 1407		Cause of transport <input checked="" type="checkbox"/> Illness or pregnancy		Registration number A132123		Basic fee -20 km	
Transport 1457		Cause of transport <input checked="" type="checkbox"/> Motor vehicle accident *)		Accident at work *)		Invoiceable extra kilometres km	
Patient released 1530		Cause of transport *) Insurance company		To be invoiced where?		2. ambulance driver h min	
Mission end		Description of the situation. Primary reason (symptom or seizure/arrest, mechanism of injury; time of start or event), eye witness's contact information		A PASSER -BY TELEPHONED. A SMALL FIAT HAD COLLIDED WITH A LAMP-POST. THE DRIVER IS IN THE VEHICLE. SPEED LIMIT AT THE SITE 40 KM/H DVZ. ACCORDING TO AN EYEWITNESS THE SPEED OF THE VEHICLE WAS LESS THAN THIS.		Waiting time (over 1hr) h min	
Primary impression (symptom, trauma-related findings)		THE PATIENT SEATED IN THE DRIVER'S SEAT IN SEATBELT. AIRBAGS NOT ACTIVATED. SMALL DENT IN THE FRONT BUMPER BAR. NO OTHER DAMAGE TO CAR. PATIENT PULSELESS WHEN MET.		In total		Excess	
Diseases, current medication, drug allergies, previous hospital treatment		NOT KNOWN.		Invoiced from Kela		Euros	
MONITORING AT		BLOOD PRESS.		HEART RATE		RHYTHM	
When met A 14:28		-		-		VF	
B 14:12		130/62		140		FA	
C 14:30		120/60		102		FA	
Patient 15:30 handover D		120/70		110		FA	
Treatment (interventions, medication) and response.		Consultation with physic. <input type="checkbox"/> Physician on scene. <input checked="" type="checkbox"/>		Physician's name and position. Instructions for treatment		REMOVED FROM THE VEHICLE ON TO FH90 STUDY PHYSICIAN	
Signature of person refusing treatment / transportation		Signature and number of person giving treatment		Numbers of other personnel		Name and phone number of next of kin	
DECLARATION OF THE HEALTH CARE FACILITY		I hereby declare based on the previous report that the patient's physical condition <input type="checkbox"/> requires <input type="checkbox"/> doesn't require ambulance transportation.		Signature, clarification of signature and position of the person receiving the patient		Name and stamp of the receiving facility	

MISSION 3.

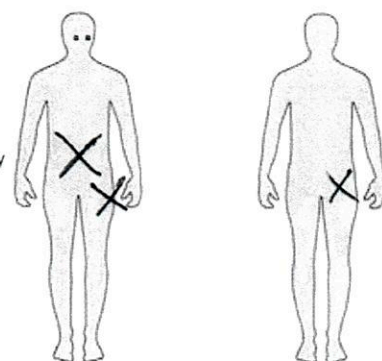
<input type="checkbox"/> Kuopio <input type="checkbox"/> Tampere		<input type="checkbox"/> Oulu <input type="checkbox"/> Turku		<input type="checkbox"/> Rovaniemi <input type="checkbox"/> Vantaa <input checked="" type="checkbox"/> STUDY BASE		Mission ID	Dispatch code A203	Transp / canc code ?
Date 17.9.2016	Scene address JALTAJÄYLÄ			<input type="checkbox"/> = home address Emerg call 16:17		Amb	<input type="checkbox"/> Ground unit <input checked="" type="checkbox"/> Other	
Patient name ESKOLA RAMI		Municipality TUTKIMUSKAUPUNKI		Alarm		16:18		
Identity number 27 YEARS OLD		Home municipality / country TUTKIMUSKAUPUNKI		Dispatcher HÄKE		On scene		16:32
Hospital Y9		<input checked="" type="checkbox"/> Reported/ scene <input checked="" type="checkbox"/> Police <input type="checkbox"/> Family		<input checked="" type="checkbox"/> Point of departure Station/other		At patient		16:35
Tel						Transp start		16:45
<input type="checkbox"/> Amb + <input type="checkbox"/> DOC/param. <input checked="" type="checkbox"/> Helicopter <input type="checkbox"/> Other		HBS 0-8 ??		At hospital				17:05
				Free				17:15
Physician/ paramedic STUDY PHYSICIAN				Mission end		??		

