

Reports are due to Office of Emergency Medical Services by the 30th of April, July, October and January.

|   |                   |
|---|-------------------|
| Reporting Quarter (Check only one)<br><input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th | Year<br><b>20</b> |
|---|-------------------|

|                                  |                  |                          |
|----------------------------------|------------------|--------------------------|
| Air Medical Unit Service Name    |                  | Telephone Number         |
| Street Address                   |                  | Fax Number               |
| City, State, Zip Code            |                  | ALS Charge Per Call      |
| Name of Person Completing Report | Name of Director | Name of Medical Director |

**Section 1 – Cancelled Flights**

|                                  |  |  |           |
|----------------------------------|--|--|-----------|
| Prior to Liftoff                 |  |  | Comments: |
| Enroute to Call                  |  |  |           |
| On Scene                         |  |  |           |
| <b>Total Cancelled Flights →</b> |  |  |           |

**Section 2 – Completed On-Scene Flights**

|                                 |  |  |           |
|---------------------------------|--|--|-----------|
| Motor Vehicle Crash             |  |  | Comments: |
| Industrial Incident             |  |  |           |
| Burns                           |  |  |           |
| Other, Specify in Comments      |  |  |           |
| <b>Total On-Scene Flights →</b> |  |  |           |

**Section 3 – Completed Interfacility Flights**

|                                      |  |  |           |
|--------------------------------------|--|--|-----------|
| Trauma                               |  |  | Comments: |
| Burn                                 |  |  |           |
| Cardiac                              |  |  |           |
| Other, Specify in Comments           |  |  |           |
| <b>Total Interfacility Flights →</b> |  |  |           |

**Section 4 – New Jersey Request, Not Accepted Flights**

|                                     |  |  |           |
|-------------------------------------|--|--|-----------|
| Weather                             |  |  | Comments: |
| Not Available, on Mission           |  |  |           |
| Not Available, Mechanical           |  |  |           |
| Not Medically Appropriate           |  |  |           |
| <b>Total Not Accepted Flights →</b> |  |  |           |

**Section 4 – Other New Jersey Flights - Miscellaneous**

|                                      |  |  |           |
|--------------------------------------|--|--|-----------|
| Safety Programs                      |  |  | Comments: |
| Homeland Security                    |  |  |           |
| Drills                               |  |  |           |
| Other, Specify in Comments           |  |  |           |
| <b>Total Miscellaneous Flights →</b> |  |  |           |

**QUARTERLY REPORT FOR AIR MEDICAL UNITS  
(CONTINUED)**

|  |  |  |  |                   |                        |  |  |
|--|--|--|--|-------------------|------------------------|--|--|
| Program Name                                       |  | Reporting Quarter <i>(Check only one)</i><br><input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th |  | Year<br><b>20</b> |                        |  |  |
| <b>Section 6 – Patient Age /</b>                   |  | <b>Section 7 - Sex Breakdown</b>   |  |                   |                        |  |  |
| <b>Age Range (Years)</b>                           |  | <b>Sex</b>   |  |                   |                        |  |  |
| 0 – 2 Year   |  | Male   |  |                   |                        |  |  |
| 3 – 6 Years  |  | Female   |  |                   |                        |  |  |
| 7 – 12 Years                                       |  | Unknown  |  |                   |                        |  |  |
| 13 – 18 Years                                      |  | <b>Total for Sexes →</b>   |  |                   |                        |  |  |
| 19 – 25 Years                                      |  |  |  |                   |                        |  |  |
| 26 – 35 Years                                      |  |  |  |                   |                        |  |  |
| 36 – 45 Years                                      |  |  |  |                   |                        |  |  |
| 46 – 55 Years                                      |  |  |  |                   |                        |  |  |
| 56 – 65 Years                                      |  |  |  |                   |                        |  |  |
| 66 Years and Older                                 |  |  |  |                   |                        |  |  |
| Unknown  |  |  |  |                   |                        |  |  |
| <b>Total for Age Range →</b>                       |  |  |  |                   |                        |  |  |
| <b>Section 8 – Time of Day and Day of the Week</b> |  |  |  |                   |                        |  |  |
| <b>Time of Day</b>                                 |  |  |  |                   | <b>Day of the Week</b> |  |  |
| 0001 - 0100  |  | Sunday   |  |                   |                        |  |  |
| 0101 - 0200  |  | Monday   |  |                   |                        |  |  |
| 0201 - 0300  |  | Tuesday  |  |                   |                        |  |  |
| 0301 - 0400  |  | Wednesday  |  |                   |                        |  |  |
| 0401 - 0500  |  | Thursday   |  |                   |                        |  |  |
| 0501 - 0600  |  | Friday   |  |                   |                        |  |  |
| 0601 - 0700  |  | Saturday   |  |                   |                        |  |  |
| 0701 - 0800  |  | <b>Total for Days of Week →</b>  |  |                   |                        |  |  |
| 0801 - 0900  |  |  |  |                   |                        |  |  |
| 0901 - 1000  |  |  |  |                   |                        |  |  |
| 1001 - 1100  |  |  |  |                   |                        |  |  |
| 1101 - 1200  |  |  |  |                   |                        |  |  |
| 1201 - 1300  |  |  |  |                   |                        |  |  |
| 1301 - 1400  |  |  |  |                   |                        |  |  |
| 1401 - 1500  |  |  |  |                   |                        |  |  |
| 1501 - 1600  |  |  |  |                   |                        |  |  |
| 1601 - 1700  |  |  |  |                   |                        |  |  |
| 1701 - 1800  |  |  |  |                   |                        |  |  |
| 1801 - 1900  |  |  |  |                   |                        |  |  |
| 1901 - 2000  |  |  |  |                   |                        |  |  |
| 2001 - 2100  |  |  |  |                   |                        |  |  |
| 2101 - 2200  |  |  |  |                   |                        |  |  |
| 2201-2300  |  |  |  |                   |                        |  |  |
| 2301-2400  |  |  |  |                   |                        |  |  |
| <b>Total for Time of Day →</b>                     |  |  |  |                   |                        |  |  |

