

# Pandemic Flu and Protocol 36

## 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 derivatives 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)?  
Yes \_\_\_\_\_
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)?

36-D-1  
36-D-2  
6  
10  
10  
10

## KEY QUESTIONS (continued)

10. Does s/he have a **runny** or **stuffy nose**? \* see Rule 2
11. Does s/he have **diarrhea**?
12. Does s/he have a **headache**?
  - a. (**Yes & no other flu symptoms**) Was there a **sudden** onset of **severe** pain?  
Yes \_\_\_\_\_ 18
13. Does s/he have any **HIGH RISK** conditions?  
No flu symptoms in KQ 4–12 \_\_\_\_\_ 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. (**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.

DLS \* Link to X-1 unless: \_\_\_\_\_

**INEFFECTIVE BREATHING** and **Not alert** \_\_\_\_\_ **ABC-1**

| LEVELS   | # | DETERMINANT DESCRIPTORS  | → S A B C | CODES: LEVEL 0 (S) | LEVEL 1 (A) | LEVEL 2 (B) | LEVEL 3 (C) |
|----------|---|--|-----------|--------------------|-------------|-------------|-------------|
| <b>D</b> | 1 | <b>INEFFECTIVE BREATHING</b> with <b>flu symptoms</b>  |           | 36-D-1             |             |             |             |
|          | 2 | <b>DIFFICULTY SPEAKING BETWEEN BREATHS</b> with <b>flu symptoms</b>  |           | 36-D-2             |             |             |             |
|          | 3 | <b>Not alert</b> with <b>flu symptoms</b>  |           | 36-D-3             |             |             |             |
|          | 4 | <b>CHANGING COLOR</b> with <b>flu symptoms</b>   |           | 36-D-4             |             |             |             |
| <b>C</b> | 1 | <b>Abnormal breathing</b> with <b>single</b> flu symptom or <b>Asthma/COPD</b>   |           | 36-C-1             |             |             |             |
|          | 2 | <b>Abnormal breathing</b> with <b>multiple</b> flu symptoms  |           | 36-C-2             |             |             |             |
|          | 3 | <b>Chest pain ≥ 35</b> with <b>single</b> flu symptom  |           | 36-C-3             |             |             |             |
|          | 4 | <b>Chest pain ≥ 35</b> with <b>multiple</b> flu symptoms   |           | 36-C-4             |             |             |             |
|          | 5 | <b>HIGH RISK</b> conditions  |           | 36-C-5             |             |             |             |
| <b>A</b> | 1 | <b>Chest pain &lt; 35</b> with <b>single</b> flu symptom   |           | 36-A-1             |             |             |             |
|          | 2 | <b>Chest pain &lt; 35</b> with <b>multiple</b> flu symptoms  |           | 36-A-2             |             |             |             |
|          | 3 | Flu symptoms <b>only</b> (cough, fever, chills, sweats, sore throat, vomiting, diarrhea, unusual total body aches, headache, etc.) |           | 36-A-3             |             |             |             |

## ➔ 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

### INEFFECTIVE BREATHING

See **Protocol 9** for definitions.

### DIFFICULTY SPEAKING BETWEEN BREATHS

See **Protocol 6** for definitions.

### CHANGING COLOR

See **Protocol 6** for definitions.

### HIGH RISK Conditions

- ≤ 12 years old
- Diabetes
- Neurological diseases (affecting swallowing or breathing)
- Pregnancy
- Sick cell disease (sickle cell anemia)

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 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
- Chills or sweats
- Cough (recent onset)
- Diarrhea
- Difficulty breathing
- Fever (> 100° F/38° C)
- Headache
- Runny/stuffy nose
- Sore throat
- Unusual total body aches
- Vomiting