Description of the situation
 HEAD-ON COLLISION INVOLVING 2 CARS. ONE THE RIGHT WAY UP IN THE DITCH, THE OTHER ON ITS LEFT SIDE IN THE DITCH. 4 PERSONS AFFECTED.

Primary impression
 PATIENTS TRIAGE: 2 x GREEN, 1 x YELLOW, 1 x RED. RED PATIENT THE DRIVER OF SKODA, ALONE IN THE VEHICLE, SEATBELT ON. CAR ON ITS LEFT SIDE, EXTENSIVELY OUT OF SHAPE. RESCUE RELEASES PATIENT, UNCONSCIOUS IN CAR, OPENS EYES AS SET TO SPINE BOARD, MOVES HANDS, GROANS.

Response to treatment
 "LOAD AND GO" BY HELICOPTER, I.V. ACCESS -> REHYDRATION REGAINS CONSCIOUSNESS. E FAST EW ROUTE & BLOOD AROUND THE LIVER.

Primary diseases, home medication
 NOT ALLERGY, OTHERWISE HEALTHY.

Trauma patient <input checked="" type="checkbox"/> open fracture <input type="checkbox"/> fracture <input checked="" type="checkbox"/> fracture / laceration / tenderness <input type="checkbox"/> deep/penetrating injury <input checked="" type="checkbox"/> no findings				GCS Eye-opening 1-4 4 spontaneously 3 to speech 2 to pain 1 no response				16:37	16:42	17:00		
				Verbal response 1-5 5 oriented 4 confused 3 inappropriate words 2 sounds 1 no response				4	4	4		
				Motor response 1-6 6 obeys commands 5 moves to pain 4 withdrawal from pain 3 abnormal flexion 2 abnormal extension 1 no response				2	4	5		
				Total				11	14	15		

Working diagnosis: BLOOD IN THE ABDOMEN

Resuscitation <input type="checkbox"/> Witnessed OHCA <input type="checkbox"/> During treatment <input type="checkbox"/> Unwitnessed OHCA <input type="checkbox"/> Bystander CPR <input type="checkbox"/> No ACLS, reason _____ <input type="checkbox"/> Temporary ROSC at _____, permanent at _____		Primary rhythm <input type="checkbox"/> VF <input type="checkbox"/> PEA <input type="checkbox"/> ASY <input type="checkbox"/> Other _____ Delays since the start of call (min): First response FinnHEMS 1. DC _____ ROSC _____		Acute coronary event Ecg at _____ Ecg at _____ Pain started app. at _____ Continuous pain at _____ Delay of thrombolysis _____ min thrombolysis at _____ <input type="checkbox"/> since the start / aggravation of pain <input type="checkbox"/> contraindication check <input type="checkbox"/> PCI/ UAP -treatment <input type="checkbox"/> Cardiology consultation			
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MISSION 3.

