

## INSTRUCTIONS FOR SUPPLEMENTAL EMS CARDIAC ARREST FORM

*Note: This form replaces the AED form used before October 2000.*

Please complete for **ALL Medical and Trauma Cardiac Arrest Patients** in the prehospital setting.

### **Purpose of this form:**

To collect data necessary to enable analysis by jurisdictions and MIEMSS to:

1. Establish EMS System effectiveness in responding to Cardiac Arrest patients;
2. Improve patient outcome from cardiac arrest.

### **Who should fill out this form:**

The EMS provider (ALS or BLS) responsible for patient care for any cardiac arrest (except those with a valid EMS DNR at the scene). For every MAIS form completed on a cardiac arrest patient, a supplemental EMS cardiac arrest form should also be filled out.

### **Returning Forms:**

Fax or mail back to MIEMSS as soon as possible after a cardiac arrest event so that prompt patient follow-up can be conducted.

- Supplemental EMS Cardiac Arrest form
- Copy of the MAIS report and Additional Narrative
- All code summary reports (if available)

FAX: 410-706-4366

Mail: MIEMSS  
Epidemiology Office  
Attn: M-CAPD Study  
653 West Pratt Street  
Baltimore, MD 21201

### **Questions regarding this form:**

MIEMSS Cardiac Arrest Hotline

Phone: 1-877-937-7724 (business hours or leave voicemail after hours)  
Pager: 410-475-8433 (24 hours/7 days a week)

**MIEMSS Cardiac Arrest Website:** <http://miemss.umaryland.edu/m-capd.htm>

- Answers to common questions regarding the Supplemental EMS Cardiac Arrest Form
- Additional forms are also available for download from this website
- Information about the Maryland Cardiac Arrest Public Defibrillation (M-CAPD) Study