**QUARTERLY REPORT FOR AIR MEDICAL UNITS  
(CONTINUED)**

|              |  |                   |
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|--------------|--|-------------------|

**Section 9 – Counties of Flight Origin**

|            |  |                                       |  |
|------------|--|---------------------------------------|--|
| Atlantic   |  | Middlesex                             |  |
| Bergen     |  | Monmouth                              |  |
| Burlington |  | Morris                                |  |
| Camden     |  | Ocean                                 |  |
| Cape May   |  | Passaic                               |  |
| Cumberland |  | Salem                                 |  |
| Essex      |  | Somerset                              |  |
| Gloucester |  | Sussex                                |  |
| Hudson     |  | Union                                 |  |
| Hunterdon  |  | Warren                                |  |
| Mercer     |  | <b>Total for Counties of Origin →</b> |  |

**Section 10 – Receiving Facilities – New Jersey Trauma Center**

|  |  |
|--|--|
| Cooper Health System                                       |  |
| Robert Wood Johnson University Hospital                    |  |
| UMDNJ - University Hospital                                |  |
| Atlantic City Medical Center                               |  |
| Hackensack University Medical Center                       |  |
| Capital Health System @ Fuld                               |  |
| Jersey City Medical Center                                 |  |
| Jersey Shore Medical Center                                |  |
| Morristown Memorial Hospital                               |  |
| St Joseph's Hospital & Medical Center                      |  |
| <b>Total for Receiving Facilities – NJ Trauma Centers→</b> |  |

**QUARTERLY REPORT FOR AIR MEDICAL UNITS  
(CONTINUED)**

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|--|--|-------------------|
| <b>Section 11 – Receiving Facilities – Other Acute Care Facilities</b> |  |                   |
| <b>DELAWARE</b>  |  |                   |
| Alfred I. DuPont Institute   |  |                   |
| Christiana Care Health System  |  |                   |
| <b>MARYLAND</b>  |  |                   |
| Johns Hopkins Medical Center   |  |                   |
| <b>NEW JERSEY</b>  |  |                   |
| Beth Israel Medical Center   |  |                   |
| Deborah Heart and Lung Hospital  |  |                   |
| Monmouth Medical Center  |  |                   |
| Our Lady of Lourdes Medical Center                                     |  |                   |
| Overlook Hospital  |  |                   |
| St. Barnabas Medical Center  |  |                   |
| Children's Specialized Hospital  |  |                   |
| <b>NEW YORK</b>  |  |                   |
| Columbia Presbyterians Hospital  |  |                   |
| Cornell University Medical Center                                      |  |                   |
| Mount Sinai Hospital   |  |                   |
| Jacobi Medical Center  |  |                   |
| <b>PENNSYLVANIA</b>  |  |                   |
| Albert Einstein Medical Center   |  |                   |
| Chester Crozer Trauma / Burn Center                                    |  |                   |
| Children's Hospital of Philadelphia (CHOP)                             |  |                   |
| Doylestown Hospital  |  |                   |
| Fox Chase  |  |                   |
| Graduate Hospital  |  |                   |
| Hahnemann University Hospital  |  |                   |
| Hospital of the University of Pennsylvania                             |  |                   |
| Lankenau Hospital  |  |                   |
| Lehigh Valley Medical Center   |  |                   |
| Pennsylvania Hospital  |  |                   |
| Presbyterian Hospital of Philadelphia                                  |  |                   |
| Saint Christopher's Hospital   |  |                   |
| Saint Luke's Hospital of Bethlehem                                     |  |                   |
| Thomas Jefferson University Hospital                                   |  |                   |
| Will's Eye Hospital  |  |                   |
|  |  |                   |
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|  |  |                   |
|  |  |                   |
|  |  |                   |
|  |  |                   |
|  |  |                   |
| <b>Total for Receiving Facilities – Other Acute Care Facilities→</b>   |  |                   |