

***The OpenISES Project
Presents***

***Emergency Medical
Dispatch
Guide Cards***

***Draft Version 0.2
Flip Card Format***



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Important

This is the first draft set of the Emergency Medical Dispatch section of the Cards project. As with any medical product or device, these protocols are only offered as a suggestion. You should consult with your local medical director, state regulatory office or other regulating body before using any of these protocols. They come with no guarantee as to the soundness/quality or accuracy of the protocols.

The cards are based on the recommendations of the United States National Highway Traffic Safety Administration. Several different formats were studied in the creation of these card sets, and what we felt were the best ideas being incorporated into this set.¹ However, this is not set in stone.

Unlike other EMD protocol card sets, you can modify these to meet the needs of your agency. This EMD protocol set is released under the Creative Commons license. Under the license for this protocol set, you can modify the protocols, create as many copies as you like and share the protocols with others. You are not allowed to sell them. You should make sure that The Open ISES Project is noted as the original author of the protocols. If you modify them you should also note that as well.

Using the Cards

The cards in this set are designed to be printed out on a color printer on 8.5 x 11-inch paper. The paper is then folded in half and placed into a flip card holder.

When in use, the cards are read from top to bottom, with the Key Questions being asked first, then the proper dispatch code (Red or Yellow), followed by pre-arrival instructions to be given to the caller. There are Call-taker prompts to reinforce certain actions, and a short dispatch guide.

These cards are presented as a guide to help your agency get started in providing EMD services. Your agency must decide what questions to maintain, what questions to change. Your agency must decide how you wish to respond based on the answers you receive from the caller.

If you have any comments or suggestions concerning this card set, please drop us a line and let us know. Our goal is to make The Cards Project useful to as many PSAPs as possible. We can only do that through your help.

¹ The New Jersey Office of Telecommunications (<http://www.state.nj.us/911/training.html>) EMD Card set (<http://www.state.nj.us/911/2006emdguidecard.pdf>) was a major influence in the development of this card set. Also, the Milwaukee County EMS Dispatch Guidelines (<http://www.milwaukeecounty.org/EMSDispatchGuideline10703.htm>) for a 3-Tiered Response with Pre-Arrival Instructions (http://www.milwaukeecounty.org/display/displayFile.aspx?docid=10703&filename=/User/jspitzer/3-Tiered_Dispatch_with_Pre-arrival_3-31-05.pdf). Other web sites such as Dispatch Monthly (<http://www.911dispatch.com>), the National Academy of Emergency Dispatch (<http://www.emergencydispatch.org>) and the Association of Public-Safety Communications Officials (<http://www.apcointl.org>) provided additional information used in the development of this card set.

Card Sets

C: Critical Care Events with Instructions		M: Medical Incidents	
C1	Cardiac Arrest	M1	Abdominal Pain
C2	Choking	M2	Allergies/Stings
C3	Drowning	M3	Back Pain (Non-traumatic)
C4	Electrocution	M4	Breathing Problems
C5	Pregnancy/Childbirth	M5	Chest Pain/Heart Problems
C6	Unconscious/Fainting	M6	Diabetic Problems
H: Hazardous Incidents		M7	Headache
H1	Aircraft/Terrorism	M8	Health Care Provider Requests EMS
H2	Carbon Monoxide/Inhalation/HazMat	M9	Home Medical Equipment
H3	HazMat Incident Guidelines	M10	Obvious Death
H4	Helicopter Guideline	M11	Overdose/Poisoning/Ingestions
H5	Industrial Accident	M12	Patient Assistance
I: Instructions		M13	Psychiatric/Behavioral Problems
I1	Automated External Defibrillator	M14	Seizures/Convulsions
I2	Adult CPR Instructions	M15	Sick Case
I3	Child CPR Instructions	M16	Stroke/CVA
I4	Infant CPR Instructions	M17	Unknown/Man Down
I5	Adult Choking Instructions	T: Traumatic Incidents	
I6	Child Choking Instructions	T1	Animal Bites
I7	Infant Choking Instructions	T2	Assault/Domestic Violence/Sexual Assault
I8	Childbirth Instructions	T3	Bleeding/Laceration
I9	Medical Airway Control Instructions	T4	Burns
I10	Trauma Airway Control Instructions	T5	Eye Problems/Injuries
I11	Bleeding Control Instructions	T6	Fall Victim
		T7	Heat/Cold Exposure
		T8	Stabbing/Gunshot Victim
		T9	Traumatic Injury
		T10	Motor Vehicle Collisions

ALL CALLERS INTERROGATION

1. Where is your emergency (<i>address or location</i>)	Confirm location
2. What is the phone number you are calling from	Confirm phone number
3. What is the emergency ?	If MVC jump to the T11: MVC Card
4. How many people are hurt (<i>if not obvious</i>)?	
5. How old is the patient?	
6. Is the patient conscious ?	If No , Send a Code Red Response Advise Caller help has been dispatched
7. Is the patient breathing ?	<ul style="list-style-type: none"> ● If Yes, Go to the C6: Unconscious/Fainting Card ● If Uncertain, tell caller to Go and See if the chest is rising, then come back to the phone ● If No, go to the C1: Cardiac Arrest Card
8. Is the patient male or female (<i>if not obvious</i>)?	
9. What is your name ?	

C1: Cardiac Arrest

KEY QUESTIONS	<ol style="list-style-type: none"> 1. Is the patient alert? 2. Is the patient breathing normally? 3. (<i>If unsure about consciousness of patient</i>) Does the patient respond to you? Does the patient move? 4. (<i>If unsure about breathing</i>) Go look at the patient's chest and see if it goes up and down, then come back to the phone 5. (<i>If unsure about breathing</i>) Listen for sound and frequency of breathing <i>Agonal respirations are often reported as gasping, snoring, gurgling, barely breathing, occasional moaning weak or heavy</i> 6. (<i>If not obvious</i>) Is this an expected death? (<i>If yes</i>) Is the patient in hospice care? Jump to M10: Obvious Death Card 	
	CODE RED	CODE YELLOW
DISPATCH	<ol style="list-style-type: none"> 1. Unconscious 2. Not breathing normally 3. Possible DOA of unknown origin 	<ol style="list-style-type: none"> 1. Confirmed hospice expected death

C1: Cardiac Arrest – Pre-Arrival Instructions

1. Go to the age specific CPR Instruction card
2. *(If caller refuses CPR instructions)* Gather any patient medications for the paramedics
3. Lock away any pets
4. **If the patient's condition changes, or you decide to provide CPR, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. Agonal respirations are ineffective breaths which occur after cardiac arrest

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

C2: Choking

KEY QUESTIONS

1. Is the patient **alert**?
2. Is the patient breathing **normally**?
3. **Describe** the breathing?
Does the chest rise? Does air enter freely?
4. Is the patient able to speak (*cry*)?
5. Is the patient turning blue (*changing color*)?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Unable to talk/cry
4. Turning blue (changing color)

1. Able to speak or cry
2. Exchanging air with no breathing difficulty
3. Airway cleared, assist patient

C2: Choking – Pre-Arrival Instructions

1. Go to the age specific Choking Instruction card
2. *(If caller refuses choking instructions)* Gather any patient medications for the paramedics
3. Lock away any pets
4. **If the patient's condition changes, or you decide to provide care, call me back immediately**

Call Taker Prompts

1. A previously healthy child who is suddenly found to be not breathing/cardiac arrest is considered to be a foreign body airway obstruction until proven otherwise

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

C3: Drowning (Possible)

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S | <ol style="list-style-type: none"> 1. Is the patient alert? 2. Is the patient breathing normally? 3. Has the patient been removed from the water? 4. <i>(If yes and not obvious)</i> Is the patient on land or in a boat? 5. How long was the patient underwater? 6. What was the patient doing before the accident? 7. <i>(If not obvious)</i> Is this a scuba diving accident? |
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CODE RED

CODE YELLOW

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H | <ol style="list-style-type: none"> 1. Unconscious 2. Not breathing normally 3. Scuba diving accident 4. Diving accident (consider c-spine injury) 5. Patient still submerged | <ol style="list-style-type: none"> 1. Patient not submerged with no critical symptoms 2. Patient coughing 3. Other injuries without critical symptoms 4. Minor injuries (lacerations, etc) |
|--------------------------------------|---|--|

C3: Drowning (Possible) – Pre-Arrival Instructions

1. Do not attempt to rescue the patient unless you are trained to do so
2. Do not move the patient around
3. Keep the patient warm
4. Gather any patient medications for the paramedics
5. Lock away any pets
6. **If the patient's condition changes, or you decide to provide care, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/AirwayControl** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Is Rescue needed?
4. Are boats needed?
5. Is Scuba Team needed?
6. Should the Diver's Alert Network (DAN) be notified?
+1-919-684-8111 and +1-919-684-4DAN (-4326)
7. Law enforcement notified?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

