

Distressed Caller

Below is a look at how we will handle a distressed caller calling into the office with **a possible medical emergency**. This call will be received first by an admin, a care coordinator or an intake coordinator depending on who the patient/caregiver calls. At that point, the following process will occur...

Possible Emergency Call Received (Admin, Intake, CC)

1. Patient/caregiver calls in with a possible medical emergency
2. Receiver listens for urgency in patient voice or trigger words:
 - a. Chest Pain
 - b. Shortness of Breath
 - c. Stroke like symptoms (*Face drooping, Arm weakness, Speech difficulty, Time to call*)
 - d. Bleeding
 - e. **If unresponsive**, call 911 immediately and contact the CC or RNCM so an incident report can be completed (**stay on the line until EMS arrives**)
3. If call is determined to be **Emergent**: Transfer call to **SOS line (ext. 767)**
 - a. Remain on the line until SOS Nurse answers
 - b. Provide SOS nurse with the last 4 digits of MRN and patient's last name- hang up.
 - c. Receiver Documents Call in Distressed call log (*Located in shared forms*)
 - Date of call
 - Time of call
 - Name of caller if someone other than the patient
 - Name of the nurse that took the call
 - First initial and last name added to end of note

WHERE TO TRANSFER CALLS

Nurses Line - 704

- Non Emergent Calls
- Medical Questions
 - Verbal Orders
 - Reports

SOS Line - 767

- EMERGENCIES ONLY

SOS Call- Nurse Process

Below is the process that will occur if a call has been **deemed emergent** by the receiver of the call. The receiver will transfer the call to the SOS line, at which point every nurse's phone in the SOS ring group will ring...

1. SOS alert with flash across your Ohioans phone screen
 - a. If already on phone please quickly and politely hang up with caller to answer SOS call
2. Intake/Admin/CC to give last 4 digits of MRN and patient last name
3. SOS nurse listens for key points that may indicate an emergency
 - a. Chest Pain
 - b. Shortness of Breath
 - c. Stroke like symptoms
 - d. Bleeding

(For additional resources please refer to the "My Emergency Plan" located in Devero under Educational tools)

4. If call is deemed **Emergent**: Conference call 911
 - a. Remain on the phone with patient/caregiver until EMS arrives.
 - b. When call has ended, immediately complete a Report of Incident
 - Notify MD
 - Notify CC

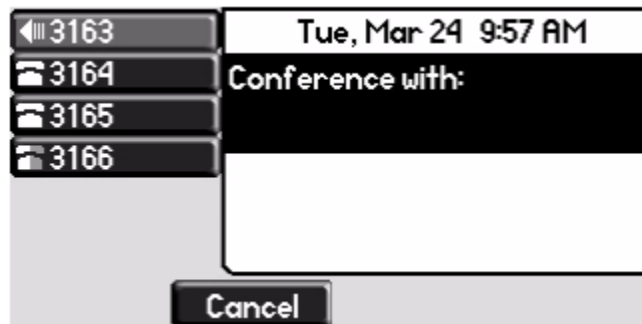
(see transfer guide for more on conference calls)

5. If call is deemed to be **Non-Emergent**:
 - a. Transfer call to the Care Coordinator

Transferring Calls

Setting up Conference Calls

1. Press **Conference** key to create a new call
 - The active call is placed on hold
2. Enter the extension number to which you would like to conference with



3. When the second party answers, press the **Conference** key again to join all parties.

