Call ID Number: _______________
Date of Incident (MO/DAY/YR): _______________
Recording Available: 
Yes ☐ No ☐
Call Time (to the second): __ : __ : __ Cannot be determined ☐
Communicator Number: _______________

Transferring PSAP:
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City

Responding Agency(s) Select all that apply:
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City
☐ City ☐ City

Unit Number(s): _____________ Unknown ☐ (Note: If multiple units, separate with commas)

How was the patient’s age determined?
☐ From PSAP ☐ Volunteered by caller
☐ Communicator asked exact age ☐ Communicator asked general age
☐ Not determined

If stated, patient age: _______________
If exact age not state, was patient:
☐ Adult ☐ Child over 8
☐ Child 1-8 ☐ Child less than 1
☐ Neonate ☐ Unknown

Were any special circumstances stated by the PSAP or the caller: Yes ☐ No ☐
If yes, what: ______________________

Patient Gender: Male ☐ Female ☐ Unknown ☐

Time caller told to move phone to patient: _______________ ☐ Cannot be determined
Which script was used?

☐ Adults, Page 2
☐ Adults with ventilations, Page 3
☐ Pregnant woman (3rd trimester) Page 8
☐ Tracheostomy/Laryngectomy patients (stoma), Page 9
☐ Children over 8 years, Page 4
☐ Children 1-8 years, Page 5
☐ Infants 0-12 months, Page 6
☐ Patients not in cardiac arrest, Page 10
☐ Multiple, explain __________________________
☐ Unknown, explain __________________________

☐ Children over 8 years, Page 4
☐ Children 1-8 years, Page 5
☐ Infants 0-12 months, Page 6
☐ Neonate (newborn; associated field delivery) Page 7

Was it the correct script? Yes ☐ No ☐ Unknown ☐
If no, why? ________________________________________

Were Telephone CPR Instructions offered by the communicator?
Yes ☐ No ☐ Unknown (No recording) ☐

If not offered, why? Check all that apply.
☐ Caller hysterical
☐ Caller knew CPR/CPR in progress
☐ Caller left phone
☐ Caller not at scene
☐ Caller unable to move patient
☐ Communicator too busy, explain __________________________
☐ Language barrier
☐ Obvious death
☐ Patient reported as conscious and/or breathing
☐ Second party relay
☐ Should have been offered
☐ Other __________________________

☐ EMS arrived too fast
☐ Unknown

☐ Not applicable

If yes, were instructions accepted?
☐ Yes
☐ Delayed Yes
☐ No/refused
☐ Unknown
☐ NA: Not offered

If instructions refused, reason for refusal: Check all that apply
☐ Aid arrived too fast
☑ Emotional distress
☐ Animal/pet disruption
☐ Fear of contracting communicable disease
☐ Apathy/lack of interest or concern
☐ Fear of hurting patient
☐ Believes aid will be there quickly
☐ Health of patient (terminally ill, obese, etc.)
☐ Believes patient is alive (agonal, movement)
☐ Ill themselves/recent surgery
☐ Believes patient is dead/cold/unknown down time
☐ Lack of strength/size difference
☐ Caller knew CPR/CPR in progress
☐ Lack of training/skill
☐ Caller left phone
☐ Language barrier
☐ Caller not at scene
☐ No access to patient
☐ Caller unable to move patient
☐ Obvious death
☐ Calling to report death only
☐ Others interfering/disrupting attempts
☐ Can’t hear or hear well
☐ Others who need care (child, elderly)
☐ Confused
☐ Patient has internal defibrillator
☐ Dangerous environment
☐ Patient is stranger/unknown to caller
☐ Denial of medical emergency
☐ Scared, Afraid
☐ Disabled/wheelchair bound
☐ Second party relay
☐ Distasteful characteristic
☐ Unable to access patient
☐ Distracted
☐ Vision problems or blind
☐ DNR/living will (didn’t know who else to call)
☐ Other:
☐ None
☐ Not applicable
If yes, was communicator-assisted CPR begun? Yes ☐ No ☐ Unknown ☐ Not applicable ☐

If no, reason not begun: Check all that apply
☐ Aid arrived
☐ Caller changed mind, now refusing
☐ Caller distracted
☐ Caller hard of hearing
☐ Caller having difficulty performing instructions (pinch nose, flat on floor, etc.)
☐ Caller having difficulty understanding instructions
☐ Caller hysterical (intermittent)
☐ Caller is afraid of hurting the patient
☐ Caller knew CPR/CPR in progress
☐ Caller left phone of unknown reason, open line
☐ Not applicable