C4: Electrocutation

KEY QUESTIONS

1. Is the patient still in **contact** with the source?
2. Is the patient **alert**?
3. Is the patient breathing **normally**?
4. (*If household electrocutation*) Did the patient contact a dryer, stove or other **220-volt** source
5. Are there any other **injuries**?
(*If yes*) What are they?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Burns to airway, mouth or nose
5. Burns over 20% of body surface area
6. Burns from contact with 220-volt source or higher
7. Reported DOA until evaluation by responsible party
8. Multiple patients

1. Household shock without critical symptoms

C4: Electrocution – Pre-Arrival Instructions

- Beware of ground moisture
- Do not touch the patient if still in contact with the source of electricity
- Beware of liquid spills that may conduct electricity
- If safe to do so, turn off the power.
- Gather any patient medications for the paramedics
- Lock away any pets
- If the patient's condition changes, or you decide to provide care, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Is Rescue needed?
4. Is Fire Department needed?
5. Law enforcement notified?
6. Is the power company needed?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

C5: Pregnancy/Childbirth

KEY QUESTIONS

1. Is the patient alert?
2. Is the patient breathing normally?
3. How far along is she?
4. Is she having contractions?
5. Is there a strong urge to push?
6. Can you see the baby's head? Is the baby coming out?
7. Is this her first pregnancy?
8. Are any complications expected?
9. Has her water broke?
10. Is she bleeding?
11. Has she had a seizure
12. (If post delivery) Is the baby breathing?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Imminent delivery or delivery
5. Syncopal episode
6. Prior history of complicated delivery
7. Bleeding >20 weeks pregnant
8. Premature active labor, >4 weeks premature
9. Abdominal injury >20 weeks pregnant
10. Seizure
11. Multiple births

1. Delivery not imminent
2. Vaginal bleeding without fainting <20 weeks pregnant
3. Abdominal injury <20 weeks pregnant
4. Water broke
5. Pregnant <20 weeks or menstrual with any of the following
 - Cramps
 - Pelvic pain
 - Spotting

C5: Pregnancy/Childbirth – Pre-Arrival Instructions

1. Do not use the toilet
2. Have the patient lie down on their left side
3. Keep the patient warm
4. Do not flush toilet or dispose of any used pads
5. Gather any patient medications for the paramedics
6. Lock away any pets
7. **If the patient's condition changes, or you decide to provide care, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Imminent and post delivery jump to I7: Childbirth Instruction card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

C6: Unconscious/Fainting

KEY QUESTIONS

1. Is the patient **alert**?
2. Is the patient breathing **normally**?
3. Is this the first time today that the patient has been **unconscious**?
4. *(If not obvious)* Have you tried to wake the patient up?
5. Do you know if the patient is taking any **drugs**? Drinking **alcohol** *(alone or with the drugs)*?
6. What was the patient doing before they became unconscious?
7. Did the patient have any complaints before they went unconscious?
8. Does the patient have a Medic Alert Tag?
(If Yes) What does it say?

CODE RED

CODE YELLOW

DISPATCH

- | | |
|--|--|
| <ol style="list-style-type: none"> 1. Unconscious 2. Not breathing normally 3. Decreased level of consciousness 4. Combined drug and alcohol overdose 5. Fainting associated with;
Headache, Chest Discomfort, Diabetic, GI/Vaginal Bleeding, Abdominal Pain, Sitting/Standing or Continued Decreased Level of Consciousness 6. Single fainting episode >50 years of age 7. Alcohol intoxication and cannot be aroused | <ol style="list-style-type: none"> 1. Unconscious but now conscious with no critical symptoms 2. Unconfirmed 'slumped over the wheel' 3. Conscious with minor injuries 4. Alcohol intoxication but can be aroused 5. Near syncope without critical criteria |
|--|--|

C6: Unconscious/Fainting – Pre-Arrival Instructions

1. Have the patient lie down
2. If patient is vomiting, place them on their side
3. Do not leave the patient, be prepared to perform CPR
4. Gather any patient medications for the paramedics
5. Lock away any pets
6. **If the patient's condition changes, or you decide to provide care, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Notify law enforcement?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

H1: Aircraft/Terrorism

KEY

This card for use when PSAP receives a call from a passenger or crew member on-board an airborne aircraft, reporting a hijacking or other violent terrorist event.

QUESTIONS

- Caller Information (*name and seat number*)
- Flight Information (*airline, flight no., departure and destination airports*)
- Caller's cell phone number
- Individual's intentions or intended target (*if known*)
- Is anyone hurt or injured?
Are you in a position to help with the victim(s)?
- (*If safe to do so, keep caller on the line*) Tell me what happened, Stay Calm
- Patch through to local Air Defense Sector if requested
- ***If a medical problem exist, jump to the appropriate card***

WHEN TO CALL

WHEN NOT TO CALL

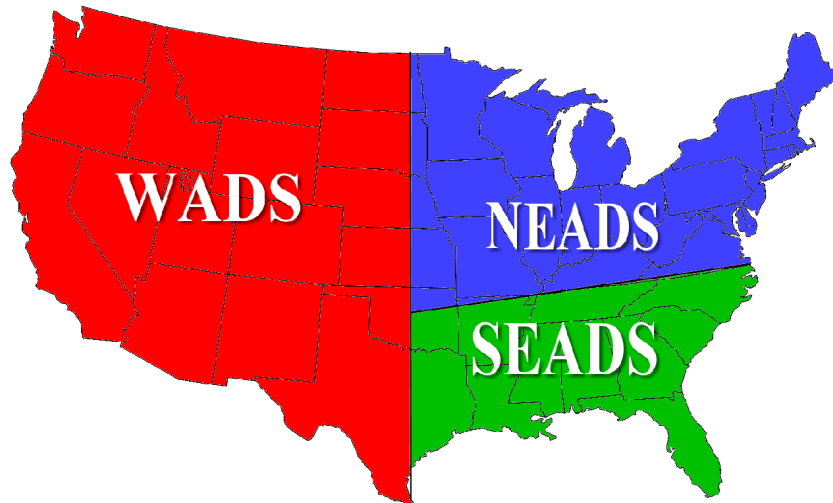
DISPATCH

1. Emergency call from an airborne aircraft
 2. Suspicious airborne object or aircraft
 3. Aircraft theft in progress or just occurred
- **Notify the local Air Defense Sector**

1. Complaints about sonic booms
 2. Aircraft noise complaints that are reported in the vicinity of airports
 3. Reporting a crop duster spraying an agricultural field
 4. Report of military aircraft flying in a typical military operations area
- **If In Doubt – CALL!**

H1: Aircraft/Terrorism – Pre-Arrival Instructions

Map of United States Air Defense Sectors



Local Air Defense Command Numbers

- South East Air Defense Sector *SEADS* (850) 283-5205/5207
- North East Air Defense Sector *NEADS* (315) 334-6311/6802
- Western Air Defense Sector *WADS* (253) 382-4310/4311
- Alaskan NORAD Region *ANR* (907) 552-6222/6293

**The numbers above should be verified before their use becomes necessary.
These numbers can and do change**

H2: CO/Inhalation/HazMat

KEY QUESTIONS

1. Is the victim alert?
2. Is the victim breathing normally?
3. Do you know what the source of the contamination is?
4. Has the victim been removed from the area or the source of the contamination?
5. Has a Carbon Monoxide (CO) detector activated?
6. *(If not CO)* What is the name of the contaminating agent?
7. Is more than one person effected?
(If yes) How many victims?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Difficulty swallowing
5. Ingestion of household cleaners, antifreeze, solvents, methanol, cyanide or insecticides
6. Multiple causality incident

1. Chemicals on patient's skin or clothing with no critical symptoms
2. 3rd party caller, not with patient

H2: CO/Inhalation/HazMat – Pre-Arrival Instructions

1. Stay Safe – Prevent self contamination
2. *(If CO Detector activation)* Have everyone get out of the house/building
3. *(If possible)* Have patient remove contaminated clothing and contact lenses
4. If chemical is a powder, brush off. **Do Not Use Water**
5. *(If burns to eyes)* Flush chemicals from burns to eyes
6. *(If burned)* Placed burn area in cool water, not ice.
7. *(If known)* Get information on the chemical involved
Material Safety Data Sheet (*MSDS*)
8. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Consider contacting Poison Control
4. Notify the Fire Department?
5. Has law enforcement been notified?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

H3: HazMat Incident Guidelines

KEY QUESTIONS

1. Where exactly is the emergency?
2. (If not obvious) What is the direction of travel?
3. (If applicable) What is the best access route to the facility?
4. Are you in a safe location?
5. *If YES, continue questioning. If NO, advise caller to move to a safe location and call back*
6. What type of hazard is involved?
7. Are there any injuries? If yes, jump to the appropriate trauma card
8. Do you know the name and/or the ID Number of the material?
9. Is the material currently a solid, liquid or gas?

