

# State of New Jersey

## Emergency Medical Dispatch Guidecards



October 2014

### ALERTS

Enterovirus (EV-D68) 9/9/2014

Ebola Interim Guidance for Emergency Medical Services Systems and 9-1-1

Public Safety Answering Points

Approved by:

State of New Jersey Department of Health, Office of Emergency Medical Services

<http://www.state.nj.us/health/ems>

Adopted by:

State of New Jersey, Office of Information Technology, Office of Emergency Telecommunications Services

<http://www.nj.gov/911>

### ALERTS

State of New Jersey EMD Guidecards Version 10/14

#### Enterovirus (EV-D68)

**Signs and symptoms similar to cold or flu. In children age 6 weeks to 15 years with existing respiratory illness may quickly become respiratory distress, change in skin color (hypoxemia) or wheezing..**

**Current cases have been reported in New Jersey.**

#### Ebola

**Patient may present signs and symptoms of flu in early stage such as high fever, severe headache, muscle pain, vomiting, diarrhea, or abdominal pain.**

**Additional sign may be unexplained bleeding.**

**Look for recent travel ( up to 21 days) in effected areas.**

**Current outbreaks reported in West Africa**

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### SIMULTANEOUS ALS/BLS

### BLS.DISPATCH

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NO CHANGE


NO CHANGE- Instruct caller to watch for **any changes in patient's breathing** and to call back if they occur.

# ASSAULT / DOMESTIC / SEXUAL Pre-Arrival Instructions

<p>Remain in a safe place away from the assailant</p> <p>Obtain description of the assailant</p> <p>Have patient lie down and keep calm</p> <p>Do not touch weapons</p> <p>Advise patient not to change clothing, bathe or shower</p> <p>Keep patient warm</p>	<p>Gather patient's medications if possible</p> <p>Do not allow the patient any food or drink</p> <p>If the patient's condition changes call me back</p>
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## Prompts

## Short Report

<p>Has Law Enforcement been notified?</p> <p>Relay details of incident and description of assailant(s)</p> <p>Sexual Assault- non-injured follows county SART Protocols</p> <p>Domestic Violence- non-injured follows local police protocols'</p>		<p>Age</p> <p>Sex</p> <p>Specific location</p> <p>Chief complaint</p> <p>Pertinent related symptoms</p> <p>Medical/Surgical history, if any</p> <p>Other agencies responding</p> <p>Any dangers to responding units</p>
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# BLEEDING / LACERATION

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## KEY QUESTIONS

<p><b>"Where is the bleeding from?"</b></p> <p>If the patient is female with vaginal bleeding: <b>"Could she be pregnant?"</b> IF YES: go to <b>PREGNANCY/CHILDBIRTH</b></p> <p><b>"Does she have pain in the abdomen?"</b> IF YES: go to <b>ABDOMINAL PAIN</b></p>	<p><b>"How much blood can you see?"</b></p> <p><b>"How long have they been bleeding?"</b></p> <p><b>"Is blood squirting out?"</b> (Arterial bleeding)</p> <p><b>"Is the patient a hemophiliac?"</b> (A bleeder)</p> <p><b>"Has the patient recently traveled outside of the state/county?"</b> IF YES: <b>"Where?"</b> (Check ALERTS)</p>
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## SIMULTANEOUS ALS/BLS

## BLS.DISPATCH

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# VEHICULAR COLLISIONS Pre-Arrival Instructions

Do not approach vehicle if there are any indications of fire, downed wires or other hazards

If able to enter crash scene, DO NOT move patient(s) unless there are hazards

If the patient's condition changes, call me back

## Prompts

Has Law Enforcement been notified?

Is Fire Department/ HAZMAT needed?

If the caller can provide information about the patient(s) go to appropriate Guidecard.

