



Division 05 **Emergency Medical**

Chapter 20 – EMS Performance Measurement - Determinant /Disposition Codes

March 2009

POLICY

This General Order establishes a system of codes that are used for performance measurement and quality improvement for the EMS Operational Program managed by the Prince George's County Fire/EMS Department.

All EMS transport units that are assigned to an EMS-related incident shall advise PSC of the appropriate determinant/disposition code upon returning to service.

DEFINITIONS

Determinant Code – A code generated by the Emergency Medical Dispatch system that assigns a relative severity to the incident.

Disposition Code – A code that documents the final operational disposition of the incident.

PROCEDURES

1. General Provisions

All EMS providers must provide the information necessary to complete the determinant/disposition code each time the unit returns to service from an incident.

The determinant/disposition code is a two (2) character code which documents:

- Determinant Code
- Disposition Code

Determinant Code – The first character indicates how the incident was prioritized by Public Safety Communications (PSC) using the Emergency Medical Dispatch (EMD) system. (“EMD’ed as...”). This includes an alphabetic “determinant level” which indicates the severity of the incident. The determinant portion of the code is provided several ways upon dispatch:

- CAD print out
- Unit Pager
- EMS channel operator provides with other dispatch information.

Disposition Code – The second character of the code documents the final disposition of the incident when returning to service (“it turned out to be...”).

Each possible code combination is shown on the Determinant/Disposition Code Reference (Attachment 1).

2. Data Collection/Documentation

Public Safety Communications will prompt each transport unit for a disposition code if one is not provided when they return to service.

The determinant/disposition code is stored in the CAD record for each EMS unit and incident. The accuracy and completeness of the data is critical to effective EMS system management and performance measurement.

If a transport unit fails to give a determinant/disposition code when they return to service, PSC will document those as



“NC” for No Code. Providers or units that do not provide the information to complete the determinate/disposition code will be in violation of this general order and will be subject to disciplinary action.

Determinant/Disposition Code for each incident is documented within the incident entry in the unit/station logbook.

Special Case - Multiple Units

In cases where multiple units are used to transport a single patient, the determinant/disposition code is the same for all units. The determinant/disposition code is documented as the highest level of care provided.

Special Case - Multiple Patients

In cases where multiple patients are transported in a single unit, the determinant/disposition code is the same for all patients. The determinant/disposition code is documented only once per unit per incident. The disposition code applies to the level of care provided on the unit.

Disposition Code Corrections

EMS personnel must verify the proper disposition code found on the final CAD printout for the incident. Any discrepancies should be corrected through PSC immediately. If an eligible incident was not closed out with the appropriate disposition code, PSC may be able to change the disposition code for a period of approximately 24 hours after the incident was initially dispatched.

3. Data Interpretation

This data is shared between the Fire/EMS Department and Public Safety Communications for the following purposes:

Emergency Medical Dispatch system as applied by Prince George’s County Public Safety Communications

- EMD Determinant Code Validity
- Quality Assurance
- Quality Improvement
- As Determined by the Director of PSC

Prince George’s County Fire/EMS Department EMS Operational Program

- EMS System Management
- Resource Management
- Transportation Fee Billing
- Quality Assurance
- Quality Improvement
- As Determined by the Fire Chief

It is the responsibility of the EMS Operational Program, with the Fire Chief’s approval, to determine the appropriate resources for each EMD Determinant Code. This data allows the AEMS office to evaluate the effectiveness of those system management decisions.

This information is also used to evaluate system performance and quality assurance trends. Certain Determinant/Disposition Codes will result in specific inquiries into system performance.

These inquiries include, but are not limited to:

- Clinical Resource Mismatch
 - Under-triage
 - Over-triage
- ALS/BLS Interface
 - Patient Downgrade
 - Patient Upgrade
- Patient Refusals
- Other circumstances that require review



4. Compliance

Providers that do not provide the information to complete the determinate/disposition code will be in violation of this general order and will be subject to disciplinary action.

The career supervisor or volunteer chief will be held accountable when a consistent pattern of non-compliance exists.