Medical Dispatch

HazMat Agency Dispatch

DISPATCH

1. Refer to the appropriate traumatic injury card

1. Notify all appropriate/applicable local/county/state agencies

H3: HazMat Incident Guidelines – Pre-Arrival Instructions

1. **If you are not in a safe location, leave the area immediately and call back when you are safe**
2. If possible, gather any available information on the material(s) involved
3. Deny entry to the affected area. If it is safe to do so, secure the premises. Isolate the area
4. If it is safe to do so, isolate or remove the injured from the scene

Prompts

Dispatcher Short Report

1. Amount of material spilled or released
2. Size/Type of container
3. Is release (use as many as apply)
 - Continuous
 - Intermittent
 - Contained
 - Entering a waterway
 - Entering a storm water drain or sewer
 - Other: _____
4. Have personnel been evacuated from the area
5. Are there any emergency responders or HazMat personnel on the scene?
 - (If Yes) Who are they?
6. Is chemical information available to the responders?
 - (If Yes) Please have it ready for the emergency responders
7. Can you tell what the wind direction is?

1. Specific location
2. Access route
3. Type of HazMat incident
4. Number and nature of injuries, if any
5. Release type
6. Wind direction/weather information
7. Other Agencies responding

H4: Helicopter Guidelines

Air transportation should be considered when emergency personnel have evaluated the individual circumstances and found any of the following present.

ENVIRONMENTAL

- The time needed to transport a patient by ground to an appropriate facility poses a threat to the patient's survival and recovery
- Weather, road and traffic conditions would seriously delay the patient's access to Advanced Life Support
- Critical care personnel and equipment are needed to adequately care for the patient during transport
- Falls of 20 feet or more
- Motor Vehicle Collisions (MVC) of 20 mph or more without restraints or Rollover
- Rearward displacement of front of car by 20 inches
- Rearward displacement of front axle
- Passenger compartment intrusion
- Ejection of patient from the vehicle
- Deformity of a contact point (steering wheel, windshield, dashboard)
- Death of occupant in the same vehicle
- Pedestrian struck at 20 mph or greater

A & P
COMP

- Unconscious or decreasing level of consciousness
- Systolic blood pressure less than 90 mmHg
- Respiratory rate less than 10 per minute or greater than 30 per minute
- Glasgow Coma Score less than 10
- Compromised airway
- Penetrating injury to the chest, abdomen, head, neck or groin
- Two or more long bone fractures
- Flail chest
- Amputation of an extremity
- Paralysis or spinal cord injury
- Severe burns

H4: Helicopter Guidelines – Landing Zone Instructions

1. Where is the landing zone to be located?
2. What is the general description of the landing zone?
3. What is the approximate size of the landing zone?
4. (If not obvious) What is the topography of the landing zone?
5. What obstacles will the aircraft encounter on landing/take-off?
6. What direction is the wind at the landing zone?
7. How is the landing zone going to be marked?
8. What is the ideal approach to the landing zone?
9. (If not obvious) What is the location of the landing zone in reference to the incident?

Call Taker Prompts

1. Local Air Medical Transport 888-888-8888
2. Local Air Medical Transport 888-888-8888
3. Local Air Medical Transport 888-888-8888
4. Notify Fire/Rescue and Law Enforcement for Landing Site?
5. (If HazMat) Landing Zone is one mile from explosives, poisonous gases or chemicals in danger of exploding

Dispatcher Short Report

1. Ground contact
2. Specific location
3. Description & Size
4. Obstacles
5. Wind direction
6. Landing zone markings
7. Best approach
8. Location of LZ in reference to the incident
9. Any other pertinent information

H5: Industrial Accidents

KEY QUESTIONS

1. Is the patient alert?
2. Is the patient breathing normally?
3. Are there any obvious injuries?
(If yes) What are they?
4. (If amputation) What part of the body has been amputated?
Do you have the amputated parts?
5. Is the patient able to move their fingers and toes? (Do not have them move any other body part)
6. Is the patient bleeding?
7. (If yes) From where? How much? How long? Can it be controlled with pressure?

CODE RED

CODE YELLOW

DISPATCH

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. Unconscious 2. Not breathing normally 3. Decreased level of consciousness 4. Crushing or penetrating injury to head, neck, torso or thigh 5. Victim entrapment 6. Amputation other than finger or toes 7. Victim paralyzed 8. Uncontrolled bleeding 9. Multiple fractures 10. Femur (thigh) fracture. | <ol style="list-style-type: none"> 1. Amputation/entrapment of fingers/toes 2. Neck and/or back pain without critical symptoms 3. Bleeding that has been controlled 4. Cuts, bumps or bruises 5. Victim assist only 6. Involved in accident with no complaints |
|---|--|

H5: Industrial Accidents – Pre-Arrival Instructions

1. *(If safe to do so)* Turn off any machinery involved *(Attempt to locate maintenance person)*
2. *(If no life threaten hazards present)* Do not move the victim
3. Advise the victim not to move
4. *(If victim is in a confined space)* Do Not enter the area to tend to the victim
5. Advise patient not to move
6. If bleeding, use a clean cloth and apply pressure directly over the wound.
If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
Elevate the bleeding extremities
7. Cover the patient with a blanket and keep them calm
8. Locate any amputated part and place in clean plastic bag, not ice. If teeth, place them in milk
9. Gather any patient medications for the paramedics
10. Lock away any pets
11. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

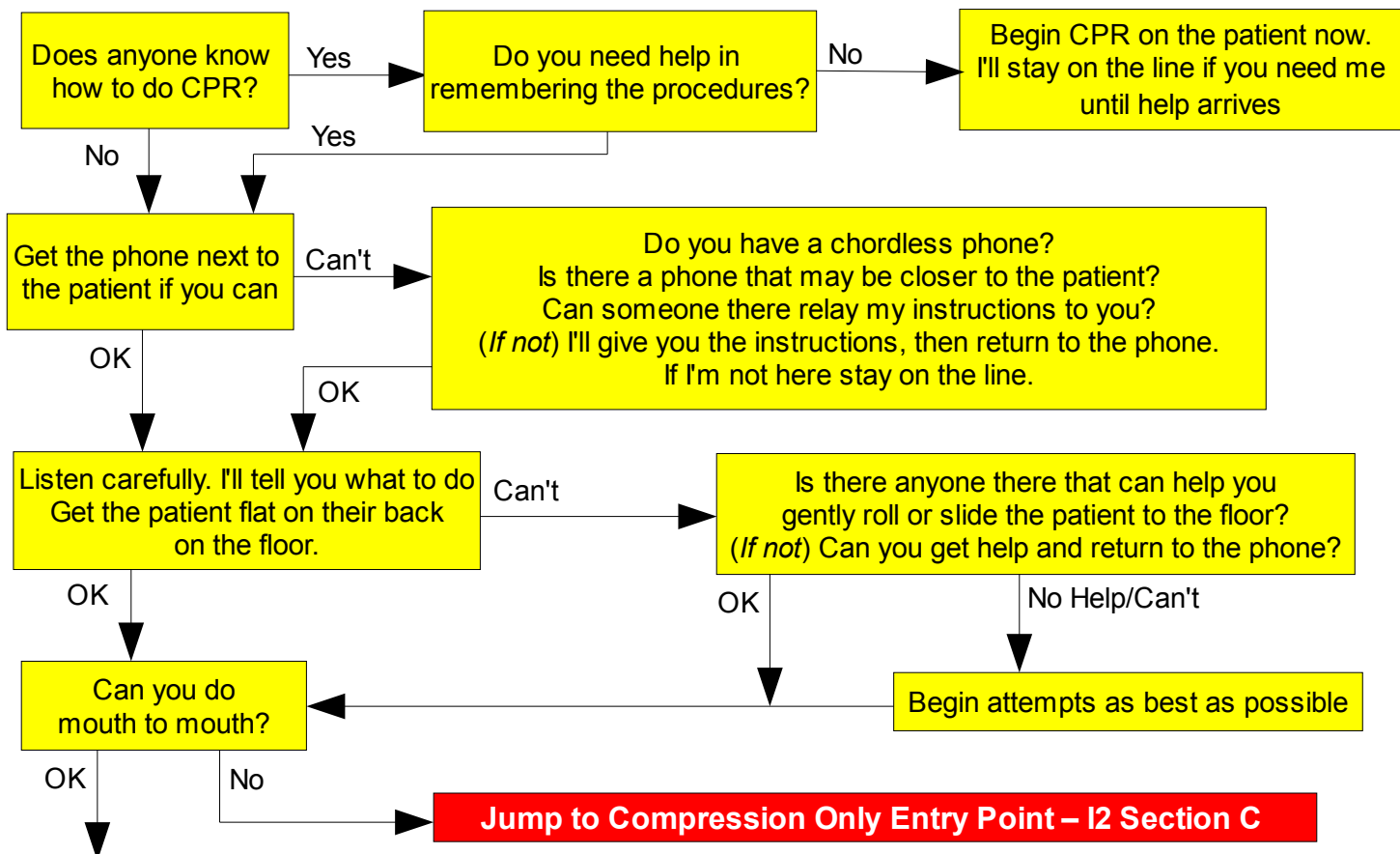
Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