### Follow Air Medical Dispatch Guidelines



## Short Report

Age  
Sex  
Specific location  
Chief complaint  
Pertinent related symptoms  
Medical/Surgical history, if any  
Other agencies responding  
Any dangers to responding units

## ABDOMINAL PAIN

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KEY QUESTIONS

*"Is the pain due to an injury to the patient?"*

*"How does the patient feel sitting up?"*

*"Is the pain above or below the belly button?"*

If the patient is female between 12-50 years old:

*"Could she be pregnant?"*

*"Has there been vaginal bleeding?"*

*"How much?"*

*"Has she felt dizzy?"*

*"As the patient vomited?"*

IF YES: *"What does it look like?"*

*"Are the patient's bowel movements back and tarry?"*

*"Is the patient wearing a Medical Alert tag?"*

IF YES: *"What does it say?"*

*"Does the patient have Addison's Disease, recent trauma or other medical condition?"*

***"Has the patient recently traveled outside of the state or county? IF YES: "Where?" (Check ALERTS)"***

## SIMULTANEOUS ALS/BLS

## BLS.DISPATCH

DISSPATCH

Vomiting blood (red/dark red) or coffee ground-like material  
Pain with existing history of Addison's disease  
Black, tarry stool  
Female, lower abdominal pain, 12-50 years old, (if associated with dizziness or fainting or heavy vaginal bleeding)  
Abdominal pain with fainting or near fainting, patient over 50 years old  
Fainting or near fainting when sitting (hypotension)

Pain with vomiting  
Flank pain (kidney pain)  
Abdominal pain (non traumatic)  
Pain, unspecified

# OD / POISONING / INGESTIONS

Pre-Arrival Instructions

**"Does the patient have a Nalaxone (Narcan) injector?"**  
 IF YES: **"Have you used it as the physician directed?"**  
 If they have not used it: **"Use it following the directions on the kit."**

Gather patient's medications, if any  
 If the patient's condition changes, call me back

Keep patient in area/house if safe

Get container of substance taken if at scene

Nothing by mouth, INCLUDING Ipecac, unless advised by Poison Control

## Prompts

## Short Report

IF UNCONSCIOUS, breathing normally go to: **UNCONCIOUS/BREATHING NORMALLY AIRWAY CONTROL**

IF UNCONSCIOUS NOT BREATHING go to: CPR for appropriate age group

Has Law Enforcement been notified?

**Poison Control Center (1-800-222-1222) or use one button transfer**

Age  
 Sex  
 Specific location  
 Chief complaint  
 Pertinent related symptoms  
 Medical/ surgical history  
 Other Agencies responding  
 Any dangers to responders

## PSYCHIATRIC/BEHAVIORAL PROBLEMS

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**"Is the Patient:**  
**"Acting violent, aggressive, shouting or yelling?"**  
**"Removing their clothing or naked?"**  
**"Sweating profusely?"**  
**"Breathing rapidly or drooling?"** (Excited Delirium)

If the caller knows the patient

**"Is the patient acting in their usual manner?"**

IF NO: **"What is different or unusual?"**

**"Is the patient known to use alcohol or drugs?"**

**"Is the patient diabetic?"**

**DIABETIC PROBLEMS**

**"Has the patient harmed themselves?"**

IF YES: Consider traumatic injury card

IF NO: **"Does the patient have a history of harming other people or themselves?"**

**"Has the patient ever attempted suicide?"**

**"Does the patient have a history of depression?"**

**"Has the patient recently traveled outside of the state or county?"** IF YES: **"Where"?**

## SIMULTANEOUS ALS/BLS

## BLS.DISPATCH

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Decreased level of consciousness

Patient presenting with  
 Extreme violent or aggressive behavior  
 Sweating profusely  
 Removing clothes or naked  
 Rapid breathing, drooling  
 Incoherent shouting or yelling

Lacerated wrist(s) with controlled bleeding  
 Unusual behavior with known psychiatric history  
 Known alcohol intoxication with other drugs, can be aroused  
 Threats against self or others  
 Police request for stand-by  
 Patient out of psychiatric medication