Pain <u>285</u> kg		Amb	16:30	17:00	17:30
Vital functions		FinnHEMS			
RR	200				
Heart rate	180				
	160				
	140				
	120				
	100				
	80				
	60				
	40				
A.rad/ A.car (+/-)					
Respiration rate	28				
Breath sounds	+/+				
Rhythm	SINUS, TACHYCARDIA				
EICO ₂ (kPa)					
SpO ₂ (%)	92 94 96				
Gluc/pain	9 6 4				
Temperature					
		Yhteensä			
Medication					
alfentan./ fentan. (mg)					
morphine/ oxycodone (mg)	5				
adrenaline (mg)					
propofol (mg)					
suxamethonium (mg)					
rocuronium (mg)					
Fluids					
noradr. _____ mg/ml (ml/h)					
propofol 10/20 mg/ml (ml/h)					
Ringer/NaCl <u>500</u> ml					
Ringer/NaCl <u>500</u> ml					
Kolloidi _____ ml					
Interventions					
Blood gases time _____ pH _____ pCO ₂ _____ pO ₂ _____ BE _____ Hb _____ K _____ Na _____					
<input checked="" type="checkbox"/> Art. can. rad. dx/ sin <u>ATTEMPT</u> , <input type="checkbox"/> NGT, no <u>DOESN'T SUCCEED</u>					
<input type="checkbox"/> io-access: tibia/ humerus dx/ sin					
<input checked="" type="checkbox"/> Other <u>eFAST 16:49 = BLOOD IN ABDOMEN</u>					
Intubation/ SAD no _____, depth _____ cm, time _____					
Intubator, Resp. mode: CPAP/					
BIPAP/ IPPV/ SIMV FiO ₂ _____ % V. vol: _____					
ml Fr: _____ /min					
IPAP _____					
EPAP/PEEP _____					

MISSION 3

Identity number 38 YEARS OLD		Travel date 17.09.16		Unit ETU 1231/LS	Running no
Subscribe <input checked="" type="checkbox"/> dispatch center <input type="checkbox"/> other, what? Origin		Scene address		<input type="checkbox"/> = home address <input type="checkbox"/> Onward transp	
Emergency call 1618	Patient name JUUSELA MIRJA		VALTAVÄYLÄ OHITUSTIEN RAMPPI, TUTKIMUSKAUPUNKI		
Mission start 1618			Patient on additional place <input type="checkbox"/> on stretchers <input type="checkbox"/> sitting		
On scene 1624	Home address (street and city)		Home municipality TUTKIMUSKAUPUNKI		
At patient 1624			Reference no		
Transport	Cause of transport		No Kela reimbursement		Euros
	Illness or pregnancy		<input type="checkbox"/> Care facility / hospital patient <input type="checkbox"/> Other		Basic fee -20 km
Patient released	<input checked="" type="checkbox"/> Motor vehicle accident *) Registration number XXX-123		To be invoiced where?		Invoicable extra kilometres km
	Accident at work *)				2. ambulance driver h min
Mission end	*) Insurance company OTHER PARTIKAVT SKODA AAA-123				Waiting time (over 1hr) h min

Description of the situation. Primary reason (symptom or seizure/arrest, mechanism of injury; time of start or event), eye witness's contact information
 HEAD-ON COLLISION INVOLVING 2 CARS. 4 PERSONS AFFECTED. AUDI ON THE ROAD RIGHT WAY UP. SKODA IS LEFT SIDE IN THE DITCH. BOTH BONNETS BADLY OUT OF SHAPE. 100 KM/HOUR IN THE AREA

Primary impression (symptom, trauma-related findings)
 TWO PATIENTS TRIAGED GREEN ON THE BACK SEAT EXITED THE CAR UNAIDED BY THEMSELVES. AMBULATORY, NO PAIN. AUDI DRIVER TRIAGED YELLOW STUCK ON THE FRONTSEAT, CONSCIOUS, NO PAIN. SKODA DRIVER TRIAGED RED, STUCK, NO RESPONSE, BREATHING, A. RAD+

Diseases, current medication, drug allergies, previous hospital treatment

MONITORING AT	BLOOD PRESS.	HEART RATE	RHYTHM	RESPIRAT. RATE	RESPIRAT. AUSCULT.	PEF	ETCO ₂	SpO ₂	CONSCIOUSNESS (GCS) Eyes Verbal Motor	PAIN 0-10	B-gluc	ALC. METER	TEMPERATURE, from where
When met A 16:25	A, RAD+	~100		~20					4 5 6 0				
B													
C													
Patient handover, D													