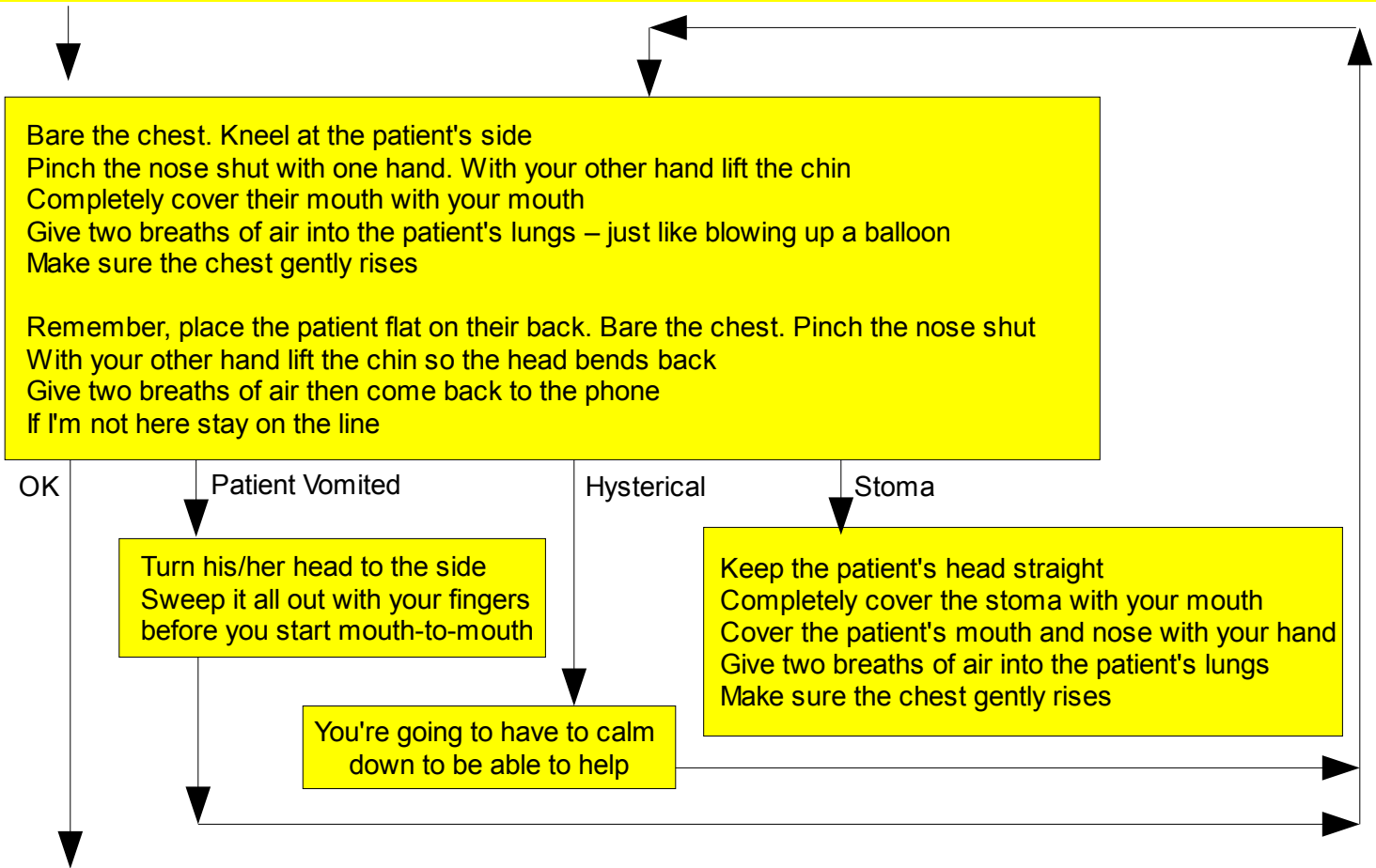
I1: Automated External Defibrillator Instructions

<p>1.</p> <p>6. Make sure the pad cords are attached to the machine</p> <p>11. Follow the machine voice prompt</p>	<p>2. Remove everything from the patient's chest</p> <p>7. Follow the machine voice prompt next</p> <p>12. If the machine says "No Shock Indicated" continue doing CPR</p>	<p>3. Place defibrillator next to the patient's left side</p> <p>8. Wait for the machine to analyze (push analyze button if present)</p> <p>13. If the machine says to shock the patient, make sure no one is touching the patient, then press the shock button</p>	<p>4. Open cover & turn on defibrillator</p> <p>9. Do Not Touch The Patient</p> <p>14. Continue following the voice prompts until help arrives</p>	<p>5. Open the pad package and place pads on the patient as pictured on the pads</p> <p>10. If the machine says to shock the patient, make sure no one is touching the patient, then press the shock button</p>
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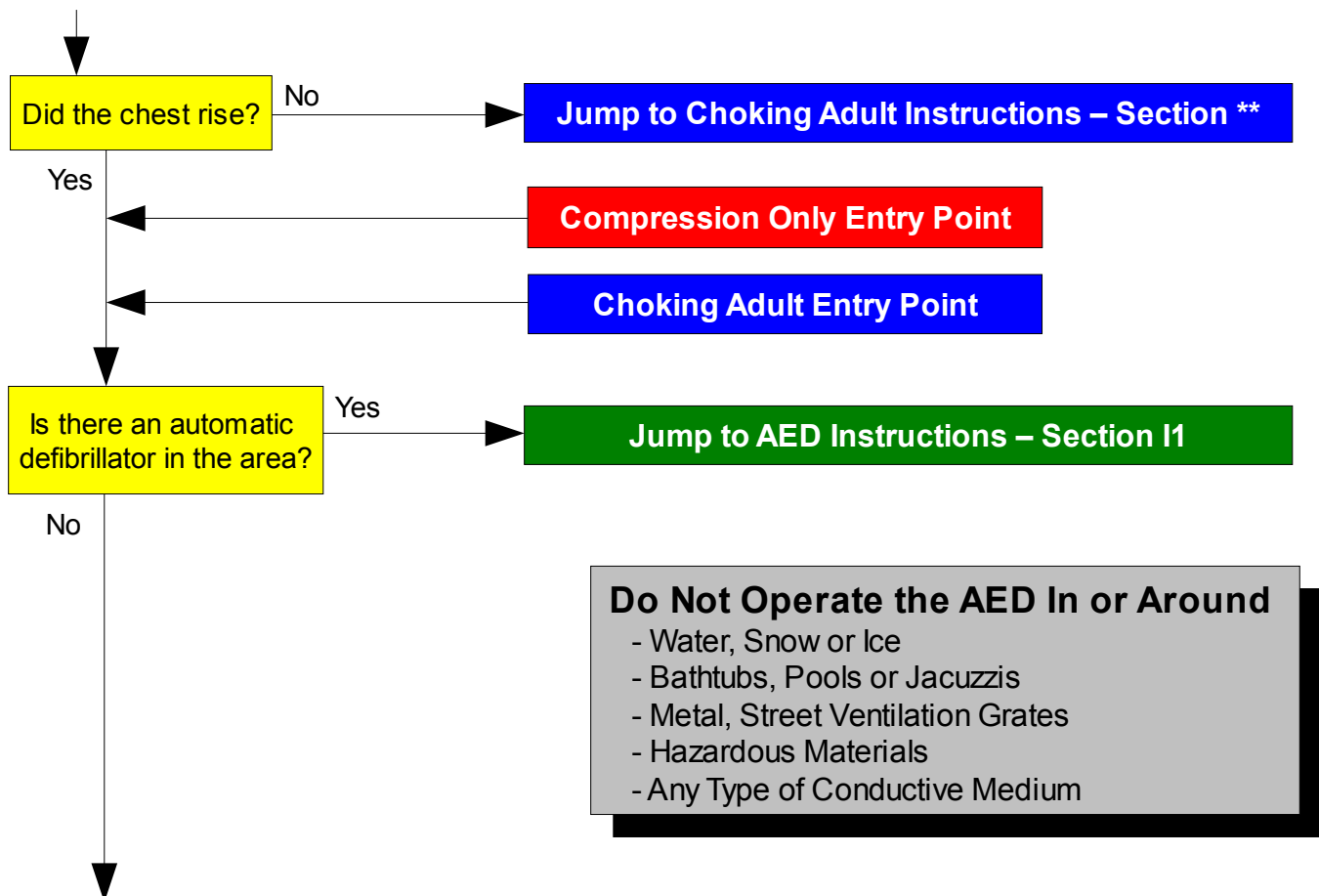
I2: Adult CPR Instructions – Section A



