



University of Denver Emergency Medical Service

Standard Operating Guidelines and Protocols

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SOG #: 1

Title: Safety Policy

Effective Date: October 31, 2018

Last Revised: January 23, 2019

This unit adopts the following safety statement:

"It is the policy of this unit to provide and to operate with the highest possible levels of safety and health for all personnel. The prevention and reduction of accidents, and injuries are goals of this unit and shall be primary considerations at all times. This concern for safety and health applies to all personnel of this unit and to any other person who may be involved this unit's activities."



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SOG #: 2

Title: Required Personnel Clothing

Effective Date: October 31, 2018

Last Revised: March 31, 2019

All on-duty personnel must represent the organization in a professional and a well-kept manner at all times while on duty. While on duty, DU EMS personnel must be in compliance with the following uniform standard. Any other adornment or article of clothing not mentioned is prohibited. The following policy describes the DU EMS uniforms.

1. DU EMS approved shirt or job shirt
2. DU EMS approved navy-blue EMS pants/trousers
3. DU EMS approved black boots
4. DU EMS approved black belt
5. Watch with second hand
6. Notepad with pen

Hair and Jewelry

Protruding body piercings, rings, and necklaces that are not protected from being grabbed by a patient may not be worn by duty-crew personnel. Stud piercings may be worn as long as they pose no danger to a member of the crew or the patient.



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SOG #: 3

Title: Approved Uniforms

Effective Date: October 31, 2018

Last Revised: March 31, 2019

The following is the approved gear for use by this unit. Any other equipment must be approved by the Assistant Chief of Operations prior to use.

Shirt: 5.11 Tactical Cotton Polo as provided by DU EMS with or without a 5.11 Job Shirt

Pants: Navy Blue EMT Pants. Black belt must be worn at all times

Boots: Black EMS Boots preferred, but uniform-style plain black leather protected toe boots may be worn.



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SOG #: 4

Title: Injuries Procedure

Effective Date: October 31, 2018

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All injuries that occur during an emergency call, training session, or work detail, must be reported to the Campus Safety Supervisor immediately and then proceed to promptly inform the Assistant Chief of Operations. Proper medical treatment will be provided in accordance with DU Employee Policies.



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SOG #: 5

Title: Body Substance Isolation

Effective Date: October 31, 2018

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Recommended procedure is to be followed for all emergency calls where an EMT may come in contact with any type of bodily fluid, or where any possible exposure to communicable diseases exists.

Members should use extreme caution to not come in contact with instruments such as syringe needles, razor blades, knives, or broken glass, which may have come in contact with or carry an infectious disease.

Members should use extreme caution around victims with open wounds and/or victims that are nauseous or expectorating.

Any member coming in contact with a bodily fluid while wearing contaminated protective or personal clothing should remove them as soon as possible. Wash the affected skin area with waterless cleanser or soap. Wash clothing thoroughly with recommended cleaning solutions

Prevention for communicable disease exposure as follows:

All calls – nitrile exam gloves

Special call circumstances – nitrile exam gloves, particle masks, protective eye glasses

Exposure of bodily fluid to an open wound on any member should be immediately cleaned, reported to the supervisor, and proper medical attention (physician, paramedic, etc.) should be administered.

When returning from an incident, all equipment and clothing, should be decontaminated with antibacterial wipes, if necessary.



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SOG #: 6

Title: Apparatus Guidelines and Procedures

Effective Date: October 31, 2018

Last Revised: March 31, 2019

1. In addition to what is outlined within the Apparatus Guidelines and Protocols section, all DU EMS personnel shall adhere to the guidelines and policies set forth by the Department of Risk Management, specifically the Authorized Driver Policy, and the Department of Campus Safety Guidelines.
2. When available, EMS-1 shall always respond when dispatched by the University of Denver Campus Safety Dispatch Center.
3. Only personnel approved by DU EMS and the Department of Risk Management are permitted to drive DU EMS apparatus. The following requirements must be met prior to a member being approved to operate any DU EMS apparatus:
 - a) A prospective driver must submit an MVR check to the Department of Risk Management
 - b) A prospective driver must satisfactorily complete an online driver safety course as assigned by the university.
 - c) All drivers must have no major traffic violations on record
 - d) Note: MVR checks will be conducted on new members after acceptance into DU EMS.
4. When on or off campus, DU EMS apparatus may not be parked in a fire lane. Handicapped and reserved parking spots should always be avoided. When off-campus, apparatus may only be parked in legal parking spaces. If a parking ticket is issued on a DU EMS apparatus, it shall immediately be forwarded to the Campus Safety Supervisor, who will determine whether or not the driver is responsible for paying the fine.