☐ Caller left phone to check patient, at communicator request
☐ Caller left phone to confine animal
☐ Caller left phone to unlock door, turn on light, etc.
☐ Caller unable to move patient: confined workspace, weak rescuer; patient at risk of injury if moved. Overweight patient/caller
☐ Communicator delay due to unnecessary questions
☐ Communicator delay in starting instructions; unknown why
☐ Communicator delay, single communicator center/staffing
☐ Communicator issue
☐ Other: ☐

Arrest location:
☐ Attic
☐ Bedroom
☐ Car
☐ Garage
☐ Basement
☐ Kitchen
☐ Other:
☐ Yard
☐ Bathroom
☐ Public location indoor
☐ Public location outdoor
☐ Unable to determine
☐ Other living area

Patient moveable: Yes ☐ No ☐ Unable to determine ☐
☐ Other: ____________________________

Position of patient
☐ Lying in bed
☐ Lying on floor, abdomen
☐ Sitting
☐ Other:
☐ Wedged against/between object
☐ Lying on floor, back
☐ Unable to determine
Delivery method of CPR instructions (more than one answer may apply):

☐ Due to logistics, gave caller all CPR instructions at once and sent them to perform until help arrived; hung up with caller
☐ Given to caller who is also rescuer
☐ Given to caller who relayed to rescuer, open line, maintained contact with 911
☐ Multiple rescuers, switched out
☐ N/A no instructions given/accepted
☐ Stopped CPR prior to unit on scene to unlock door, confine pet, etc.

Time to first chest compression (in seconds): __ : __: __ ☐ Cannot be determined

Were ventilation instructions offered? ☐ Yes ☐ No ☐ Unknown

Did the caller provide ventilations? ☐ Yes ☐ No ☐ Unknown ☐ Not applicable

If no, why?
☐ Refused to perform
☐ Physically could not perform
☐ Other:
☐ EMS arrived too fast
☐ Couldn’t follow the directions
☐ Unknown

If the caller refused to provide ventilations, did they continue to provide compressions?
☐ Yes ☐ No ☐ Unknown ☐ Not applicable

Time to first ventilation (in seconds): ___:___:___ ☐ Cannot be determined

First EMS unit arrival time: ___:___:___ ☐ Cannot be determined

Relationship of caller to patient (note-caller is initial person to contact 911)
☐ Child
☐ Parent
☐ Sibling
☐ Spouse/significant other
☐ Other relative
☐ Healthcare provider/professional caregiver
☐ Friend/neighbor
☐ Work colleague
☐ Stranger
☐ Other:
☐ Unknown

Gender of caller: ☐ Male ☐ Female ☐ Unknown

Approximate age of caller: ☐ Child ☐ Adult ☐ Unknown

If child: ☐ Child<12 ☐ Adolescent(12-17) ☐ Unknown

If adult: ☐ Young adult(18-35) ☐ Adult(36-65) ☐ Senior(>65) ☐ Unknown

Were there other people besides the patient and caller at the scene? ☐ Yes ☐ No ☐ Unknown

Was it suggested to get help from others to:
Move the patient: ☐ Yes ☐ No
Give compressions: ☐ Yes ☐ No

Was the arrest witnessed? ☐ Yes ☐ No ☐ Unknown

Rescuer had prior CPR training (anyone at the scene)
☐ Not trained
☐ Trained, likely lay person
☐ Trained, likely professional (e.g. nurse, EMT, doctor)
☐ Other:
☐ Unknown
Did the patient turn out NOT to be in cardiac arrest?  ☐ Yes  ☐ No

If the patient was not in cardiac arrest, was it discovered after they received a compression?  
☐ Yes  ☐ No

If the patient was not in cardiac arrest and received a compression, did they sustain an injury that 
required medical treatment?  ☐ Yes  ☐ No  ☐ Unknown

Did the caller say there was an AED on scene?  ☐ Yes  ☐ No

If yes, was it used?  ☐ Yes  ☐ No  ☐ Unknown

If yes, were instructions needed?  ☐ Yes  ☐ No  ☐ Unknown

Was the caller put on hold?  ☐ Yes  ☐ No

If yes, for how many seconds?  __________________________

If yes, did the caller hang up?  ☐ Yes  ☐ No

Transporting agency:
☐ City  ☐ City
☐ City  ☐ City
☐ City  ☐ City
☐ City  ☐ City
☐ City  ☐ City
☐ City  ☐ City

Transporting agency unit number:  __________
EMS Med rec#  __________

Patient transported to hospital:  ☐ Yes  ☐ No  ☐ Unknown

If yes, which hospital:  ____________________________________________

Patient admitted to hospital:  ☐ Yes  ☐ No  ☐ Unknown
Patient survived to hospital discharge:  ☐ Yes  ☐ No  ☐ Unknown

Comments to communicator:  ____________________________________________  ☐ None

Resolution:  ____________________________________________  ☐ None needed