I2: Adult CPR Instructions – Section B



I2: Adult CPR Instructions – Section C



I2: Adult CPR Instructions – Section D

Put the heel of your hand on the center of their chest, right between the the nipples
Put your other hand on top of that hand
Push down on the heels of your hands, 1½ to 2-inches
Do it 30 times, push hard and fast

If not performing mouth to mouth breathing, advise the caller to pump the chest 200 times then come back to the phone

(If willing to perform mouth to mouth breathing)

Pinch the nose shut and lift the chin so the head bends back
Give two more breaths then pump the chest 30 times
Keep doing it; pump the chest 30 times, then give two breaths
Keep doing it until help arrives and can take over
I'll stay on the line with you until they get there

OK

Continue to assist until help arrives

Hysterical

You're going to have to calm down to be able to help

M1: Abdominal Pain

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Does the victim have **chest pain** also? (*Consider Jump to the C6 - Chest Pain Card*)
4. Is the pain due to an injury? (*Consider jump to T10 – Traumatic Injury Card*)
5. Has the patient vomited? (*If yes*) What does the vomit look like?
6. Are the victim's bowel movements different than normal? (*If yes*) How would you describe them?
7. Is the pain above or below the belly button?
8. (*If female age 12-50*) Could the victim be pregnant?
9. Has the victim felt dizzy?
10. Has there been any vaginal bleeding?
11. How does the patient act when they sit up?
12. Does the patient have any other medical or surgical history?
13. Does the patient have a Medic Alert tag? (*If yes*) What does it say?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Vomiting blood
5. Black tarry stool
6. Lower abdominal pain in female 12-50 yoa
7. History of Cardiac problems
8. Fainting or near fainting > 50yoa
9. Fainting or near fainting when sitting

1. Pain with vomiting
2. Flank pain (*kidney stone*)
3. Non-traumatic abdominal pain
4. Unspecified pain

M1: Abdominal Pain – Pre-Arrival Instructions

1. Do not give the victim anything to eat or drink
2. Gather any patient medications for the paramedics
3. Lock away any pets
4. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M2: Allergies/Stings

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Is the victim having difficulty **swallowing**?
4. Does the victim have a **rash** or **hives**?
5. Is the victim complaining of **itching**?
6. Does the victim have a history of a reaction to anything?
(If yes) Describe the reaction the patient had before
How long ago was the patient exposed?
7. Are the symptoms getting **worse**?
8. Does the patient have a Medic Alert tag? (If yes) What does it say?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Difficulty breathing
5. Difficulty swallowing
6. Swelling in throat or on face
7. Fainting
8. History of severe reaction
9. Itching or hives in multiple areas

1. Concern about reaction but no history
2. Reaction present for a long time (> 1 hour) with no difficulty breathing
3. Itching or hives confined to one area with no difficulty breathing

M2: Allergies/Stings – Pre-Arrival Instructions

1. Do you have an epi-pen or reaction kit?
(If yes and severe reaction) Have you used it as the physician has directed?
2. Place patient in the most comfortable position
3. Keep neck straight, remove any pillows
4. Watch the victim for signs of difficulty breathing (slow breathing) or cardiac arrest
5. Gather any patient medications for the paramedics
6. Lock away any pets
7. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M3: Back Pain

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Is the **pain** due to an **injury** to the patient?
4. Has the victim felt **dizzy** or have they **fainted**?
5. Does the victim have any other medical or surgical history?
6. Does the patient have a Medic Alert tag? (If yes) What does it say?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Non-traumatic back pain with prior cardiac history
5. Back pain with fainting or near fainting in patients >50 yoa

1. Flank pain (Kidney stone)
2. Non-traumatic back pain
3. Unspecified back pain
4. Chronic back pain

M3: Back Pain – Pre-Arrival Instructions

1. If the pain is due to an injury, advise patient not to move unless hazards are present
2. Place patient in the most comfortable position
3. Gather any patient medications for the paramedics
4. Lock away any pets
5. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M4: Breathing Problems

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. How **long** has this been going on?
4. Is patient having **chest pain** (*If yes - Jump to M5: Chest Pain Card*)
5. Is the victim able to speak in full sentences?
6. Does the patient have to **sit up** to breath?
7. Is the patient drooling or having a hard time **swallowing**?
8. Is the patient experiencing any other problems right now?
9. Does the patient have a history of **asthma**?
10. (*If sudden onset*) Has the patient been hospitalized recently for a **broken leg** or **childbirth**?
11. (*If female*) Does the victim take **birth control** pills?
12. Is the patient on **oxygen**?
13. Does the victim have any other medical or surgical history?
14. Does the patient have a Medic Alert tag? (*If yes*) What does it say?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Decreased level of consciousness
3. Not breathing normally with any of the following
 - Chest pain
 - Unable to speak in full sentences
 - History of asthma or other resp. problems
 - Inhaled substance
 - Recent childbirth/broken leg (2-3 months)
 - Drooling
4. Tingling or numbness in extremities/around mouth
Age >35

1. Cold symptoms
2. Stuffed nose
3. Oxygen bottle empty
4. Patient assist
5. Long term, no change

M4: Breathing Problems – Pre-Arrival Instructions

1. Place patient in the most comfortable position, probably sitting up
2. Advise patient not to exert themselves
3. Gather any patient medications for the paramedics
4. Lock away any pets
5. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M5: Chest Pain/Heart Problems

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Is the patient **sweating** profusely?
4. Is the patient **nauseated** or **vomiting**?
5. Is the patient weak, dizzy or faint?
6. Where is the pain located?
7. Does the patient experience a rapid heart rate with the **chest pain**?
8. Does the patient feel pain anywhere else? *(If yes)* Where?
9. How long has the pain been present?
10. Does the patient have a history of a heart attack? Cardiac Problems?
(If yes) Does the patient take nitroglycerin? *(If yes)* Have they taken it? Did it help?
11. Has the patient taken any drugs in the past 24 hours

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Decreased level of consciousness
3. Not breathing normally
4. Chest pain with any of the following
 - Not breathing normally
 - Nausea
 - History of cardiac problems
 - Diaphoretic
 - Rapid heart rate
 - Syncope
 - Cocaine/crack use

1. Patients <35 yoa without critical symptoms

M5: Chest Pain/Heart Problems – Pre-Arrival Instructions

1. Place patient in the most comfortable position, probably sitting up
2. Advise patient not to exert themselves
3. Loosen any tight clothing
4. *(If patient is prescribed nitroglycerin)* Does the patient have their nitroglycerin?
(If yes) Has the patient taken one?
(If not taken) Make sure the patient is sitting down, then take the nitro as prescribed by your doctor
5. Gather any patient medications for the paramedics
6. Lock away any pets
7. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M6: Diabetic Problems

KEY QUESTIONS

1. Is the victim alert?
2. Is the victim breathing normally?
3. Does the patient know who they are? Do they know where they are?
4. Is the patient acting in their normal manner?
(If no) What is different?
5. Does the patient feel pain anywhere?
(If yes) Where?
6. Is the victim dizzy, weak or feeling faint?
7. Has the victim had a seizure?
8. Is the patient sweating profusely?
9. Is the patient on insulin?
(If Yes) When did they take it?
10. When did the patient last eat?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Decreased level of consciousness
3. Not breathing normally
4. Unusual behavior/acting strange
5. Profuse sweating
6. Seizure

