Frequently Asked Questions (FAQ)

Q. What data are included in the reports?

The reports are aggregated data submitted by Advanced Life Support (ALS) and Basic Life Support (BLS) EMS agencies and considers only the emergency/911 calls organized into the counties in which the emergency occurred.

Q. Does the report include all EMS data for New Jersey?

The report contains approximately 85% of all BLS and 100% of all ALS 911 pre-hospital emergency medical request records in NJ where EMS has responded to an actual patient. Some percentage of BLS agencies are not yet utilizing ePCR systems. They will all be required to do so as of January, 2018.

Q. How many EMS records are generated monthly in New Jersey?

The State collects an average of 120,000 EMS records collected in the State repository from over 300 EMS agencies Statewide.

Q. What is the 90th percentile?

90th Percentile is the time that it takes EMS agencies to respond to 9 out of 10 calls.

Q. How is 90th Percentile calculated?

For the response times, the 90th Percentile is calculated based on Total Calls (N) multiplied by 90/100.

For example, if N=10 (10,12,14,18,20,23,27,29,31,35), 90th percentile would be 10*0.9 = 9

If the 90th percentile is a whole number (9 is the whole number in the above example) take the average of 9th value and the 10th value which is (31+35)/2=33.

So, 33 is the 90th percentile in this example. If it is not a whole number, then round the number and that number would be the 90th percentile.
FAQ, cont’d

Q. How is response time defined?
Response time is defined as the time the agency is dispatched to the time the agency unit arrives at the incident location.

Q. What are the limitations/exclusions applied in the report?
Please see the Exclusion Criteria section of this report for a complete list and explanation of excluded records.

Q. What is an outlier?
Any response time that is less than 0 minutes or greater than 60 minutes is defined as an outlier and excluded from the report. These response times are considered to be errors.

Q. How did you validate the data?
Data is validated using the State EMS data repository and two analytical tools (ImageTrend and SAS). SAS is used to analyze the data and data is validated against the ImageTrend data.

Q. What is a Call Type?
Call Type is a description of the emergency as described and reported by the dispatch center. Call Type descriptions are based on the predefined national standard NEMSIS call types.

For example, if an emergency call is received for a patient with low blood sugar, the Call Type would be documented as “Diabetic Problem”.

Q. Why are some Call Types excluded from the report?
There are many types of calls that will generate an EMS response where there is no patient. This report contains only records where EMS has responded to an actual patient. Other call types are not emergency response but may be medical transport or other non-emergencies.
Q. Are all EMS agencies included in this report?

Data collected by EMS agencies utilizing electronic Patient Care Reporting (ePCR) are included in the report. As of January, 2018, all agencies responding to prehospital emergencies are required to report ePCR EMS data to the Department. This report includes all prehospital emergencies by both Basic and Advanced Life Support agencies reporting ePCR data to the State Repository.

Q. How do I know if my local agency is included in this report?

Contact your local EMS agency and ensure they are compliant with the EMS Data Law by using ePCR and submitting data.

Q. What is NEMSIS?

The National Emergency Medical Services Information System (NEMSIS) is the national database that is used to store EMS data from the U.S. States and Territories. NEMSIS is a universal standard for how patient care information resulting from an emergency 9-1-1 call for assistance is collected. More information can be found at https://nemsis.org.

Q. Who do I contact if I have additional questions regarding EMS Data?

Timothy Seplaki, BS, MICP, NRP, CPM
OEMS Data Manager
NJ Department of Health
Office of Emergency Medical Services
P.O Box 360, Trenton NJ 08625
Timothy.Seplaki@doh.nj.gov
609.633.7777
Glossary

- **ALS: Advanced Life Support**  Advanced prehospital medicine provided by Mobile Intensive Care Paramedics and Mobile Intensive Care Nurses in conjunction with Basic Life Support.

- **BLS: Basic Life Support**  Basic prehospital medicine provided by Emergency Medical Technicians (EMT), usually in ambulances.

- **ePCR: Electronic Patient Care Reporting**  An electronic version of a patient care report used to collect standardized data elements pertaining to patient’s health information and treatment by EMS.

- **Emergent**  Refers to responses where the patient is suspected of needing serious/critical prehospital medical care.

- **EMS: Emergency Medical Services**  The system of prehospital medicine, including assessment, diagnosis, treatment, and transport of people experiencing serious/critical health problems.

- **NEMSIS: National Emergency Medical Services Information System**  The National Emergency Medical Services Information System (NEMSIS) is the national data structure standard and a national database that is used to store EMS data from the U.S. States and Territories.

- **Non-Emergent**  Refers to responses where the patient is suspected of needing routine prehospital medical care.

- **Non-Patient Type Calls**  Refers to responses where no patient was encountered.

- **Patient Encounter**  The point at which the EMS clinician comes in contact with the patient (subject to whom help was requested).