

**Oswego Town Fire/Rescue  
PCR Cheat Sheet**

Date \_\_\_\_\_ Call Location: \_\_\_\_\_ Call Rec'd: \_\_\_\_\_

Patient Name: \_\_\_\_\_ Responding: \_\_\_\_\_

Address: \_\_\_\_\_ Arrived: \_\_\_\_\_

Phone: \_\_\_\_\_ SS#: \_\_\_\_\_ Cancelled: \_\_\_\_\_

Age: \_\_\_\_ DOB: \_\_\_\_\_ Male Female Call completed: \_\_\_\_\_

Allergies: \_\_\_\_\_ 3462 3461 \_\_\_\_\_

Medical History: \_\_\_\_\_ Multiple Patients

High BP - Seizures - Stroke - Diabetic - Cardiac - Asthma \_\_\_\_\_ of \_\_\_\_\_

**Vitals** Incident # \_\_\_\_\_

Time: \_\_\_\_\_ B/P: \_\_\_\_\_ Pulse: \_\_\_\_\_ Resp: \_\_\_\_\_ SPO2: \_\_\_\_\_ BG: \_\_\_\_\_

Time: \_\_\_\_\_ B/P: \_\_\_\_\_ Pulse: \_\_\_\_\_ Resp: \_\_\_\_\_ SPO2: \_\_\_\_\_ BG: \_\_\_\_\_

Medicines \_\_\_\_\_

\_\_\_\_\_

EMT: \_\_\_\_\_ Driver: \_\_\_\_\_

Other: \_\_\_\_\_ Other: \_\_\_\_\_

Ambulance: \_\_\_\_\_ Patient Refusal

Transported to: Oswego Crouse Upstate Community St. Joes VA