1. Alert and awake
2. Not feeling well

M6: Diabetic Problems – Pre-Arrival Instructions

1. Do not give the patient anything to eat or drink unless they can take it by themselves
2. If the patient can eat and drink on their own, give them juice with about 2 to 3 teaspoons of sugar in it
3. Place patient in the most comfortable position
4. Gather any patient medications for the paramedics
5. Lock away any pets
6. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M7: Headache

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Does the patient know who they are? Do they know where they are?
4. Is the patient acting in their normal manner?
(If no) What is **different**?
5. Is this headache different from headaches the victim has had in the past?
6. Did this headache come on **suddenly** or **gradually**?
7. What was the victim doing when the headache started?
8. Does the patient feel pain anywhere else?
(If yes) Where?
9. Does the patient have a history of headaches?
10. Is the patient wearing a Medic Alert tag?
(If yes) What does it say?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Headache with any of the following critical symptoms
 - Decreased level of consciousness
 - Unusual behavior/acting strange
 - Worst headache ever
 - Sudden onset
 - Visual disturbance with no history of migraines

1. Alert and awake
2. Headache with no critical symptoms

M7: Headache – Pre-Arrival Instructions

1. Do not give the patient anything to eat or drink
2. Place patient in the most comfortable position
3. Gather any patient medications for the paramedics
4. Lock away any pets
5. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M8: Health Care Provider Requests EMS

KEY QUESTIONS

1. What do you need?
(If Paramedics/EMTs/Ambulance needed) What's wrong with the person? Jump to appropriate card
(If Transportation Only needed) Where is the patient?
2. Does the patient have an IV, Medication or other medical device in use?

CODE RED

CODE YELLOW

DISPATCH

1. Critical symptoms
2. Off-duty medic request
3. Medical device in use

1. No critical symptoms or medical devices in use

M8: Health Care Provider Requests EMS – Pre-Arrival Instructions

1. *(If a Medical Facility)* Prepare the patient's medical records for the paramedics
2. *(If a Non-medical Facility)* Place patient in the most comfortable position
 - Gather any patient medications for the paramedics
 - Lock away any pets
3. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

3. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
4. If unconscious and not breathing, go to the **age appropriate** CPR card

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M9: Home Medical Equipment

KEY QUESTIONS

1. What piece of equipment is causing concern?
 - If ventilator failure, jump to C1: Cardiac Arrest*
 - If apnea monitor alarm jump to M4: Breathing Problems*
 - If implanted defibrillator firing jump to M5: Chest Pain/Heart Problems card*

CODE RED

CODE YELLOW

DISPATCH

1. Critical symptoms
2. Ventilator failure
3. Apnea monitor alarm
4. Implanted defibrillator firing

1. No critical symptoms
2. Problems with, or out of, home oxygen

M9: Home Medical Equipment – Pre-Arrival Instructions

1. *(If appropriate)* Prepare the medical device for possible transport with the paramedics
2. Place patient in the most comfortable position
3. Gather any patient medications for the paramedics
4. Lock away any pets
5. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

5. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
6. If unconscious and not breathing, go to the **age appropriate** CPR card

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M10: Obvious Death

KEY QUESTIONS

1. How do you know the person has died?
If caller is unsure, jump to C1: Cardiac Arrest card
If possibility of hypothermia, jump to T7: Heat/Cold Exposure card

CODE RED

CODE YELLOW

DISPATCH

1. Body is cold and stiff (*no hypothermia present*)
2. Decomposition
3. Injuries obviously incompatible with life
4. Non-recent expected death
5. Hospice/DNR

M10: Obvious Death – Pre-Arrival Instructions

1. *(If appropriate)* Gather any DNR documents for the paramedics
2. Gather any patient medications for the paramedics
3. Lock away any pets
4. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, not breathing, and not an obvious death go to the **age appropriate** CPR card
1. Is Law Enforcement needed?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M11: Overdose/Poisonings/Ingestions

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Is the patient acting in their normal manner?
(If no) What is different? Are they **violent**? Do they have access to a **weapon**?
4. Do you know what the victim took?
(If Prescription Med) What is the name of the medicine? How much did they take?
(If Not Prescription Med) What type of substance did they take?
(If Cocaine or Crack) Is the person complaining of any pain? *If having chestpain, jump to M5: Chest Pain*
Did they take it with alcohol?
5. Is the patient having difficulty swallowing?
6. Has the patient vomited?
(If yes) Can you describe what it looks like?

CODE RED

CODE YELLOW

DISPATCH

- | | |
|--|--|
| <ol style="list-style-type: none"> 1. OD with any of the following critical symptoms <ul style="list-style-type: none"> ● Unconscious ● Not breathing normally ● Decreased level of consciousness ● Unusual behavior/acting strange ● Cocaine/Crack use with chest pain ● Difficulty swallowing ● Ingestion of household cleaners, antifreeze, solvents, methanol, cyanide or insecticides ● Combined alcohol and drug overdose ● Alcohol where patient cannot be aroused | <ol style="list-style-type: none"> 1. Drug use with no critical symptoms 2. 3rd party caller, caller not with patient 3. Reported overdose, but patient denies taking anything 4. Alcohol intoxication where patient can be aroused |
|--|--|

M11: Overdose/Poisonings/Ingestions – Pre-Arrival Instructions

1. Do not give the patient anything to eat or drink unless advised by Poison Control
2. *(If safe to do so)* Keep patient in the area/house
3. Do not give the patient coffee or place the patient in the shower
4. *(If at the scene)* Get the container of the substance the person took
5. Gather any patient medications for the paramedics
6. Lock away any pets
7. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

2. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
3. If unconscious and not breathing, go to the **age appropriate** CPR card
4. Contact the local Poison Control Center
5. Is Law Enforcement needed?

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M12: Patient Assistance

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Does the patient have any other complaints? *If yes, jump to the appropriate card*

CODE RED

CODE YELLOW

DISPATCH

1. No critical symptoms

M12: Patient Assistance – Pre-Arrival Instructions

1. Place the patient in a comfortable position
1. *(If possible)* Keep the patient calm
2. Gather any patient medications for the paramedics
3. Lock away any pets
4. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious, not breathing, and not an obvious death go to the **age appropriate** CPR card
3. Is Law Enforcement needed?
4. Is Fire and/or Rescue needed?

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M13: Psychiatric/Behavioral Problems

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Is the patient acting in their normal manner?
(If no) What is different?
Are they **violent**? Do they have a weapon or access to a weapon?
4. Has the patient harmed themselves? *If yes, consider Jump to T10: Traumatic Injury*
(If no) Do you think the patient might try to harm themselves?
5. Where is the patient now?
(If present) Can the patient talk to you? Can he answer your questions?
6. Has the patient taken any drugs or alcohol? *If yes, consider Jump to M8: OD/Poisoning*
7. Is the patient a diabetic? *If yes, consider Jump to M6: Diabetic Problem*
8. Is the victim **injured**?
9. Is the victim **bleeding**?
(If yes) Can it be controlled with pressure?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness

1. Lacerated wrist with controlled bleeding
2. Unusual, non-violent behavior with a psychiatric history
3. Alcohol intoxication where patient can be aroused
4. Threats against self or others
5. Patient out of psychiatric medications
6. Police request for stand-by

M13: Psychiatric/Behavioral Problems – Pre-Arrival Instructions

2. *(If safe to do so)* Keep patient in the area/house
If you feel you are in danger, leave the scene
3. *(If possible)* Keep the patient calm
4. Gather any patient medications for the paramedics
5. Lock away any pets
6. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Consider contacting the local Crisis Center
4. Is Law Enforcement needed?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M14: Seizures/Convulsions

- | | |
|----------------------|---|
| KEY QUESTIONS | <ol style="list-style-type: none"> 1. Is the victim alert? 2. Is the victim breathing normally? 3. Is the patient still seizing?
<i>(If yes)</i> Describe what the patient is doing? 4. How long has the patient been seizing? 5. Has the patient had a seizure before? 6. Is the patient a diabetic? <i>If yes, consider Jump to M6: Diabetic Problems</i> 7. Does the patient have a Medic Alert bracelet on?
<i>(If yes)</i> What does it say? 8. <i>(If child)</i> Has the child been sick?
Does the child have a fever or feel hot? 9. <i>(If female between 13-50 yoa)</i> Is the patient pregnant? 10. Does the patient have a history of heart problems? 11. Has the patient had a recent head injury? 12. Has the patient taken anything, including any type of drugs? 13. <i>(If still seizing)</i> Has the seizure stopped? |
|----------------------|---|

