



Appendix B: COVID-19 Dispatch Protocols

Due to the emergence of the COVID-19 (Coronavirus) Pandemic, the Texas A&M EMS Communications Division has to adjust its operating method to ensure our crews are not exposed to COVID-19 unnecessarily and prevent hospital overcrowding. In order to do this, TAMU EMS has activated both the Pandemic Protocol (36) in ProQA and the EIDS Tool to reflect the screening requirements for COVID-19.

Encompassed in this Appendix are the Requirements for Dispatch using the Pandemic Protocol as well as the EIDS tool. This change is indefinite, and this protocol should be followed until further notice. A brief summary of the overall operating methods are described below:

Sanitizing the Dispatch Office:

- At every shift change, it is the duty of the on-coming dispatcher to clean and sanitize the entire dispatch office, including the dispatch bathroom.

COVID-19 Symptom Tracking/Reporting for Employees:

- At every shift change, it is the duty of the on-coming dispatcher to take their temperature and SpO₂ reading, and record their results in the COVID-19 Employee Reporting Form in Aladtec.
- If a dispatcher begins to exhibit COVID-19 symptoms at any time before, during, or after their scheduled shift, they should immediately notify both 805/815 and AOD.

Dispatching Requests for Service using Protocol 36: Pandemic Card & EIDS Tool:

- The following Chief Complaints shall be dispatched using Protocol 36 instead of their usual assigned Protocol.
 - o **Breathing Problems, Chest Pain, Headache, and Sick Person**
 - For Triage Level 1: Dispatch should be DELAYED until a determinant is reached.
 - For **ALPHA level determinants**, an ambulance should not be sent. Instead, follow instructions given in the Procedure attached to refer them to a telehealth option.
 - For **CHARLIE and DELTA level determinants**, an ambulance should be sent, and crew should be advised that the patient is "EIDS Positive".
 - o The chief complaint in the primary tone-out and secondary should reflect the original chief complaint (breathing problems, chest pain, headache, sick person) instead of "Pandemic".
 - For cases that shunt back to the original chief complaint card, an ambulance should be dispatched immediately upon shunting back.
 - o For example, if Protocol 36 shunts you to Protocol 10, you would dispatch upon arriving at the first Protocol 10 question. Do not wait until a Protocol 10 determinant is obtained.
 - For Triage Level 0: Dispatcher should utilize Protocol 36 as above, but a response will be sent regardless of determinant. Do not delay dispatch.
- For all other chief complaints, use the EIDS Tool. Advise your findings (EIDS Positive/Negative) to the responding TAMU EMS units in your secondary.
- For UPD or Mutual Aid calls, request a screening from the dispatcher. For more information, follow the guidance on the Dispatch Console. Do not ask 4th Party callers the ProQA questions.
- **A COVID-19 screening is required for every request for service.**

Consult 805 or 815 with any questions on this protocol.