TRIP REPORT CHECKLIST

- ✓ Correct Patient & Date of Service
- ✓ Type of response
  - Dispatch reason
  - Response type (immediate, scheduled, etc.)
- ✓ Pick up and destination locations
- ✓ Timeline and log of interventions
- ✓ Narrative
  - CHART or similar method
    - Clearly describe the patient's condition
  - Clearly describe any interventions or care provided
    - Describe patient outcomes as a result
  - DETAILS! (GCS, how you find the patient, pain scale, etc.)
- ✓ Mileage
  - Odometer readings to the nearest 10th of a mile
- ✓ Signatures
  - Patient or representative signature
  - Provider (crew) signatures
  - Transfer of care signature
- ✓ Supporting Information
  - Demographics/face sheet from hospital
  - EKG print out if applicable
  - PCS or ABN if applicable