# SEIZURES / CONVULSIONS Pre-Arrival Instructions

Clear the area around the patient

Do not restrain patient

Do not place anything in patient's mouth

If the patient is a child, remove clothing to cool patient if hot and feverish

After seizure has stopped, check to see if patient is breathing

**IF NO:** Determine appropriate age group and go to

**CARDIAC ARREST/DOA**

**IF YES:** Have patient lie on their side and monitor breathing

Gather patient's medications, if any

If the patient's condition changes call me back

## Prompts

Any seizure with an unknown medical history is assumed to be a first time seizure

If unconscious after seizure GO TO; **UNCONCIOUS/BREATHING NORMALLY AIRWAY CONTROL**

## Short Report

Age  
Sex  
Specific location  
Chief complaint  
Pertinent related symptoms  
Medical/ surgical history  
Other Agencies responding  
Any dangers to responders

## SICK PERSON

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KEY QUESTIONS

***"Does the patient feel pain anywhere?"***

IF YES: ***"Where?"*** (Consider appropriate card)

***"Does the patient feel lightheaded or dizzy?"***

***"Does the patient have Addison's Disease or any other medical or surgical history?"***

***"What is the patient complaining of?"***

***"How does the patient look?"***

***"Is there insulin in the refrigerator?"***

***"Have you checked for a Medical Alert Tag?"***

If there is an alert tag: ***"What does it say?"***

***"Has the patient recently traveled outside of the state of country?"*** IF YES: ***"Where?"*** (Check ALERTS)

Flu Symptoms

***"Is the patient complaining of:"***

***"Fever, headache. Tiredness, (can be aroused), cough, sore throat, runny or stuffy nose, body aches or diarrhea and vomiting (more common among children than adults)?"***

## SIMULTANEOUS ALS/BLS

## BLS.DISPATCH

DISSPATCH

Decreased level of consciousness

Prior history of Addison's disease or adrenal insufficiency with dehydration, severe vomiting and diarrhea or low blood pressure

Multiple fainting episodes

Generalized weakness

Medical alert from alarm company

Flu symptoms (Without critical signs/symptoms or other medical concerns)

High blood pressure without critical symptoms

High temperature

Patient assist

# STROKE / CVA

## Pre-Arrival Instructions

Keep patient calm

Don't allow patient to move about

If unconscious or having difficulty breathing

**GO TO: UNCONSCIOUS AIRWAY CONTROL**

Nothing by mouth to eat or drink

Gather patient's medications, if any

If the patient's condition changes, call me back

### Prompts

If unconscious GO TO:

If unconscious, NOT breathing normally, GO TO: **UNCONSCIOUS/BREATHING NORMALLY AIRWAY CONTROL**

### Short Report

Age  
Sex  
Specific location  
Chief complaint  
Pertinent related symptoms  
Medical/ surgical history  
Other Agencies responding  
Any dangers to responders

## UNKNOWN / PERSON DOWN

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***"ARE THERE ANY OBVIOUS INJURIES?"***

***"CAN YOU SEE BLOOD OR ANY OTHER FLUID AROUND THE PATIENT?"***

***"Have you checked for a Medical Alert Tag?"***  
IF YES: ***"What does it say?"***

If the caller knows the patient

***"Has the patient recently traveled outside of the state or country?"*** IF YES: ***"Where?"*** (Check ALERTS)

***"Does the patient have Addison's Disease or any other medical or surgical history?"***

### SIMULTANEOUS ALS/BLS

### BLS.DISPATCH

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Unconscious/ not breathing normally

Decreased level of consciousness

Multiple Casualty Incident Criteria

Unknown, (third party caller) without indication of unconsciousness

Patient talking, moving, sitting or standing

**If she starts to deliver (water broken, bloody discharge, baby's head appears)**

The baby's head should appear first, **CRADLE** it and the rest of the baby as it is delivered.

