ADVISORY 2021-02

Re: MIST form

Distribution: All EMS Agencies, REMO Physicians, Nurses Committee

Date: October 29, 2021

Purpose: To assure the safety of our EMS providers and Hospitals

Increased ED wait times and long EMS turnover times can lead to poor communication and potential patient harm. This advisory delineates the use of the MIST format as a model for EMS to hospital patient transition.

MIST report should be the format for every verbal trauma report given at Albany Medical Center.

M – Mechanism of injury or Medical Complaint
I – Injuries or inspection (exam)
S – Signs including recent and any significant changes
T – Treatment and concerns for transitions of care

As a reminder, all documentation for the patient must be labeled with the name and DOB of the patient including a drop-off form such as the MIST and any EKGs. EMS documentation must be completed at the time of drop-off at the hospital AND available for care in the ED if not leaving a paper form at the ED. Using this MIST form is not required but is a model agencies may use and is available from REMO.

ED Arrival
Notify Emergency Departments early in transport to allow them to make moves as available to create bed availability over the EMS radio using the MIST format.

Patient to Triage or Waiting Room
If asked to go to triage with the patient, and you believe the patient is appropriate for a triage location, the MIST form may be left when you check the patient in.

Some hospitals may feel that since you have given a radio report to a nurse, handoff is complete. Make sure to confirm with nursing prior to departing. Agency contact information MUST BE complete on the form.

Absolute Contraindications:
- Patient is unable to answer questions on their own
- Patient has abnormal and concerning vital signs
- Any additional patient factors that in the opinion of EMS that require conversation

Relative Contraindication:
- Patient has received medications (use your best judgement –direct handoff to a nurse is usually best)