

Medical Emergencies and Calling 911

Direct care staff are often faced with the difficult situation of determining whether a change in a person's medical status or an injury is a true emergency. Staff all too often struggle with the decision to call 911 vs calling a supervisor for advice. In many cases this causes a delay in obtaining appropriate medical evaluation and care. All too often that delay can result in a poorer outcome for the individual. It may result in someone losing the ability to participate in normal activities. The person may also lose the ability to perform such basic functions as being able to dress oneself, eat without assistance, or communicate. Time can be critical.

Per the POLICY ON THE PROVISION OF CARE TO CONSUMERS WITH EMERGENCY OR URGENT HEALTH CARE NEEDS, "if a consumer has a health care emergency, staff must act immediately to obtain the intervention of appropriate emergency medical technicians or other medical personnel through a call to 911 or other appropriate and effective means of communications."

Therefore if anyone thinks there is an emergency situation **FIRST call 911**, then call the appropriate supervisor. When making a call to 911, be prepared to give needed information which includes:

- The **nature** of the emergency (what type of illness or injury is present)
- The **location** (street address and also where the person is located at that address)
- A **telephone number** where the dispatcher could reach you if needed

A card which outlines these questions that is located near the phone can be helpful during an emergency situation.

While awaiting the arrival of the ambulance, anyone trained in first aid can provide basic assistance to the person. Other staff persons can assist by remaining calm and staying with the injured or ill person; or by helping to calm and care for other persons that are present.

Although lists can never cover every possible situation, below are some medical emergencies or warning signs of an impending emergency situation that should prompt calling 911.

1. Sudden change in mental status
 - a. Loss of consciousness
 - b. Extreme lethargy or unresponsiveness
 - c. Dizziness and fainting
 - d. Confusion or unusual behavior
2. Acute chest pain (possible heart attack)
 - a. Especially if accompanied by signs of sweating, nausea, dizziness, or shortness of breath
3. Respiratory problems
 - a. Severe shortness of breath or difficulty breathing

- b. Coughing up blood
 - c. Asphyxia (lack of oxygen)
 - i. Choking, drowning, strangulation
 - d. Acute, severe asthma attack
4. Signs of a possible stroke
- a. Weakness or numbness of face, arm or leg; usually occurring on only one side of the body
 - b. Sudden confusion, difficulty speaking
 - c. Loss of balance or coordination, difficulty walking
 - d. Sudden, severe headache with no known cause
5. Seizures:
- a. Status epilepticus
 - b. A seizure that lasts longer than a person's usual seizure or is much different from usual episodes
 - c. The presence of breathing problems or other unusual or serious problems associated with the seizure
6. Severe gastrointestinal problems
- a. Severe, persistent abdominal pain of sudden onset
 - b. Severe or persistent vomiting, especially if vomiting blood or a very dark substance that could be blood
 - c. Ingestion of a poisonous substance
7. Trauma
- a. Head injury associated with decreased responsiveness
 - b. Possible spine injury
 - c. Possible bone fracture
 - d. Serious burn
 - e. Deep or large wound
 - f. Continuous or severe bleeding
8. Heat stroke
- a. Hot dry skin which is red, mottled or blue (cyanotic).
 - b. Often accompanied by weakness, confusion, dizziness
9. Anaphylaxis