Treatment (interventions, medication) and response. Consultation with physio. Physician on scene. Physician's name and position. Instructions for treatment
 FH90 STUDY PHYSICIAN

- FH 90 → RED PATIENT
- ETU 1231 → YELLOW PATIENT (MIRJA)
- ETU 2221 → GREEN PATIENT (JUUSELA KYLLIKKI)
- ETU 1241 → GREEN PATIENT (JUUSELA ERVVI)

Signature of person refusing treatment / transportation

Signature and number of person giving treatment Numbers of other personnel Name and phone number of next of kin Information continues on another sheet

DECLARATION OF THE HEALTH CARE FACILITY	I hereby declare based on the previous report that the patient's physical condition <input type="checkbox"/> requires <input type="checkbox"/> doesn't require ambulance transportation.		Name and stamp of the receiving facility 79
	Signature, clarification of signature and position of the person receiving the patient		

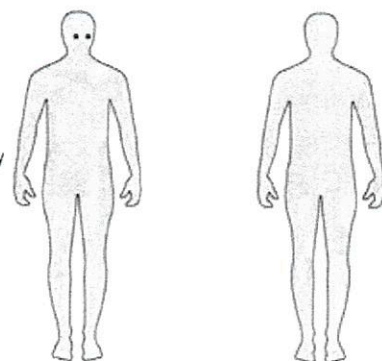
MISSION 3.

Identity number		74 YEARS OLD		Travel date		17.09.16		Unit		ETU1241		Running no			
Subscriber		dispatch center		other, what?		Origin		station		other, what?		Scene address			
Emergency call		1,618		Patient name		JUUSELA ERKKI		Dispatch code		A203		Transp / canc code			
Mission start		1,619		Mission end		1,628		Driving km total							
On scene		1,627		Home address (street and city)				Home municipality				Foreigner / form attached			
At patient		1,628		Cause of transport		<input type="checkbox"/> Illness or pregnancy <input checked="" type="checkbox"/> Motor vehicle accident *) Registration number <u>XXX-123</u> <input type="checkbox"/> Accident at work *) *) Insurance company <u>AUDI</u>		No Kela reimbursement		<input type="checkbox"/> Care facility / hospital patient <input type="checkbox"/> Other		Basic fee -20 km			
Patient released				Reference no				To be invoiced where?		Invoiceable extra kilometres km		Euros			
Mission end				2. ambulance driver		h min		Waiting time (over 1hr)		h min		In total			
Description of the situation. Primary reason (symptom or seizure/arrest, mechanism of injury; time of start or event), eye witness's contact information										Excess					
HEAD-ON COLLISION INVOLVING 2 CARS.										Invoiced from Kela					
THE PERSON ON THE REAR SEAT OF THE UPRIGHT CAR, EXITED UNAIDED. TRIAGED AS GREEN.															
Primary impression (symptom, trauma-related findings)										First-response unit on scene					
WALKING. PAIN - FREE. LUCID.															
Diseases, current medication, drug allergies, previous hospital treatment															
MONITORING AT															
BLOOD PRESS.		HEART RATE		RHYTHM		RESPIRAT. RATE		RESPIRAT. AUSCULT.		PEF		ETCO ₂			
When met		A, RAD+										CONSCIOUSNESS (GCS)			
A 16:28												Eyes Verbal Motor PAIN 0-10			
B												4 5 6 0			
C															
Patient handover. D															
Treatment (interventions, medication) and response. <input type="checkbox"/> Consultation with physio. <input checked="" type="checkbox"/> Physician on scene. Physician's name and position. Instructions for treatment															
FH SO STUDY PHYSICIAN															
Signature of person refusing treatment / transportation															
Information continues on another sheet															
Signature and number of person giving treatment				Numbers of other personnel				Name and phone number of next of kin				Accompanied			
DECLARATION OF THE HEALTH CARE FACILITY		I hereby declare based on the previous report that the patient's physical condition <input type="checkbox"/> requires <input type="checkbox"/> doesn't require ambulance transportation.						Name and stamp of the receiving facility							
		Signature, clarification of signature and position of the person receiving the patient						79							

MISSION 3.

