

Sample Pandemic Influenza Virulent Infectious Disease Protocol for EMS

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DYNAMIC SYSTEM SEVERITY SCORE

A. Pandemic Severity Score _____

Category 5	=5 points
Category 4	=4 points
Category 3	=3 points
Category 2	=2 points
Category 1	=1 points

B. EMS/Dispatch System Demand for Services _____

Critical Increase	=5 points
Severe Increase	=4 points
Moderate Increase	=3 points
Mild Increase	=2 points
Standard Operating Mode	=1 points

C. Reduction of EMS/Dispatch Workforce _____

Absentee Rate over 40%	=5 points
Absentee Rate 35-40%	=4 points
Absentee Rate 25-35%	=3 points
Absentee Rate 15-25%	=2 points
Absentee Rate 10-15%	=1 points

D. Facility Capacity (Bed availability) _____

Occupancy exceeds 100% of capacity	=5 points
Occupancy Rate 98-100%	=4 points
Occupancy Rate 95-98%	=3 points
Occupancy Rate 90-95%	=2 points
Occupancy Rate at 90% or below	=1 points

TOTAL POINTS (A+B+C+D) _____

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4-10 points DSS CATEGORY ONE: Pandemic Severity Mild; Dispatch and /EMS demand above average; EMS /Dispatch personnel availability stressed; Hospital capacity limited.

11-15 points DSS CATEGORY TWO: Pandemic Severity Moderate; Dispatch and /EMS demand is very high; EMS /Dispatch personnel availability is seriously low; Hospital capacity exceeded, system activation of alternate patient destinations.

16-20 points DSS CATEGORY THREE: Pandemic Severity Severe; Dispatch and /EMS demand is Overwhelming; EMS /Dispatch personnel availability is critically depleted; Hospital capacity NONE and using all alternative out of hospital resources:

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Sample Protocols	Dynamic System Severity Category 1	Dynamic System Severity Category 2	Dynamic System Severity Category 3
Triage <i>(to occur both at the 9-1-1 center and on scene)</i>	Determine whether to implement triage and treatment protocols that differentiate between non-infected and potentially infected patients based on CDC case definition.	Triage would focus on identifying and reserving immediate treatment for individuals who have a critical need for treatment and are likely to survive. The goal would be to allocate resources in order to maximize the number of lives saved.	Using screening algorithm to ensure only severe get response
Treatment	Consider suspension of mucous/sputum causing treatments such as aerosolized medications and/or endotracheal intubation. Ambulatory patients will be redirected to alternate care sites within or outside of the hospital.	Treatment protocols may be modified to enable and encourage patients to receive care at home.	Certain lifesaving efforts may have to be discontinued.
Equipment	Prudent use of equipment Implementation of strict PPE protocols for patients meeting case definition established by CDC during the response phase of a 9-1-1 call.	Selective criteria in place for priority use. Some scarce and valuable equipment, such as ventilators, may not be used without staff available who are trained to operate them.	Disposable supplies may be reused. Strict criteria in place for equipment use. Some scarce and valuable equipment, such as ventilators, may not be used without staff available who are trained to operate them.
Transportation	Non-urgent and ambulatory victims may have to walk or self-transport to the nearest facility or hospital.	Emergency medical services may transport victims to specific quarantine or isolation locations and other alternate care sites. Buses and other forms of non-medical transportation may have to be used to supplement emergency transport systems.	Only severe cases transported via ambulance Buses and other forms of non-medical transportation may have to be used to supplement emergency transport systems.
Destination	Alternate care sites will be used for triage and distribution of vaccines or other prophylactic measures, as well as for quarantine, minimum care, and hospice care.	Ambulatory and some non-ambulatory patients may be diverted to alternate care sites (including non-medical space, such as cafeterias within hospitals, or other non-medical facilities) where "lower level" hospital ward care or quarantine can be provided.	Emergency department access may be reserved for immediate-need patients.