REFERENCES

Principles of Emergency Medical Dispatch,
3rd Edition

FORMS/ATTACHMENTS

ATTACHMENT 1 - Determinant/Disposition
Code Reference Chart

ATTACHMENT 2 - Determinant/Disposition
Code Examples

- Radio Transmissions
- CAD Print Out



Determinant/Disposition Code Reference

Disposition Code		Public Safety Communications EMD Determinant Code						
		"ECHO"	"DELTA"	"CHARLIE"	"BRAVO"	"ALPHA"	"OMEGA"	"NON-EMD"
		E	D	C	B	A	O	N
"ALS" Transport The patient was transported at an ALS level of care (ALS provider and ALS Equipment), regardless of the unit utilized.	A	EA	DA	CA	BA	AA	OA	NA
"BLS" Transport The patient was transported at a BLS level of care (BLS Provider and/or BLS Equipment), regardless of the unit utilized.	B	EB	DB	CB	BB	AB	OB	NB
"Volunteer" BLS Transport The patient was transported by a Volunteer BLS Ambulance in accordance with the Emergency Transportation Fee General Order	V	EV	DV	CV	BV	AV	OV	NV
Patient "Refusal" Patient refusal was obtained as described in the Maryland Emergency Medical Protocols for Pre-Hospital Providers	R	ER	DR	CR	BR	AR	OR	NR
"No Patient" A Provider/Patient Relationship was not established.	N	EN	DN	CN	BN	AN	ON	NN
"Other" Transport Patient was transported by another mode of transport	O	EO	DO	CO	BO	AO	OO	NO



ATTACHMENT 2 DETERMINANT/DISPOSITION CODE RADIO TRANSMISSION EXAMPLES

EMS Dispatch

The EMD Determinant will be given with the original dispatch information.

PSC – Ch 1: “*BEEP - Medical Local, 7911 Anchor Street, Chest Pains, Box Area 8-01, Ambulance 808 and Medic 846 respond on Channel 2.*”

A800: “*Ambulance 800 responding*”

MD800: “*Medic 800 responding*”

PSC – Ch 2/7: “*BEEP - Medical Local, 7911 Anchor Street, Chest Pains, Box Area 8-01, Ambulance 808 and Medic 846 **delta** response on Channel 2*”

Return to Service - Unprompted

A800: “*Ambulance 800 is in service leaving Prince George’s, Bravo, BLS.*”
This indicates a Bravo EMD Determinant resulting in a BLS Transport.

MD800: “*Medic 800 is in service with a Delta Refusal*”
This indicates a Delta EMD Determinant resulting in a patient refusal.

A800: “*Ambulance 800 is in service with a ‘Non’ BLS.*”
This indicates a Non-EMD incident resulting in a BLS transport

Return to Service - Prompted

A800: “*Ambulance 800 is in service leaving Southern Maryland*”

PSC: “*Ambulance 800, your disposition code?*”

A800: “*Charlie BLS*”

PSC: “*Okay, Ambulance 800, copy Charlie BLS*”



CAD PRINT OUT EXAMPLE

INCIDENT HISTORY DETAIL: P090#00###

INITIATE: ##:##:## MM/DD/YY CALL NUMBER: P00###
ENTRY: 14:39:29 CURRENT STATUS: ONSCENE
DISPATCH: 14:40:12 ALARM LEVEL: 1
ONSCENE: 14:43:27 CASE NUMBER: PF09000#####
CLOSE:

LOCATION: 123 FIRST STREET (A ST & B ST)
LOCATION COMMENTS:
DAREA: F1 CURRENT: F4
STATION: ## TYPE: SICK
RD: 0110 PRIORITY: 1
RUN CARD: #####

14:39:29 CT16 ENTRY TEXT:ProQA recommends dispatch at this time \NAME: XXXXXXXX
\PH: ### ### ##### (MTF)
14:39:29 CT16 MISC #0#0##0####, ProQA Case #000##### Classification: SUICIC
Description: You are responding to a patient who has apparently overdosed/been poisoned. The patient is a 22-year-old female, who is conscious and breathing. Dispatch Level: 23**B01**

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Determinant Level

15:00:00 FD01 CLOSE A800 **BB**

Determinant/Disposition Code