4765-4-01 **Definitions.** 

- (A) "Data systems" means any system established by the state board of emergency medical services for the collection of information regarding the delivery of emergency medical services or trauma care including those established pursuant to section 4765.06 of the Revised Code.
- (B) "EMS casualty" means any injury, death, significant exposure to hazardous materials, or significant exposure to biological hazards experienced by EMS personnel, EMS students, other medical personnel or observers associated with an EMS unit that occur in conjunction with any of the following:
  - (1) An EMS incident;
  - (2) Responding to or returning from an EMS incident;
  - (3) During prehospital internship.
- (C) "EMS incident" means any ground or air response to a call for emergency medical services by a public or private emergency medical service organization.
- (D) "Emergency care facility" means a hospital emergency department, hospital operating room, hospital labor and delivery department, urgent care facility, or psychiatric urgent care facility.
- (E) "EMS care" means the emergency medical care provided by an individual certified to provide emergency medical services under Chapter 4765. of the Revised Code.
- (F) "Emergency medical services incident reporting system" or "EMS incident reporting system" means the system established by the state board of emergency medical services pursuant to section 4765.06 of the Revised Code for the collection of information regarding the delivery of emergency medical services in Ohio and the frequency at which the services are provided.
- (G) "Glasgow coma scale" or "GCS" is a numeric rating used to assess the severity of neurologic injury.
- (H) As used in this chapter, "health care facilities" means any of the following
  - (1) Hospitals registered under Chapter 3701. of the Revised Code;
  - (2) Nursing facilities licensed or certified under Chapter 3721. of the Revised Code;

- (3) County homes or county nursing homes as defined in section 5155.31 of the Revised Code;
- (4) Inpatient rehabilitation facilities as defined in Chapter 3701-83 of the Administrative Code;
- (5) Ambulatory surgical facilities as defined in section 3702.30 of the Revised Code;
- "Information that identifies or would tend to identify a specific recipient of EMS care or trauma care" shall have the same meaning as "individually identifiable health information", as defined in Title 45 of the Code of Federal Regulations, <u>Sectionsubtitle A, section</u> 160.103 (2006 edition) of the health insurance portability and accountability act (HIPAA) of 1996.

The Code of Federal Regulations is available via the "U.S. Government Printing Office" at http://www.gpo.gov/fdsys/browse/collectionCfr.action?collectionCode=CFR.

- (J) As used in HIPAA and in this chapter, "Individually identifiable health information" is information that is a subset of health information, including demographic information collected from an individual, and
  - (1) Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and
  - (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and
    - (a) That identifies the individual; or
    - (b) With respect to which there is a reasonable basis to believe the information can be used to identify the individual.
- (K) "Injury severity score" or "ISS" is a mathematical measure assessing the cumulative effect of injury severity.
- (L) "Major Trauma Outcome Study" or "MTOS" is a nationally based research project conducted between 1982 and 1987, which created and validated the TRISS

methodology.

- (M) "Response to a call for emergency medical service" or "response" means any of the following:
  - (1) Assessment of or treatment provided to a patient by a person who holds an EMS certificate to practice regardless of whether such patient was transported, transport of a patient from a call for EMS to an emergency care facility, or a canceled call;
  - (2) Transport between emergency care facilities provided by an emergency medical service organization.
- (N) "Risk Adjustment" means methodologies applied to a data set in order to identify and control patient variables that are present which may influence patient outcome.
- (O) "State trauma registry" means the system established by the state board of emergency medical services pursuant to section 4765.06 of the Revised Code for the collection of information regarding the delivery of trauma care in Ohio and the frequency at which the services are provided.
- (P) "Trauma care" has the same meaning as division (P) of section 4765.064765.01 of the Revised Code.
- (Q) "Trauma injury severity score" or "TRISS" is a methodology which combines the following variables in order to determine a probability of survival:
  - (1) Physiologic (systolic blood pressure, respiratory rate, Glasgow coma scale score);
  - (2) Anatomic injury severity score;
  - (3) Age (fifty five years or older, or younger than fifty five years);
  - (4) Trauma type (blunt or penetrating injury).

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Certification

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