Subscriber <input type="checkbox"/> dispatch center <input type="checkbox"/> other, what? Origin <input type="checkbox"/> station <input type="checkbox"/> other, what?		Identity number	Travel date	Unit	Running no										
Emergency call 1618		Patient name JUUSELA KYLLIKI		Dispatch code											
Mission start 1619		Patient on additional place <input type="checkbox"/> on stretchers <input type="checkbox"/> sitting		Transp / canc code											
On scene 1626		Home address (street and city)		Home municipality <input type="checkbox"/> Foreigner / form attached											
At patient 1626		Reference no		Driving km total											
Transport	Cause of transport		No Kela reimbursement		Euros										
Patient released	<input type="checkbox"/> Illness or pregnancy <input checked="" type="checkbox"/> Motor vehicle accident *) Registration number XXX-123 <input type="checkbox"/> Accident at work *) <input type="checkbox"/> Insurance company		<input type="checkbox"/> Care facility / hospital patient <input type="checkbox"/> Other To be invoiced where?		Basic fee -20 km Invoiceable extra kilometres km 2. ambulance driver h min Waiting time (over 1hr) h min										
Mission end					In total										
Description of the situation. Primary reason (symptom or seizure/arrest, mechanism of injury; time of start or event), eye witness's contact information)					Excess										
ON THE BACK SEAT AT THE TIME OF THE CRASH, COLLISION INVOLVING 2 CARS.					Invoiced from Kela										
Primary impression (symptom, trauma-related findings)					First-response unit on scene										
WALKING. NO PAIN.															
Diseases, current medication, drug allergies, previous hospital treatment															
MONITORING AT	BLOOD PRESS.	HEART RATE	RHYTHM	RESPIRAT. RATE	RESPIRAT. AUSCULT.	PEF	ETCO ₂	SpO ₂	CONSCIOUSNESS (GCS)			PAIN 0-10	B-gluc	ALC. METER	TEMPERATURE from where
When met A 16:26	A. BAD+							100	4	5	6	0			
B															
C															
Patient handover D															
Treatment (interventions, medication) and response. <input type="checkbox"/> Consultation with physic. <input checked="" type="checkbox"/> Physician on scene. Physician's name and position. Instructions for treatment					FHSD STUDY PHYSICIAN										
Signature of person refusing treatment / transportation					<input type="checkbox"/> Information continues on another sheet										
Signature and number of person giving treatment		Numbers of other personnel		Name and phone number of next of kin											
DECLARATION OF THE HEALTH CARE FACILITY		I hereby declare based on the previous report that the patient's physical condition <input type="checkbox"/> requires <input type="checkbox"/> doesn't require ambulance transportation.			Name and stamp of the receiving facility										
		Signature, clarification of signature and position of the person receiving the patient			49										

MISSION 5.

