

WHAT HAPPENS WHEN YOU CALL 911?

Notes from CHW training February 2008, Tom Gudmestad, Paramedic Supervisor for King County Medic One

The fire department provides all emergency medical services and paramedics in King County are trained at Harborview Medical Center. Basic Life Support (BLS) training is 110 hours where Advanced Life Support (ALS) training is 4500 hours. It costs about \$1.2 million per year to run one Medic One truck.

What you can expect

- If you call 911, an EMT (emergency medical technician) trained in Basic Life Support will be the first to arrive. They could come in an aid car, a fire engine, or ladder truck. Whoever is closest will come and response time should be about 4 minutes.
- If the situation is more critical, the Medic One unit will be called. These are the paramedics and are trained in Advanced Life Support (ALS). They should be able to arrive within 7-10 minutes.

What if the family doesn't speak English?

- The dispatcher (on the phone) uses the language line for limited English-speaking folks.
- On the scene, the EMT will depend on physical assessment of the patient and hope for a family translator.

When you call 911, this is what the dispatcher will want to know:

- Is this a medical emergency? (as opposed to fire or police)
 - For example, caller would say: "This is a medical emergency."
- Age, gender, complaint.
 - For example, caller would say: "It's a 36 year old female and she's having an asthma attack", or "she's having trouble breathing."
- History (other medical problems, distinguish between long term history and today's complaint)
 - For example, caller could say: "She has asthma and high blood pressure. She can't breathe right now."
- Medications that the person takes: What medications do they usually take? Did they take them today? Have they had any effect?
 - For example, caller could say: "She takes Flovent and Albuterol. She took the Albuterol 20 minutes ago but not the Flovent. She is not any better after taking her Albuterol."
- The dispatcher will ask questions to try to determine the severity of the situation. This helps her/him to make a decision about whether the Medic One unit needs to be sent right away. They will ask,

“How many words can the patient speak before taking another breath?” Or, “Have the patient count to ten and tell me what number they have to stop and take a breath.”

- *The dispatcher may ask to speak to the patient. This is an important way to assess severity. If the patient is unable to speak, you **can** put the phone to the patient’s mouth, and the dispatcher will hear her breathing and will have an idea of how serious it is.*
- The dispatcher will try to keep the caller on the phone until the EMTs arrive. The dispatcher may, in certain circumstances, offer “Pre-Arrival Instructions” to the caller, to help with the medical emergency. For example, CPR or choking instructions.
- **Many** asthma calls for kids are kids who are mad at their parents or someone else.
- **Many** are **not** true life-threatening bronchospasms.

What will they do when they get there?

EMTs (Basic Life Support): 70% of calls

1. Sick or not sick?
2. Physical exam:
 - Pulse, respirations, blood pressure, skin color, pulse oximetry (sensor attached to fingertip to measure blood/oxygen saturation), ECG (electrocardiogram), cardiac defibrillation (depending on situation)
 - Assess breath sounds: can give oxygen, assisted ventilation, suction, and assist with MDI (metered dose inhaler)
3. At same time will ask about history and medications.
4. They **usually** do not transport patients **but will help arrange transportation: private auto, taxi, ambulance**

Epi pens:

They do carry epi pens and junior epi pens but they can only use in case of anaphylaxis. Guidelines are very strict: must be < 18 years old, documented exposure, history of allergy. Or, if >18 years, must have Epi Pen or prescription for Epi.

Medic One paramedics (Advanced Life Support) (30% of calls)

Can do everything the EMTs do as well as:

- Start IV (intravenous line)
- Give IV meds (such as aminophylline)
- Administer meds by nebulizer (usually bronchsol for asthma)
- Sometimes give epinephrine.

- Intubate (put a tube in the throat to open the airway)
- Transport (free) to *nearest* hospital (except in special cases like children—Children’s Hospital, burns and trauma—Harborview)

Will the participant have to pay?

- There is no bill sent to the participant for the emergency response (coming to the scene). There is no bill for transport by the Medic One unit, if needed. *This service is paid for by property taxes in King County.*
- *If this is not an emergency*, but the person needs to be transported to hospital, they will usually call a private ambulance to transport. The ambulance company will bill the family or insurance for about \$500.