

Tripsheet QA Form

Call #

Chief Complaint

Documenter

Reviewer

Double Check:

Call/Pt Info	Narrative	Timelog	Paperwork
<ul style="list-style-type: none"> • Patient contact info • Nature of Dispatch • Outcome • Response Mode • Call Location Category 	<ul style="list-style-type: none"> • Scene Survey: CAO/ GCS • HxPI: CP, LOC, SOB • PE/Vitals: DCAPBTLS • Tx: rights/risks Or care trans. • Rx: applicable protocols 	<ul style="list-style-type: none"> • Timelog-narrative agree • Vitals entry • Initial exam (inc. ¶) • Medical command 	<ul style="list-style-type: none"> • Refusal form is complete or corrected in narrative • Tripsheet is submitted in Pons

QA Review:

	Y	N
Response and On-Scene times within acceptable range:		
Assessment was thorough:		
Treatment provided appropriately and in accordance with protocols:		
Tx decision was appropriate and well documented:		
PCR & On-Scene paperwork is complete and accurate:		

QAB Comments:

Attendant Comments:

Reviewer	Date	Comments	Comments Requested	Passed	Bounced	Returned to: