



Medical Control Report

Name and title (MD, RN, Clerk)

Specialty unit (ER, ICU, L&D)

Referring MD

Referring facility

Accepting MD

Accepting facility

Patient data:

Name, age, weight, gender, race, allergies,
Immunizations, current medications, implants, etc.

Events leading to transfer:

Special requirements for transport:

(medications, procedures, equipment, specialty team)

Pertinent findings:

Brief current and past medical history.

List all injuries/illnesses.

Vital signs: B/P, HR, RR, SpO₂, FiO₂, temp, glucose.

Physical examination.

Tests and findings: CXR, CT scan, Labs, EKG, ABG,
other diagnostic tests

Tubes (location, size, type) ETT, NG/OG, foley, chest
tube, IV fluids (meds, rate, type and amount of fluid)

Splints or traction.

Ventilator settings: V_t, rate, FiO₂, PEEP, PIP, ABG

Consult with Critical Care Control MD as needed



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EMS to Hospital Report

Run Data

Location of call
Unit(s) responding
Reason for call

Patient Data

Name, age, gender, weight, race.
Chief complaint or nature of illness.
Initial location of the patient.
Treatment by first responder.
Patient history: medications, allergies, immunization status, past medical history.
Vital signs plus SpO₂, GCS, temperature and glucose.
Physical exam: head, eyes, ears, nose mouth, throat, chest, abdomen, pelvis, genitalia, lower extremities, upper extremities, and back.

Treatment Data

Vital signs: B/P, HR, RR, SpO₂, FiO₂, temp, glucose.
IV site(s), IV rate, fluid type and amount
Airway Adjuncts: nasal cannula, mask, OPA, NPA, etc.
Oral ETT, Nasal ETT, LMA, Cric.
Chest tube, needle, defib/joules.
Medication(s) and time given.
Procedure(s) and time done.
Patient's response to therapy.
Patient immobilized: c-collar, backboard, spider straps, KED board, splints, traction, etc.



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