Heart of Texas RAC Regional System Performance Improvement

Entity:

Person Completing:

BEHAVIORAL HEALTH

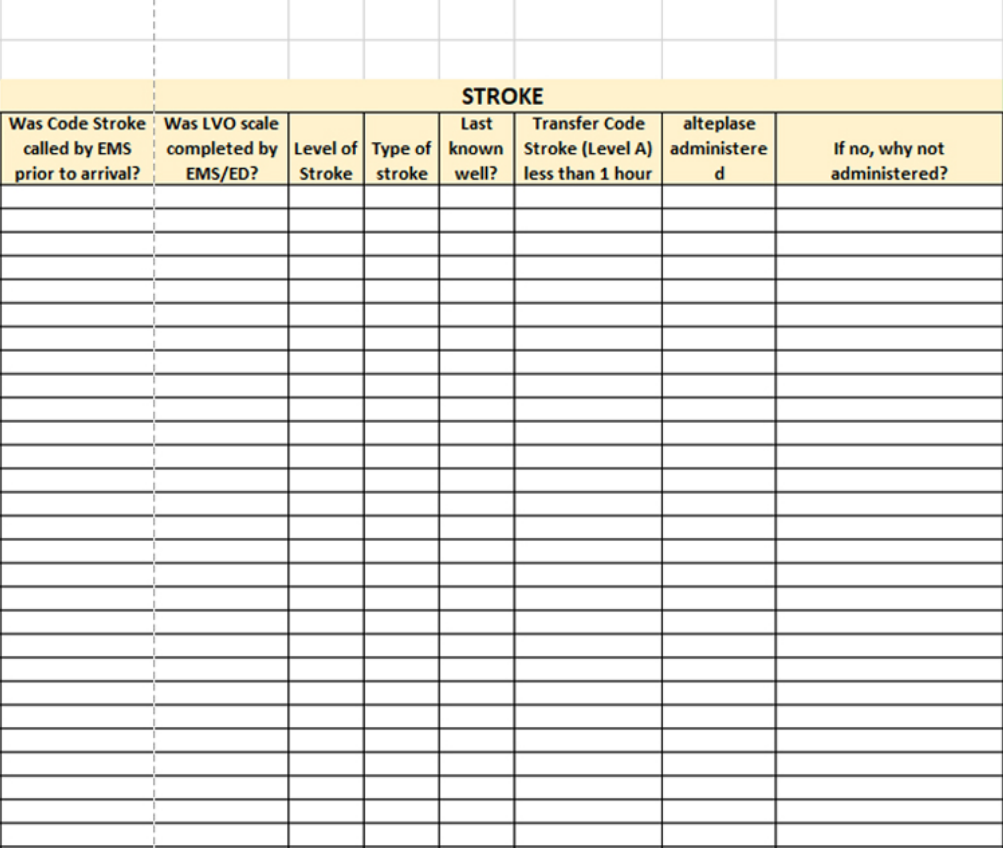
*EMS

PI type	Pt #	DOS	Age	Gender	ED LOS (BH only)	EDO	Zip Code	Insurance	MOI

Providers complete columns with green highted headers.

Complaint/Diagnosis	Mode of Arrival to Hospital	Submersion	TBI/SPI	Death?	Transferred or Transported	Where?	Why?
						Other	RAC Process

		CARDIAC					**MATERNAL**			
Disposition	**Follow-up Received**	**DIDO**	**Door to Balloon (PCI**	**FMC to balloon (EMS)**	**FMC to balloon (transfer**	**Lytics Given (Transfer)**	**Birth Outside of Hospital**	**Race/ Ethnicity**	**Quantitative Blood Loss**	**Greater than 4 units**



	STROKE						
Was Code Stroke called by EMS prior to arrival?	Was LVO scale completed by EMS/ED?	Level of Stroke	Type of stroke	Last known well?	Transfer Code Stroke (Level A) less than 1 hour	alteplase administered	If no, why not administered?

TRAUMA

Admit/taken to Level IV Trauma	Where?	Why?	Trauma Category A out under 1 hour	Trauma Category B out under 2 hours	Tourniquet Used	Applied tourniquet in correct	Who applied?