CODE RED

CODE YELLOW

- | | | |
|-----------------|--|--|
| DISPATCH | <ol style="list-style-type: none"> 1. Unconscious 2. Not breathing normally 3. Decreased level of consciousness 4. Still seizing/multiple seizures 5. First time seizure or unknown history 6. Diabetic 7. Pregnant 8. Secondary to drug overdose or head injury 9. Any seizure that is different than normal | <ol style="list-style-type: none"> 1. Single seizure with a history of seizures |
|-----------------|--|--|

M14: Seizures/Convulsions – Pre-Arrival Instructions

1. Clear the area around the patient so they don't hurt themselves
2. Do Not try to restrain the patient
3. Do Not put anything in the patient's mouth
4. When the seizure stops, check to see if the patient is breathing
Place patient on their side
5. *(If child and feverish)* Remove clothing to help cool patient
6. Gather any patient medications for the paramedics
7. Lock away any pets
8. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Any seizure with an unknown medical history is assumed to be a first time seizure

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M15: Sick Person

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Is the patient complaining of any **pain**? *If chest pain, jump to M5: Chest Pain*
4. Is the victim **bleeding**?
(If yes) From where? How much? How long? Can it be controlled with pressure?
5. Has the patient **vomited**?
(If yes) Can you describe what it looks like?
6. Is the patient acting in their normal manner?
(If no) What is different?
(If no) Are they **violent**? Do they have a weapon or access to a **weapon**?
7. Is the patient a diabetic? *If yes, consider jump to M6: Diabetic Problems*
8. Is the patient wearing a Medic Alert tag?
(If yes) What does it say?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness

1. Generalized weakness
2. Medical alert from alarm company
3. Flu symptoms
4. High temperature with no critical symptoms
5. Patient assist
6. Police stand-by

M15: Sick Person – Pre-Arrival Instructions

1. Gather any patient medications for the paramedics
2. Lock away any pets
3. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. If a specific chief complaint is identified, jump to the appropriate card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M16: Stroke/CVA

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Is the patient acting unusual?
(If yes) What is different? (Speech, numbness or movement problems)
4. *(If not obvious)* Does the patient's speech sound normal?
5. *(If not obvious)* Does the patient have weakness or paralysis on one side of the body?
6. *(If not obvious)* Does the patient have a facial droop?
7. Is the patient complaining of any pain? *If chest pain, jump to M5: Chest Pain*
8. Does the patient have a headache?
9. Has the patient ever had a stroke before?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. New onset of one sided weakness/paralysis, facial droop or slurred speech

1. Past history of stroke (CVA) with no new changes

M16: Stroke/CVA – Pre-Arrival Instructions

1. *(If difficulty breathing)* Keep neck straight and remove any pillows
2. Do not give the patient anything to eat or drink
3. Do not allow the patient to move around
4. Gather any patient medications for the paramedics
5. Lock away any pets
6. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

M17: Unknown/Man Down

KEY QUESTIONS

1. Is the victim **alert**?
2. Is the victim breathing **normally**?
3. Do you know why the patient is down? *(Jump to the appropriate card if possible)*
4. Is the patient able to **talk**?
5. Is the patient able to **move**?
6. Where exactly is the patient?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Multiple people down
(Consider HazMat/MCI)

1. Patient is talking, moving, sitting or standing
2. Unknown (3rd party caller) without indication of unconsciousness

M17: Unknown/Man Down – Pre-Arrival Instructions

1. *(If safe to do so)* Go to the patient and see if the patient is awake, breathing normally, or moving at all
Return to the phone and let me know
2. Watch for the emergency unit and direct them to the patient
3. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

3. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
4. If unconscious and not breathing, go to the **age appropriate** CPR card
5. Consider law enforcement notification

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T1: Animal Bites

KEY QUESTIONS

1. **Where** is the **animal** now?
2. What **type** of **animal** bit the patient?
3. Is the patient **short of breath**?
Does it hurt to breathe?
4. What part of the body was bitten?
5. Is the patient **bleeding**?
(If yes) From where?
How much?
How long?
Can it be controlled with pressure?
6. How long ago did they receive the bite?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Uncontrolled bleeding after attempts to control
4. Serious neck or face bites from animal attack
5. Bite from a known poisonous animal

1. Bleeding is controlled
2. Swelling at the bite site
3. Bite below the neck, non-poisonous

T1: Animal Bites – Pre-Arrival Instructions

1. Contain the animal if possible
2. Keep patient calm and still
3. If bleeding, use a clean cloth and apply pressure directly over the wound.
If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
Elevate the bleeding extremities
4. Use care not to obstruct the airway or breathing
5. For snake bites
Do Not Elevate the Extremity
Do Not Use Ice
Do Not Attempt to Remove the Venom
6. Lock away any pets
7. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. Has law enforcement been notified?
3. Has animal control been notified?

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T2: Assault/Domestic Violence/Sexual Assault

KEY QUESTIONS

1. Is the **assailant nearby**?
2. Are you safe?
3. Was it a **physical assault** or a **sexual assault**?
4. **How** was the victim **assaulted**? (*If stabbing or gunshot, jump to the T9: Stabbing/GSW card*)
5. **Where** is the patient **injured**?
6. Is the patient **bleeding**?
(*If yes*) From where? How much? How long? Can it be controlled with pressure?
7. Can the patient **answer your questions**?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Crushing injury (except to hands or feet)
5. Puncture injury (head, neck, torso, thigh)
6. Multiple extremity fractures
7. Femur (thigh) fracture
8. Uncontrolled bleeding

1. Penetrating/crushing injury to hands or feet
2. Isolated extremity fracture
3. Minor injuries
4. Unknown injuries
5. Concerned caller without apparent injuries to victim
6. Police request stand-by/check for injuries

T2: Assault/Domestic Violence/Sexual Assault – Pre-Arrival Instructions

1. Remain in a safe place, away from the assailant
2. *(If present)* Do not touch or remove any impaled objects
3. Have patient lie down and keep calm
4. Do not touch or move any weapons
5. If bleeding, use a clean cloth and apply pressure directly over the wound.
If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
6. Advise patient not to change clothing, bathe or shower
7. Keep patient warm
8. Keep the patient warm
9. Gather any patient medications for the paramedics
10. Do not give the patient anything to eat or drink
11. Lock away any pets
12. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Has law enforcement been notified?

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T3: Bleeding/Laceration

KEY QUESTIONS

1. Is the **patient alert**?
2. Is the patient breathing normally?
3. Where is the patient **bleeding from**?
(If vaginal) Is the patient pregnant?
4. Is the blood squirting out?
5. Is the patient a hemophiliac *(a bleeder)*?
6. *(If injured)* **Where** is the patient **injured**? From where? How much? How long?
7. Can the patient **answer** your **questions**?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Any arterial bleeding
4. Hemophilia
5. Rectal bleeding with significant blood loss
6. Vomiting blood or coffee ground material
7. Bleeding from mouth with difficulty breathing
8. Bleeding from the neck, groin or armpit with significant blood loss
9. Vaginal bleeding if over 20 weeks pregnant
10. Vaginal bleeding associated with lower abdominal pain or fainting

1. Minor bleeding from any other areas

T3: Bleeding/Laceration – Pre-Arrival Instructions

1. If bleeding, use a clean cloth and apply pressure directly over the wound.
2. If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
3. Elevate the bleeding extremities
4. If nosebleed, tell the patient to apply direct pressure by pinching the nose lightly between the index finger and thumb, sit forward and hold until help arrives. Attempt to spit out blood, swallowing may make patient nauseous.
5. Advise patient not to move
6. Cover patient with a blanket and try to keep them calm
7. Gather any patient medications for the paramedics
8. Do not give the patient anything to eat or drink
9. Lock away any pets
10. Locate any amputated part and place in clean plastic bag, not ice. If teeth, place them in milk
11. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T4: Burns

KEY QUESTIONS

1. How was the patient burned?
2. *(If Thermal)* Is anything on the patient still burning? *(If yes)* Stop the burning *(Go to ** Card)*
3. *(If Electrical)* Is the patient still in contact with the electric source?
How was the patient electrocuted?
(If household) Was it the stove, clothes dryer or other 220 volt source?
4. *(If Chemical)* What chemical caused the burn?
5. Is the patient short of breath or does it hurt to breath?
6. Is the patient having difficulty swallowing?
7. Where is the patient burned?
(If head or face) Are they coughing? Are their nose hairs burned? Any burns around the mouth and nose?
8. Are there any other injuries?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Burns to the airway, nose or mouth
5. Hoarseness, difficulty talking or swallowing
6. Burns over 20% of body surface
7. Electrical burns from 220V or greater
8. 2nd or 3rd degree burns to hands, feet or groin

