

Massachusetts Ambulance Trip Record Information System (MATRIS) Data Elements

Version 1.4 – Effective 3/19/09 *(Supersedes Version 1.3, 5/1/08 and Version 1.2, 9/1/06)*
per A/R 5-403: Statewide EMS Minimum Data Set

Data Element	NEMSIS Number	Data Element	NEMSIS Number
911 Call Volume per Year	D01_14	First Monitored Rhythm of the Patient	E11_05
AED, Pacing, or CO2 Mode	E21_05	Gender	E06_11
Age	E06_14	Glasgow Coma Score-Eye	E14_15
Age Units	E06_15	Glasgow Coma Score-Motor	E14_17
Airbag Deployment	E10_09	Glasgow Coma Score-Qualifier	E14_18
Alcohol/Drug Use Indicators	E12_19	Glasgow Coma Score-Verbal	E14_16
Any Return of Spontaneous Circulation	E11_06	Incident Address	E08_11
Area of the Vehicle impacted by the collision	E10_05	Incident City	E08_12
Arrest Witnessed by	E11_04	Incident Location Type	E08_07
Arrived at Patient Date/Time	E05_07	Incident State	E08_14
Barriers to Patient Care	E12_01	Incident ZIP Code	E08_15
Cardiac Arrest	E11_01	Incident/Patient Disposition	E20_10
Cardiac Arrest Etiology	E11_02	Level of Responsiveness	E14_22
Cardiac Rhythm	E14_03	Level of Service	D01_07
Cardiac Rhythm on Arrival at Destination	E11_11	Mass Casualty Incident	E08_06
Cause of Injury	E10_01	Mechanism of Injury	E10_03
Chief Complaint	E09_05	Medical/Surgical History	E12_10
Chief Complaint Anatomic Location	E09_11	Medication Allergies	E12_08
Chief Complaint Organ System	E09_12	Medication Complication	E18_08
CMS Service Level	E07_34	Medication Given	E18_03
Complaint Reported by Dispatch	E03_01	Medications Given	D04_06
Condition Code Number	E07_35	National Provider Identifier	D01_21
Crew Member ID	E04_01	Number of Patients at Scene	E08_05
Crew Member Level	E04_03	Number of Procedure Attempts	E19_05
Current Medications	E12_14	Organization Status	D01_09
Date of Birth	E06_16	Organizational Type	D01_08
Date/Time Vital Signs Taken	E14_01	Other Associated Symptoms	E09_14
DBP (Diastolic Blood Pressure)	E14_05	Outcome of the Prior Aid	E09_03
Destination City	E20_04	Pain Scale	E14_23
Destination confirmation of tube placement	E19_14	Patient Arrived at Destination Date/Time	E05_10
Destination Facility Number	D04_14	Patient Care Report Number	E01_01
Destination GPS Location	E20_08	Patient's Home Address	E06_04
Destination State	E20_05	Patient's Home City	E06_05
Destination Street Address	E20_03	Patient's Home State	E06_07
Destination Type	D04_15	Patient's Home Zip Code	E06_08
Destination Zip Code	E20_07	Position of Patient in the Seat of the Vehicle	E10_07
Destination/Transferred To, Code	E20_02	Possible Injury	E09_04
Destination/Transferred To, Name	E20_01	Primary Method of Payment	E07_01
Duration of Chief Complaint	E09_06	Primary Role of the Unit	E02_05
ECG Interpretation	E21_07	Primary Symptom	E09_13
ECG Lead	E21_06	Prior Aid	E09_01
EMD Performed	E03_02	Prior Aid Performed by	E09_02
EMS Agency County	D01_04	Procedure	E19_03
EMS Agency Number	D01_01	Procedure Complication	E19_07
EMS Agency Number	E02_01	Procedure Successful	E19_06
EMS Agency State	D01_03	Procedures	D04_04
EMS Agency Time Zone	D01_19	Provider's Primary Impression	E09_15
EMS Dispatch Volume per Year	D01_15	Providers Secondary Impression	E09_16
EMS Patient Contact Volume per Year	D01_17	PSAP Call Date/Time	E05_02
EMS Transport Volume per Year	D01_16	Pulse Oximetry	E14_09
EMS Unit Call Sign (Radio Number)	E02_12		
Ethnicity	E06_13		

Data Element	NEMSIS Number
Pulse Rate	E14_07
Race	E06_12
Reason CPR Discontinued	E11_10
Reason for Choosing Destination	E20_16
Research Survey Field	E23_09
Research Survey Field Title	E23_11
Respiratory Rate	E14_11
Response Mode to Scene	E02_20
Resuscitation Attempted	E11_03
Revised Trauma Score	E14_27
SBP (Systolic Blood Pressure)	E14_04
Scene GPS Location	E08_10
Seat Row Location of Patient in Vehicle	E10_06
Software Creator	E01_02
Software Name	E01_03
Software Version	E01_04
Statistical Year	D01_10
Stroke Scale	E14_24
Time Units of Duration of Chief Complaint	E09_07
Total Glasgow Coma Score	E14_19

Data Element	NEMSIS Number
Total Service Area Population	D01_13
Total Service Size Area	D01_12
Tube Confirmation	E19_13
Transport Mode from Scene	E20_14
Type of Destination	E20_17
Type of Dispatch Delay	E02_06
Type of Response Delay	E02_07
Type of Scene Delay	E02_08
Type of Service Requested	E02_04
Type of Transport Delay	E02_09
Type of Turn-Around Delay	E02_10
Unit Arrived on Scene Date/Time	E05_06
Unit Back at Home Location Date/Time	E05_13
Unit Back in Service Date/Time	E05_11
Unit En Route Date/Time	E05_05
Unit Left Scene Date/Time	E05_09
Unit Notified by Dispatch Date/Time	E05_04
Use of Occupant Safety Equipment	E10_08
Vehicular Injury Indicators	E10_04