**DO NOT PUSH OR PULL**

There will be water and blood with the delivery. **THIS IS NORMAL**

When the baby is delivered **CLEAN** out its **MOUTH** and **NOSE** with a **CLEAN, DRY CLOTH**

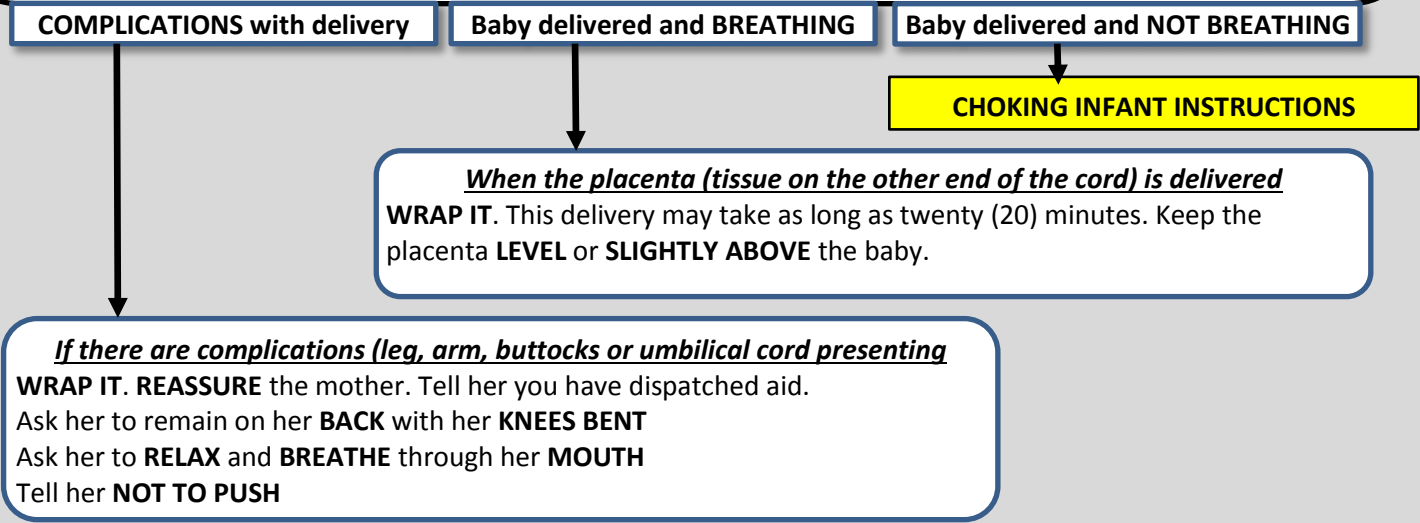
**DO NOT** attempt to **CUT** or **PULL** the cord

Wrap the baby in a dry blanket, towel or whatever is handy, and place it between the mother's legs on the floor.

Massage the mother's lower abdomen very gently.

If the baby **DOES NOT** start breathing on its own, rub its back or gently slap the soles of its feet.

If the baby **DOESN'T** begin breathing **IMMEDIATELEY**, come back to the phone



**UNCONSCIOUS/FAINTING**

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***"What was the patient doing before they became unconscious?"***

***"Is this the first time today the patient has been unconscious?"***

***"Has the patient taken any alcohol, medications or recreational drugs?"***

**IF YES: OD/POISONING/INGESTIONS**

***"Has the patient recently traveled outside of the state or country?"*** IF YES: ***"Where?"*** (Check ALERTS)

***"How does the patient act when they sit up?"***

***"Is the patient able to respond to you and follow simple commands?"***

***"Does the patient have any medical or surgical history?"***

***"Does the patient have a Medical Alert Tag?"***

**IF YES: "What does it say?"**

**SIMULTANEOUS ALS/BLS**

**BLS.DISPATCH**

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Unconscious not breathing normally  
 Multiple fainting (syncopal) episodes (same day)  
 Confirmed unconscious/unresponsive  
 Combined drugs and alcohol overdose  
 Fainting associated with: Headaches, chest pain/discomfort/palpitations, diabetic, GI/vaginal bleeding, abdominal pain, sitting or standing or continued decreased level of consciousness  
 Single fainting if over 50 years or age  
 Alcohol intoxication, cannot be aroused

Unconscious, but now conscious without critical symptoms  
 Unconfirmed, slumped over wheel  
 Conscious with minor injuries  
 Known alcohol intoxication without other drugs, can be aroused  
 Near syncope (fainting) without critical criteria