<input type="checkbox"/> Kuopio <input type="checkbox"/> Tampere		<input type="checkbox"/> Oulu <input type="checkbox"/> Turku		<input type="checkbox"/> Rovaniemi <input type="checkbox"/> Vantaa <input checked="" type="checkbox"/> STUDY BASE		Mission ID	Dispatch code ??	Transp / canc code ??
Date 18.9.2016	Scene address TUTKIMUSKATU 10			<input checked="" type="checkbox"/> = home address Emerg call 00:06		Amb	<input checked="" type="checkbox"/> Ground unit <input type="checkbox"/> Other	
Patient name HIMANEN JAAKKO		Municipality TUTKIMUSKAUPUNKI		Alarm		00:07	??	
Identity number 2 YEARS OLD	Home municipality / country TUTKIMUSKAUPUNKI		Dispatcher ?		On scene			
Hospital Y9	<input type="checkbox"/> Reported / scene <input type="checkbox"/> Police <input checked="" type="checkbox"/> Family Tel		Point of departure Station / other		At patient		00:42	
					Transp start		00:44	
Transportation <input checked="" type="checkbox"/> Amb + <input checked="" type="checkbox"/> DOC/param. <input type="checkbox"/> Helicopter <input type="checkbox"/> Other			HBS 0-8 ??		At hospital		01:25	
					Free		01:30	
Physician / paramedic STUDY PHYSICIAN					Mission end		??	
Description of the situation EPILEPTIC. SEIZURE PERSISTED IN SPITE OF MEDICATION.								
Primary impression ETU 3221 ENCOUNTERED ON FREEWAY, PATIENT BREATHING SPONTANEOUSLY, KEEPING EYES CLOSED, MAKING NO SOUNDS, GAZE DEVIATES TO RIGHT, FLEXES UPPER LIMBS TO PAIN. 2.5MG IN DIAZEPAM (STESOLID) IS ADMINISTERED -> IMPROVEMENT IN GAZE								
Response to treatment TRANSPORTATION TO Y9 LYING ON SIDE. PEDIATRIC ICU CONSULTATED -> TRANSPORTATION DIRECTLY PICU. PATIENT IMPROVING, WAKING UP, MEDICATION RECENTLY, MAKING EYE CONTACT								
Primary diseases, home medication NEUROLOGICAL (MENTAL) DELAY EPILEPSY. CHANGED. MOTHER CAN'T REMEMBER NAME OF								
Trauma patient <input checked="" type="checkbox"/> open fracture <input type="checkbox"/> fracture <input checked="" type="checkbox"/> fracture / laceration / tenderness <input type="checkbox"/> deep / penetrating injury <input checked="" type="checkbox"/> no findings						GCS Eye-opening 1-4 4 spontaneously 3 to speech 2 to pain 1 no response Verbal response 1-5 5 oriented 4 confused 3 inappropriate words 2 sounds 1 no response Motor response 1-6 6 obeys commands 5 moves to pain 4 withdrawal from pain 3 abnormal flexion 2 abnormal extension 1 no response		
Working diagnosis EPILEPSY				Total Eye-opening 1-4: 4 Verbal response 1-5: 5 Motor response 1-6: 6				
Resuscitation <input type="checkbox"/> Witnessed OHCA <input type="checkbox"/> During treatment <input type="checkbox"/> Unwitnessed OHCA <input type="checkbox"/> Bystander CPR <input type="checkbox"/> No ACLS, reason _____			Primary rhythm <input type="checkbox"/> VF <input type="checkbox"/> PEA <input type="checkbox"/> ASY <input type="checkbox"/> Other _____ Delays since the start of call (min): First response FinnHEMS 1. DC _____ ROSC			Acute coronary event Ecg at _____ Ecg at _____ Pain started app. at _____ Continuous pain at _____ Delay of thrombolysis _____ min thrombolysis at _____ <input type="checkbox"/> since the start / aggravation of pain <input type="checkbox"/> contraindication check <input type="checkbox"/> PCI/ UAP -treatment <input type="checkbox"/> Cardiolog consultation		
<input type="checkbox"/> Temporary ROSC at _____, permanent at _____								

Kela

Service provider and VAT number

MISSION 5.

