
Dispatch

Purpose:

As mandated under Public Act 368 of 1978, as amended, Section 20919 (1)(b): “A local medical control authority shall establish written protocols for the practice of life support agencies and licensed emergency medical services personnel within its region. The protocols shall be developed and adopted in accordance with procedures established by the department and shall include medical protocols to ensure the appropriate dispatching of a life support agency based upon medical need and the capability of the emergency medical services system.”

Local municipalities shall determine, in accordance with the rules and regulations of their local Medical Control Authority, the level of agency licensure, as well as who will provide EMS service in their area.

Protocol

1. Public Safety Answering Points and/or Life Support Agency dispatch centers shall use Enhanced 911 technology, where available, and shall dispatch appropriate resources as quickly as possible.
2. Since ALS may provide additional medical care and delay may negatively impact patient outcome, in areas where ALS is available it shall be simultaneously dispatched to certain medical emergencies including, but not limited to:
 - a. Cardiac Arrest
 - b. Chest Pain
 - c. Stroke
 - d. Drug Overdose / Poison
 - e. Altered Mental Status / Unconscious
 - f. Allergic Reaction
 - g. Difficulty Breathing
 - h. Drowning or Near Drowning
 - i. Injury with Bleeding or Immobility
 - j. Seizures / Convulsions
 - k. Diabetic Reactions
 - l. Child Birth
 - m. Burns
 - n. or as determined through prioritized dispatch developed through an MCA approved EMD program.

All medical callers shall be provided with complaint evaluation and prioritization, along with pre-arrival instructions through an Emergency Medical Dispatch program approved by the MCA. Pre-arrival instructions should conform to nationally recognized guidelines.