

Category V Pandemic Flu

EMS Protocols must be standardized and equitable

I. Changes in Treatment Standards

A. 911 call taking changes

1. 211 Call center

a) Recording of instructions for the patient and caretakers

(1) Signs/symptoms of the flu

(2) Self treatment

(a) Stay put

(b) prevent dehydration

(c) self isolation within your home

(i) close door

(ii) open window

(d) social distancing

(i) work from home

(ii) don't go to work unless essential job

(e) family members also self isolate for severe cases

(f) where to obtain antiviral medications

(3) Prevention and spread of disease

(a) hand washing

(b) masks (8 layers)

(c) ventilation

(i) open windows

(ii) close doors

(d) linen washing

(4) Self transport to a ED Triage Center for care only if (Ambulances will not respond):

- (a) signs of pneumonia***
- (b) dehydration in the presence of N/V***
- (c) etc.***

(5) Announce that we will not be sending ambulances to any patient emergency involving the flu (even full cardiac arrests).

(6) State the Tarrant County Public Health's website for more information.

2. 911 call center activated

a) Recording will be activated prior to being answered by the MedStar Communications Dispatcher

(1) "If you have signs and symptoms of the flu, please hang up and call '211' or go to Tarrant County Public Health website. If you do not have signs and symptoms of the flu, please stay on the line."

b) The call will be properly EMD. If the flu is identified, forward the call to the 211 phone line.

(1) If by forwarding the call it ties up the phone line, then inform the patient to hang up and dial 211.

(2) If the phone system is overwhelmed, then should we abandon the EMD process?

c) Somehow make "patient identifiers" to prompt the dispatcher that a person has the flu.

d) Ambulances will not be assigned to flu related emergencies, even full cardiac arrests

(1) Call the funeral home

(2) These calls may be forwarded to the ME and PD office.

3. Physician Offices answering machine messages

- a) **DO NOT** state to call 911
- b) **Call 211 or go to the Public Health Department's website**

II. EMS Responses

A. What will EMS respond to?

- 1. **Acute MIs**
- 2. **Major Trauma**
- 3. **CVAs?**
- 4. **Pregnancy and Labor**
- 5. **Etc.**

B. What will EMS NOT respond to?

- 1. **Flu- regardless of age**
- 2. **Nursing home patients**
 - a) **Staffing will be less of a problem than with EDs**
 - b) **Have medication already that ED won't have**
 - c) **They will be lowest priority**
 - d) **Large number of nursing homes dumped patients to ER's in Houston during Rita**
 - e) **They require more care than other patients**
 - f) **Have physicians already**
 - g) **Sending into worse situation than they are in currently**

3. Comorbidities?

- a) **COPD, Emphysema, Chronic bronchitis**
- b) **Terminal illness/disease (cancer, etc)**

- c) Renal failure
- d) Etc.

4. Priority 3, 4, & 5 calls

- a) Contract with nonemergency transport services for all non-911 calls to decompress the hospitals

C. Treatment Protocols

1. “No treatment” protocols

- a) No ETT flu patient
- b) If flu, leave them at home
 - (1) *Have dispatcher make call taker note that specific patient has the flu for future calls*
- c) Antiviral/antipyretics/antiemetic/other medicines—probably not

D. Recordkeeping

1. Documentation changes

- a) Name
- b) Pertinent demographics
- c) Chief complaint
- d) Vital signs
- e) Destination?
 - (1) *hospital*
 - (2) *triage center*
- f) Treatment
 - (1) *Antiviral/antipyretic/antiemetic/other medicines—probably not.*

III. Community Notification

A. Means of communication

1. Mass Media notifications

- a) TV
- b) Radio
- c) Internet

2. 911

3. 211

4. Hospital answering machines

5. Physician answering machines

6. Urgent Care answering machines

B. Messages

1. Do you go to the hospital? Yes or No?

- a) If yes,
 - (1) *do not call EMS*
 - (2) *self transport*
- b) If no, then where do you go?
 - (1) *Home (stay put)*
 - (2) *Alternate site*

IV. How to protect EMS Providers and their families and how to get them to work

- A. Alternate place to stay***
- B. Prophylaxis (including family members)***
- C. Maximum amount of hours per shift and breaks***

DRAFT