Report and claim for reimbursement for patient transportation

OSA 1

Identity number		2 YEARS OLD	Travel date	Unit	Running no								
			180916	ETU 3221									
Subscriber	dispatch center	other, what?	Origin	station	other, what?								
Emergency call			Patient name	Scene address									
0006			HIMANEN JAAKKO	TUTKIMUSKATU 10 TUTKIMUSKAUPUNKI									
Mission start			Patient on additional place										
0007			<input type="checkbox"/> on stretchers <input type="checkbox"/> sitting										
On scene			Home address (street and city)										
0012			TUTKIMUSKAUPUNKI										
At patient			Home municipality										
0013			TUTKIMUSKAUPUNKI										
Transport			Reference no										
Cause of transport			No Kela reimbursement										
<input type="checkbox"/> Illness or pregnancy			<input type="checkbox"/> Care facility / hospital patient <input type="checkbox"/> Other										
Patient released			To be invoiced where?										
<input type="checkbox"/> Motor vehicle accident *) Registration number													
<input type="checkbox"/> Accident at work *)													
Mission end			Basic fee -20 km										
<input type="checkbox"/> *) Insurance company			Invoiceable extra kilometres km										
			2. ambulance driver h min										
			Waiting time (over 1hr) h min										
Description of the situation. Primary reason (symptom or seizure/arrest, mechanism of injury; time of start or event), eye witness's contact information			In total										
EPILEPTIC, MOTHER WAKENED BY NOISE, FOUND HAVING A SEIZURE IN BED. MOTHER GAVE 5 MG OF BULLAL MIDAZOLAM, THEN MADE THE EMERGENCY CALL.			Excess										
			Invoiced from Kela										
Primary impression (symptom, trauma-related findings)			First-response unit on scene										
LYING ON SIDE IN BED, BREATHING, LIMBS STILL TWITCHING. IV ACCESS AT 00:15, DIAZEPAM 2.5 MG AT 00:16 AND ADDITIONAL DOSE 2.5 MG AT 00:18; CALL TO FH 90 PHYSICIAN AND ONE MORE DIAZEP. 2.5 MG 00:20 -> SEIZING STILL PERSISTS													
Diseases, current medication, drug allergies, previous hospital treatment													
NEUROLOGICAL (MENTAL) DELAY + EPILEPSY. MEDICATION CHANGED 2 WEEKS AGO. LAST SEIZURE 6 MONTHS AGO.													
MONITORING AT	BLOOD PRESS.	HEART RATE	RHYTHM	RESPIRAT. RATE	RESPIRAT. AUSCULT.	PEF	ETCO2	SpO2	CONSCIOUSNESS (GCS) Eyes Verbal Motor	PAIN 0-10	B-gluc	ALC. METER	TEMPERATURE from where
When met A													
B													
C													
Patient handover. D													
Treatment (interventions, medication) and response. <input type="checkbox"/> Consultation with physici. <input checked="" type="checkbox"/> Physician on scene. Physician's name and position. Instructions for treatment													
AT 00:22 SEIZURES CEASED PATIENT SLEEPY, BREATHING SPONTANEOUSLY, FH 90 PHYSICIAN ON SCENE AT 00:42. PATIENT'S GAZE DEVIATES TO THE RIGHT -> 2.5 MG OF DIAZEPAM IV. AT 01:20 PATIENT IMPROVES, HANDOVER TO HOSPITAL UNPROBLEMATIC.													
Signature of person refusing treatment / transportation													
Signature and number of person giving treatment													
Numbers of other personnel													
Name and phone number of next of kin													
HIMANEN SARI													
Information continues on another sheet													
DECLARATION OF THE HEALTH CARE FACILITY													
I hereby declare based on the previous report that the patient's physical condition <input type="checkbox"/> requires <input type="checkbox"/> doesn't require ambulance transportation.													
Signature, clarification of signature and position of the person receiving the patient													
Name and stamp of the receiving facility													
Y9 PEDIATRIL ICU													

MISSION 6.

