

D.M.I.S.T. EMS Time Out Report

Demographics

Name, DOB, Age, Sex

Mechanism/ medical complaint

**Time, mechanism of injury
or medical complaint/history**

Injury/illness

**List of injuries head to toe,
assessment findings, STEMI/
stroke/sepsis/trauma criteria, pain**

Symptoms & vital signs

**Vital signs, first set and
significant changes, GCS**

Treatments

**Treatments/Interventions
given, patient response**