1. Burn less than 20% body surface area
2. Spilled hot liquids
3. Chemical burns to eyes
4. Small burn from match or cigarette
5. Household electrical shock
6. Battery explosion
7. Freezer burns

T4: Burns – Pre-Arrival Instructions

1. (*Electrical burn*) If safe to do so, turn off power
2. (*Chemical burn*) Have patient remove contaminated clothing if possible
3. (*Chemical burn*) If available, get info on chemical (*MSDS Sheet*)
4. (*Chemical Powder Burn*) Brush off chemical, do not use water
5. (*Chemical Eye Burn*) Flush eyes with water. Remove contact lenses
6. Place burn area in cool water (*not ice*) if possible
7. Gather any patient medications for the paramedics
8. Lock away any pets
9. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Has the fire department been notified?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T5: Eye Injury

KEY QUESTIONS

1. Is the patient alert?
2. Is the patient breathing normally?
3. What caused the injury?
Chemicals – *Jump to Card T4: Burns*
4. Is the eyeball cut open or leaking fluid?
5. Are there any other injuries?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness

1. Any eye injury

T5: Eye Injury – Pre-Arrival Instructions

1. Do not remove any penetrating objects
2. If eyeball is cut or injured, do not touch, irrigate or bandage
3. If a chemical injury, flush immediately with water. Continue to help arrives. Remove contact lenses
4. Advise patient not to move
5. Have patient sit down
6. Cover the patient with a blanket and keep them calm
7. Do not give the patient anything to eat or drink
8. Gather any patient medications for the paramedics
9. Lock away any pets
- 10. If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T6: Falls

KEY QUESTIONS

1. Is the patient breathing normally?
2. Is the patient alert?
3. How far did the patient fall?
4. What kind of surface did the patient land on?
5. Are there any obvious injuries? (*What are they?*)
6. Did the patient complain of any pain or illness just prior to the fall?
7. Is the patient able to move their fingers and toes? (*Do not have them move any other body part*)
8. Is the patient bleeding?
(*If yes*) From where? How much? How long? Can it be controlled with pressure?
9. Are there any other injuries?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Falls greater than 10 feet
5. Falls associated with or preceded by pain, discomfort in chest, dizziness, headache or diabetes.
6. Patient is paralyzed
7. Uncontrolled bleeding
8. Multiple extremity fractures
9. Femur (thigh) fracture

1. Falls less than 10 feet
2. Neck or back pain without critical symptoms
3. Bleeding that has been controlled
4. Cuts, bumps or bruises
5. Patient assistance
6. Involved in accident, no complaints
7. Isolated extremity fracture

T6: Falls – Pre-Arrival Instructions

1. *(If appropriate)* Turn off any machinery
2. *(If no life threatening hazard is present)* Do not move the patient
3. Advise patient not to move
4. If bleeding, use a clean cloth and apply pressure directly over the wound.
 If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
 Elevate the bleeding extremities
5. Cover the patient with a blanket and keep them calm
6. Do not give the patient anything to eat or drink
7. Gather any patient medications for the paramedics
8. Lock away any pets
9. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Is rescue needed?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T7: Heat/Cold Exposure

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S | <ol style="list-style-type: none"> 1. Is the patient alert? 2. Is the patient breathing normally? 3. <i>(If not obvious)</i> What was the source of the heat/cold? 4. Does the patient have any complaints? 5. What does the patient's skin feel like? 6. <i>(If Cold Exposure)</i> Is the patient shivering? 7. <i>(If heat exposure)</i> Is the patient sweating profusely? 8. Is the patient dizzy, weak or feeling faint? 9. Are there any obvious injuries? <i>(What are they?)</i> |
|--|---|

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H | <ol style="list-style-type: none"> 1. Unconscious 2. Not breathing normally 3. Decreased level of consciousness 4. Confused or disoriented 5. Fainting/syncope 6. Cold water immersion | <ol style="list-style-type: none"> 1. Patient with uncontrollable shivering 2. Heat exhaustion with no critical symptoms 3. Unknown symptoms |
|--------------------------------------|--|---|

T7: Heat/Cold Exposure – Pre-Arrival Instructions

1. Remove the victim from the hot/cold environment
(If cold and dry) Cover the victim with a blanket to warm
(If cold and wet) Remove the wet clothing and cover the victim with a blanket to warm
(If overheated) Loosen clothing to assist with cooling
2. *(If decreased level of consciousness)* Do not give the patient anything to eat or drink
3. *(If cold)* Do not rub frostbitten extremities
4. Gather any patient medications for the paramedics
5. Lock away any pets
6. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T8: Stabbing/Gunshot Victim

KEY QUESTIONS

1. Is the **assailant nearby**?
2. Are you safe?
3. Is there a weapon present?
4. Is the victim alert?
5. Is the victim breathing normally?
6. **Where** is the victim **shot/stabbed**?
7. Is the victim **bleeding**?
(If yes) From where? How much? How long? Can it be controlled with pressure?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Uncontrolled bleeding
5. Injury above the knee or elbow
6. Injury to the head, neck, torso or thigh
7. Multiple casualty incident

1. Wounds below the knee or elbow

T8: Stabbing/Gunshot Victim – Pre-Arrival Instructions

1. Tell caller to remain in a safe location (*beware of the assailant*)
2. Do not pull out any penetrating weapons
3. If bleeding, use a clean cloth and apply pressure directly over the wound.
 If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
 Elevate the bleeding extremities
4. Advise the victim not to move
5. Cover the victim with a blanket and keep them calm
6. Do not disturb the scene or move any weapons
7. Gather any patient medications for the paramedics
8. Lock away any pets
9. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

Dispatcher Short Report

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Advise responders when scene is secure

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T9: Traumatic Injury

KEY QUESTIONS

1. Is the victim alert?
2. Is the victim breathing normally?
3. Where is the victim injured?
4. How was the victim injured (*Describe what happened*)?
5. Is the victim **bleeding**?
 (*If yes*) From where? How much? How long? Can it be controlled with pressure?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Penetrating/crushing injury to head, neck, torso or thigh
5. Uncontrolled bleeding
6. Leg Injury above the knee
7. Multiple extremity fracture

1. Penetrating/crushing injury to hands or feet
2. Unknown injuries
3. Minor injuries
4. Concerned caller without apparent injury to victim
5. Isolated extremity fracture
6. Police request to stand-by/check for injuries

T9: Traumatic Injury – Pre-Arrival Instructions

1. Do not pull out any penetrating objects
2. If bleeding, use a clean cloth and apply pressure directly over the wound.
If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
Elevate the bleeding extremities
3. Advise the victim not to move
4. Cover the victim with a blanket and keep them calm
5. Do not disturb the scene or move any weapons
6. Gather any patient medications for the paramedics
7. Lock away any pets
8. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units

T10: Motor Vehicle Collisions

KEY QUESTIONS

1. Are there any hazards present (*Fire, Water, HazMat, Wires Down*)?
2. Is the victim alert?
3. Is the victim breathing normally?
4. Is anyone trapped in the vehicle?
5. Was anyone thrown from the vehicle?
6. What injuries does the victim have
7. Is the victim **bleeding**?
(*If yes*) From where? How much? How long? Can it be controlled with pressure?

CODE RED

CODE YELLOW

DISPATCH

1. Unconscious
2. Not breathing normally
3. Decreased level of consciousness
4. Chest pain prior to the collision
5. Critical criteria – injuries to the
 - Head
 - Neck
 - Torso
 - Thigh
6. Multiple causality incident

1. Accident with injury, no critical criteria
2. Police request to stand-by/check for injuries

T10: Motor Vehicle Collisions – Pre-Arrival Instructions

1. *(If no life threatening hazards are present)* Do not move the victim.
2. Keep patient calm and still
3. If bleeding, use a clean cloth and apply pressure directly over the wound.
If the cloth becomes soaked, do not remove it, and add an additional cloth to what is already there
Elevate the bleeding extremities
4. **If the patient's condition changes, call me back immediately**

Call Taker Prompts

1. If unconscious, go to the **C6: Unconscious/Breathing Normally/Airway Control** card
2. If unconscious and not breathing, go to the **age appropriate** CPR card
3. Is Rescue Needed?
4. Is the Fire Department needed?
5. Has law enforcement been notified?

Dispatcher Short Report

1. Age
2. Sex
3. Specific location
4. Chief complaint
5. Pertinent related symptoms
6. Medical/Surgical history, if any
7. Other Agencies responding
8. Any dangers to responding units