



Ringling 999 for an ambulance - a guide for education

It is always better if someone who is with the patient can ring 999, so you will need to get a telephone to the patient or get the patient to a telephone.

This is important for a variety of reasons, if the call is about an illness the call handler may want to know if there is a rash, what their breathing sounds like, any rapid swelling of the lips, face, throat or tongue, does their skin feel a normal temperature etc. If the call is about an injury the call handler may ask questions like, is the limb cold, pale or blue, can the patient weight-bear, are there pins and needles in the limb, any bleeding etc. It is essential that the caller provides accurate timely information about what they can see and hear this loses quality if the caller is reliant on a third person.

When you first ring 999 you will go through to an emergency operator who will ask you what service you require (Police, Fire, **Ambulance** or Coastguard) if you do not state you want an ambulance you will be transferred to the police.

The East Midlands Ambulance Service uses a triage tool called Advances Medical Priority Dispatch System (AMPDS). AMPDS is an International Academy of Emergency dispatch computer based operating system that provides a suite of clinical protocols for triaging 999 calls based on the symptoms reported when calling. Calls are prioritised so that patients are provided with the right level of care in the fastest time possible. The ambulances are only sent on lights and sirens to the most serious conditions, thus minimising the risk to other road users and the public.

When you are connected to the ambulance service you will initially be asked if the patient is breathing, you will then be asked if they are conscious. If the patient is awake & breathing you will be asked what the problem is, at this point we only want to know a brief summary of what is happening, i.e. "they have injured their ankle", "they have breathing difficulties" etc. and how this has happened.

You will then be asked to confirm the address of the emergency including the postcode. You will be asked to repeat this.

The call will then be triaged; in order to do this effectively we need to speak to either the patient or someone with the patient and we will also want to know the name and age of the child.

The call handler will carry out a safe effective assessment of the symptoms reported, as the clinical assessment progresses; each answer determines the next question to be asked.

The question set will vary depending on the symptoms and condition of the patient so it really requires the patient or someone with the patient to answer these questions.

By answering these questions it enables us to prioritise the response required. EMAS may get a clinician (paramedic, nurse or doctor) to call you back who will further assess the clinical presentation of the patient and also might ask you if the school or the parents are able to transport the patient to the hospital, a Doctors surgery or a Minor Injury Unit (MIU) following the assessment.

If, when asked is the patient is conscious and breathing, you answer no to either then this could potentially be life threatening and will be triaged appropriately in line with AMPDS.

You may be requested to fetch defibrillator if there is one available. Ensure that someone other than the caller goes to fetch this and returns as soon as possible.

If someone is not breathing the call handler will talk you through what you can do to help, this will include instructions on how to commence Cardio Pulmonary Resuscitation (CPR). This will require you and the phone to be next to the patient. You will be asked to put the phone on loudspeaker and will be asked to shout out the chest compressions as you give them, so the call handler knows what is happening.

Do not stop CPR as soon as the Paramedics arrive as they will require a few seconds to assemble any equipment required. Continue until the paramedics actively take over from you.

Important

You don't need to be First Aid trained; all instructions will be given by the call handler. It is important that CPR is started as soon as possible to give that patient the best opportunity for a positive outcome.