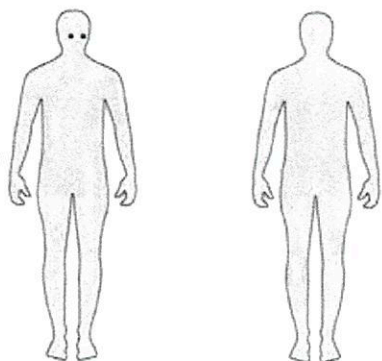
<input type="checkbox"/> Kuopio <input type="checkbox"/> Tampere		<input type="checkbox"/> Oulu <input type="checkbox"/> Turku		<input type="checkbox"/> Rovaniemi <input type="checkbox"/> Vantaa <input checked="" type="checkbox"/> STUDY BASE		Mission ID	Dispatch code A752	Transp / canc code X-6	
Date 18.9.2016	Scene address HAMARAKUJA 16 F 78 <input type="checkbox"/> = home address			Emerg call 01:48	Amb ETO 1221	<input checked="" type="checkbox"/> Ground unit <input type="checkbox"/> Other			
Patient name "PATE"				Municipality TUTKIMUSKUNTO		Alarm	01:50		
Identity number APRX. 20 YEAR OLD		Home municipality / country		Dispatcher HAVE		On scene		01:54	
Hospital X-6		Reported / scene <input type="checkbox"/> Police <input type="checkbox"/> Family		Point of departure Station <u>other</u>		At patient		01:55	
Tel						Transp start			
Transportation <input type="checkbox"/> Amb + <input type="checkbox"/> DOC/param. <input type="checkbox"/> Helicopter <input type="checkbox"/> Other				HBS 0-8 ??		At hospital			
						Free		02:17	
Physician / paramedic STUDY PHYSICIAN						Mission end		??	

Description of the situation
 A FRIEND REPORTS THAT "PATE" HAD INJECTED FENTANYL. THERE HAD BEEN OTHERS PRESENT, LEFT THE SCENE. "PATE'S" IDENTITY NOT EXACTLY KNOWN.

Primary impression
 SLUMPED UNCONSCIOUS IN AN ARMCHAIR, PALE BLUEISH, BREATHING SPARSE → MASK VENTILATION INITIATED & SpO₂ 40 → SpO₂ 90, HR 40 → 88, BP 100/50, GLUC 6.3, IV ACCESS → NALOXONE 0,4 MG IV → PATIENT WAKES UP

Response to treatment
 AFTER NALOXONE WAKES UP, IS LUCID. BP 122/79, HR 92, SpO₂ 97. TOTALLY REFUSES ANY TREATMENT. NEUROLOGY OK. NO INJURIES.

Primary diseases, home medication
 HEPATITIS C | ADDITIONAL 0,8 MG NALOXONE IV, STAYS WITH FRIEND.

Trauma patient <input checked="" type="checkbox"/> open fracture <input type="checkbox"/> fracture <input checked="" type="checkbox"/> fracture / laceration / tenderness <input type="checkbox"/> deep / penetrating injury <input checked="" type="checkbox"/> no findings				GCS Eye-opening 1-4 4 spontaneously 3 to speech 2 to pain 1 no response Verbal response 1-5 5 oriented 4 confused 3 inappropriate words 2 sounds 1 no response Motor response 1-6 6 obeys commands 5 moves to pain 4 withdrawal from pain 3 abnormal flexion 2 abnormal extension 1 no response		01:55 02:10 1 4 1 5 1 6 Total 3 15	
--	--	---	--	--	--	--	--

Resuscitation <input type="checkbox"/> Witnessed OHCA <input type="checkbox"/> During treatment <input type="checkbox"/> Unwitnessed OHCA <input type="checkbox"/> Bystander CPR <input type="checkbox"/> No ACLS, reason _____ <input type="checkbox"/> Temporary ROSC at _____, permanent at _____		Primary rhythm <input type="checkbox"/> VF <input type="checkbox"/> PEA <input type="checkbox"/> ASY <input type="checkbox"/> Other _____ Delays since the start of call (min): First response FinnHEMS 1. DC _____ ROSC _____		Acute coronary event Ecg at _____ Ecg at _____ Pain started app. at _____ Continuous pain at _____ Delay of thrombolysis _____ min thrombolysis at _____ since the start / aggravation of pain <input type="checkbox"/> contraindication check <input type="checkbox"/> PCI/ UAP -treatment <input type="checkbox"/> Cardiology consultation	
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