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.
   b. *(INEFFECTIVE or DSBB)* Did s/he have any **flu symptoms** prior to this?

   **Yes & INEFFECTIVE**
   **Yes & DSBB**
   **No**

   *(Chest pain ≥ 35)*
   a. Has s/he ever had a **heart attack** or **angina** (heart pains)?

2. Is s/he **completely alert** (responding appropriately)?
3. Is s/he **changing color**?
   a. *(Yes)* Describe the color change.
4. Is s/he having **chills** or **sweats**?
   **Yes & chest pain ≥ 35**
5. Is s/he **vomiting**?
   **Yes & chest pain ≥ 35**
6. Does s/he have a **new cough** that **recently** started?
7. Does s/he have a **sore throat**?
8. Does s/he have **unusual total body aches**?
9. Does s/he have a **fever** *(hot to touch in room temperature)*?

LEVELS # DETERMINANT DESCRIPTORS + S A B C CODES: LEVEL 0 (S) LEVEL 1 (A) LEVEL 2 (B) LEVEL 3 (C)

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

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

**A**
1. Chest pain < 35 with **single** flu symptom
2. Chest pain < 35 with **multiple** flu symptoms
3. Flu symptoms only *(cough, fever, chills, sweats, sore throat, vomiting, diarrhea, unusual total body aches, headache, etc.)*

**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. *(If quarantine and no dispatch)* Because of the extent of the flu epidemic, an ambulance **cannot be sent** to you. I will **connect** you to a **flu care specialist** who will advise you on what to do.

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

e. *(≥ 1 + DELTA)* If there is a **defibrillator** *(AED)* available, **send** someone to get it now in case we need it later.
Rules
1. Once surveillance or triage is locally approved, use Protocol 36 for the medical Chief Complaints of breathing problems, chest pain, headache, and sickness. Do not go to Protocols 6, 10, 18, or 26 unless Protocol 36 directs you there.
2. Once two flu symptoms in Key Questions 4–12 have been identified, skip the rest of the questions to Key Question 13 and then choose the appropriate Determinant Code. If positive flu symptoms were mentioned in Case Entry, these Key Questions do not have to be asked again. More than one flu symptom creates a higher likelihood that the Chief Complaint is actually the flu.
3. If initial information identifies the Chief Complaint as Breathing Problems (6), Chest Pain (10), Headache (18), or Sick Person (26), and other flu 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 (≥ 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, they may also be present in heart attacks.
6. Patients of age 65 or older are unlikely to have H1N1 and should be handled according to their most prominent Chief Complaint.

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-D-1 cases) unless Protocol 36 triage is implemented.

2. Pregnant women infected with H1N1 are significantly more at risk for complications, hospitalization, and death.
3. The HIGH RISK Condition of neurological diseases includes: multiple sclerosis (MS), muscular dystrophy (MD), amyotrophic lateral sclerosis (ALS or Lou Gehrig’s), 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 Symptoms (may be updated as more is known about specific symptoms at the time of an outbreak)
Common symptoms of the current H1N1 (swine flu) illness based on the latest information from government health agencies:
• Chest pain
• Headache
• Chill or sweats
• Runny/stuffy nose
• Cough (recent onset)
• Sore throat
• Unusual total body aches
• Diarrhea
• Difficulty breathing
• Vomiting

INEFFECTIVE BREATHING
See Protocol 9 for definitions.

DIFFICULTY SPEAKING BETWEEN BREATHS
See Protocol 6 for definitions.

CHANGING COLOR
See Protocol 6 for definitions.

Flu Surveillance & Triage Level Suffixes
Locally enacted Flu Level designations may affect your agency’s response assignment. With the exception of Level 0, the other levels allow for locally designated, potentially different levels of patient triage and reduced response:

S = Level 0 (surveillance only) – no change in response
A = Level 1 (low triage) – consider referral of ALPHA cases only
B = Level 2 (moderate triage) – consider reduced response for CHARLIE cases
C = Level 3 (high triage) – consider referral of some CHARLIE cases and reduced response for DELTA cases

High Risk Conditions

• ≤ 12 years old
• Diabetes
• Neurological diseases (affecting swallowing or breathing)
• Pregnancy
• Sickle cell disease (sickle cell anemia)
Other high-risk conditions of asthma, COPD, heart disease, and angina are covered in other CHARLIE-level Determinant Codes.