Limited Use License

By using these materials you (the “User”) agree to the following terms and conditions. The User is hereby granted a non-transferable, non-exclusive, revocable, perpetual, limited use license in the following materials. The User shall not, in whole or in part, alter or change the materials. The User acknowledges and understands that the International Academies of Emergency Dispatch is the sole and exclusive owner of the copyrights and other intellectual property associated with the materials and all derivates therefrom. The User agrees to keep any of these materials current as regularly issued by the IAED. These materials are protected by United States and International copyright laws and treaties. The User shall not use these materials commercially or for any monetary gain. They cannot be incorporated into any 3rd party products, computers or CADs, modified in any way, or redistributed for any other uses. In no event shall the International Academies of Emergency Dispatch be liable for damages of any kind associated with the use of these materials.
KEY QUESTIONS

1. What is the most prominent complaint? (Difficulty breathing)
   a. Does s/he have difficulty speaking between breaths?
      i. (No) Describe to me what her/his breathing is like. Yes & INEFFECTIVE
      ii. (INEFFECTIVE or DSBB) Did s/he have any flu-like symptoms prior to this?
         a. Has s/he ever had a heart attack or angina (heart pains)? Yes
         b. Is s/he completely alert (responding appropriately)? Yes
         c. Is s/he having chills or sweats? Yes & chest pain/discomfort ≥ 35
         d. Is s/he changing color? Yes & chest pain/discomfort ≥ 35
         e. Does s/he have a sore throat? Yes
         f. Does s/he have muscle or body aches? Yes
         g. Does s/he have a fever (hot to touch in room temperature)? Yes
         h. Does s/she have any flu-like symptoms? Yes
         i. Does s/he have fatigue or weakness? Yes
         j. Does s/he have a headache? Yes & no other flu-like symptoms Was there a sudden onset of severe pain?

2. Is s/he completely alert (responding appropriately)? Yes
3. (Not 1st party) Is s/he changing color? Yes
4. Is s/he having chills or sweats? Yes & chest pain/discomfort ≥ 35
5. (Not COVID-19) Is s/he vomiting? Yes & chest pain/discomfort ≥ 35
6. Does s/he have a new cough that recently started? Yes
7. Does s/he have a sore throat? Yes
8. Does s/he have muscle or body aches? Yes
9. Does s/he have a fever (hot to touch in room temperature)? Yes
10. Does s/he have a runny or stuffy nose? Yes
11. (Not COVID-19) Does s/she have diarrhea? Yes
12. Does s/she have fatigue or weakness? Yes
13. (Not COVID-19) Does s/she have a headache? Yes & no other flu-like symptoms Was there a sudden onset of severe pain?

LEVELS # DETERMINANT DESCRIPTORS  S A B C X L M H CODES: LEVEL 0 (S,X) LEVEL 1 (A,L) LEVEL 2 (B,M) LEVEL 3 (C,H)

D
1. INEFFECTIVE BREATHING with flu-like symptoms 36-D-1
2. DIFFICULTY SPEAKING BETWEEN BREATHS with flu-like symptoms 36-D-2
3. Not alert with flu-like symptoms 36-D-3
4. CHANGING COLOR with flu-like symptoms 36-D-4

C
1. Abnormal breathing with single flu-like symptom or Asthma/COPD 36-C-1
2. Abnormal breathing with multiple flu-like symptoms 36-C-2
3. Chest pain/discomfort ≥ 35 with single flu-like symptom 36-C-3
4. Chest pain/discomfort ≥ 35 with multiple flu-like symptoms 36-C-4
5. HIGH RISK 36-C-5

A
3. Flu-like symptoms only (cough, fever, chills, sweats, sore throat, vomiting, diarrhea, muscle/body aches, fatigue/weakness, headache, etc.) 36-A-3

KEY QUESTIONS (continued)

14. Does s/he have any HIGH RISK conditions?
   No flu-like symptoms in KQ 4–13 ——— CC

POST-DISPATCH INSTRUCTIONS

a. (If regular dispatch) I’m sending the paramedics (ambulance) to help you now. Stay on the line and I’ll tell you exactly what to do next.

b. (If reduced/limited dispatch) I’m arranging care for you now. An ambulance (or Care Van) will come to check you when they are available. This might take (several hours).

c. (No EMS response/Home quarantine instructions) Due to the extent of the epidemic, your condition requires that you remain at home and avoid close contact with others. A healthcare professional/specialist will (contact you soon to) give you further instructions. (Connect to a specialist if available.)

d. (No EMS response and alternative treatment site available) Since the hospitals are currently full and only accepting critically ill patients, I’m going to give you the address/location of the nearest treatment center. (Follow local instructions.) Do you have transportation to get there? (If no, follow local instructions.)

e. (Patient medication requested and Alert) Remind her/him to do what her/his doctor has instructed for these situations.

f. (≥ 1 + DELTA) If there is a defibrillator (AED) available, send someone to get it now in case we need it later.

DLS  * Link to X-1 unless:  ABC-1
Other high-risk conditions of asthma, COPD, heart disease, and angina are covered in other CHARLIE-level Determinant Codes.

Rules

1. Once surveillance or triage is locally approved, use Protocol 36 for the medical (non-trauma) Chief Complaints of Breathing Problems (Protocol 6), Chest Pain/Chest Discomfort (Protocol 10), Headache (Protocol 18 – not COVID-19), and Sick Person (Protocol 26). Protocol 36 provides shunts to these protocols when the outbreak disease is not likely in the patient.

2. Once two flu-like symptoms in Key Questions 4–13 have been identified, skip the rest of the questions to Key Question 14 and then choose the appropriate Determinant Code. If positive flu-like symptoms were mentioned in Case Entry, these Key Questions do not have to be asked again. More than one flu-like symptom creates a higher likelihood that the Chief Complaint is actually the current outbreak illness.

3. If initial information identifies the Chief Complaint as Breathing Problems (6), Chest Pain/Chest Discomfort (10), Headache (18 – not COVID-19), or Sick Person (26), and other flu-like symptoms are not identified, return to the original Chief Complaint and complete the call.

4. If the patient had a fever but took aspirin, acetaminophen (Tylenol), or ibuprofen (Motrin), and the fever is now gone, answer the fever Key Question as "yes".

5. If the complaint is Chest Pain/Chest Discomfort (≥ 35) and sweats, vomiting, or a history of heart attack or angina are later identified, go to Protocol 10 and complete the call. While sweats and vomiting are symptoms of flu and other flu-like illnesses, they may also be present in heart attacks.

Axioms

1. It is predicted that a pandemic, epidemic, or outbreak will cause an increase in the number of severe breathing problems reported (more 6-1-D-1 cases) unless Protocol 36 triage is implemented.

2. Pregnant women (including those up to 2 weeks after delivery) are generally more susceptible to infection from flu, flu-like illnesses, viral respiratory infections, and hemorrhagic fever. Also, once infected, they are typically more at risk for complications, hospitalizations, and death.

3. The HIGH RISK group of neurological diseases includes: cerebral palsy, stroke history (CVA/TIA), multiple sclerosis (MS), muscular dystrophy (MD), amyotrophic lateral sclerosis (ALS or Lou Gehrig’s disease), motor neuron disease (MND), poliomyelitis, and myasthenia gravis. If a mentioned disease is questionable, consider it as positive.

Pandemic

An epidemic that becomes widespread, affecting an entire region, continent, or the world.

Epidemic

A sudden outbreak of a disease or an unusually large number of disease cases in a single community or relatively small area. Disease may spread from person to person and/or through the exposure of many persons to a single source, such as a water supply.

Outbreak

A sudden increase in the number of disease cases, or occurrence of a larger than expected number of cases, within a short period of time.

Flu-like Symptoms (may be updated as more is known about specific symptoms at the time of an outbreak)

- Chest pain/discomfort
- Chills or sweats
- Cough (recent onset)
- Diaphoresis
- Difficulty breathing
- Fatigue/Weakness
- Fever (≥ 100º F/38º C)
- Headache
- Muscle or body aches

* Symptom excluded from COVID-19 definition

- Nasal congestion/ Stuffy nose
- New or persistent respiratory problems
- Runny nose
- Sore throat
- Vomiting*