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5. Whenever possible, the driver must have assistance backing the apparatus from another crew member. Drivers may not rely solely on a back-up camera if it is possible to have another crew member assist in backing. Drivers are responsible for any accidents that result from backing without a backer.
6. Before start of shift, DU EMS personnel must complete a 360° visual inspection of assigned apparatus whilst looking for any obvious signs of damage, oil leaks, or low tire pressure. Interior of apparatus must be clean and orderly. If there is personnel notice any of the aforementioned signs, report it to the Campus Safety Supervisor immediately.
7. Personal vehicles.
 - a) Under no circumstances should personnel of DU EMS respond to any emergencies that DU EMS is dispatched to in a non-DU EMS vehicle while acting as an on-duty member.
8. Motor Vehicle Accidents involving a DU EMS Vehicle
 - a) The following outlines the procedure to be followed in the event that a DU EMS apparatus is involved in a motor vehicle accident with another vehicle, stationary object, or pedestrian:
 - i. Campus Safety shall be notified immediately of the location, injuries involved, extent of damage, and operability of the vehicle and other involved vehicles and/or parties. A DPD officer shall be requested to the scene of the accident.
9. Passengers
 - a) Only DU EMS personnel and DU CSO personnel are permitted to ride in DU EMS apparatus.
 - b) Under no circumstance should there be any passengers in the apparatus.
10. Seatbelts should always be worn when the DU EMS vehicle is in motion.
11. Eating and/or Smoking in DU EMS Vehicles



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- a) At no time should there be any food or drink items in any of the DU EMS vehicles. Smoking is prohibited at all times in all areas whilst on shift.
- 7. All department vehicles are to be refueled anytime the tank is 3/4 or below before the end of shift.



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SOG #: 7

Title: Patient Rights and Patient Advocacy

Effective Date: October 31, 2018

Last Revised: March 31, 2019

It is the responsibility of every DU EMS personnel to act in the best interest of every patient that DU EMS personnel encounter at all times and to act as the patient's advocate when necessary.

The following policies serve as guidelines to promote this action:

1. Patient Abandonment:
 - a. At no time shall any personnel of DU EMS make patient contact and then leave the patient unattended for any reason until care is transferred to a higher level of care. If the accompanying Campus Safety Officer deems the scene to be no longer safe, the DU EMS member shall follow the Campus Safety Officer's instructions regarding personal safety in accordance to SOG #8, Section 5A.
2. Patient Confidentiality
 - a. The strictest standards maintaining patient confidentiality must be upheld at all times when on-duty and off-duty by DU EMS personnel. At no time other than when directly involved in the emergency or when administrative action is initiated concerning a patient shall a duty-crew member divulge a patient's name or location of an incident to any other person. The nature of a medical emergency may be discussed among members of DU EMS only if the discussion has value towards medical education. At all times, members must ensure that bystanders cannot overhear such discussion. Patient Health Information must be protected at all times. Annual training concerning these issues shall be conducted for every member, and a signed statement of confidentiality must be renewed yearly.



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3. Patient Transportation Policy

- a. Under no circumstance shall a patient be placed in a DU EMS vehicle with the only exception being extreme circumstances such as cold exposure. Consult with a Campus Safety Officer for any situation.

4. Patient Belongings

- a. All possessions belonging to patients that DU EMS personnel made patient contact with shall be respected and protected until they may be transferred to paramedics or police and/or campus safety on-scene. No DU EMS personnel shall ever open a patient's purse or wallet in order to ascertain information unless given explicit permission by the patient. Personnel may request the patient, a friend of the patient, or police/campus safety personnel to open such belongings only if information is absolutely necessary. Any handling of patient's valuables must be carefully documented in the Patient Care Report.

5. Patient Refusal

- a. DU EMS must wait for ALS (Advanced Life Support) to evaluate the patient and determine appropriate care in cases where there is a patient refusal. If the patient is competent and sober, DU EMS shall call for a code-14 (non-emergent) and wait unless told otherwise by the accompanying Campus Safety Officer. If the patient exhibits any signs or symptoms of acute alcohol intoxication or any other condition in which a higher level of care is needed urgently, a code-14 will be called emergent.



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SOG #: 8

Title: Scene Management

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Last Revised: March 31, 2019

Scene safety is always the top priority.

1. Crime Scenes

- a) Any possible sources of evidence on any crime scene shall not be disturbed by on-duty DU EMS personnel unless absolutely necessary in life-saving efforts. Personnel must take all precautions to preserve the integrity of the crime scene and document any necessary disturbance of evidence.

2. Cooperation with Law Enforcement Personnel

- a) When law enforcement personnel are on-scene with DU EMS during a medical emergency call, they must be treated courteously and respectfully. Members should keep in mind that officers may be used for purposes of patient restraint and scene control if necessary. DU EMS personnel should follow all commands of Campus Safety Officers at all times.

3. Advanced Life Support (ALS) On-Scene

- a) In general, Denver Health and other ALS emergency units are staffed with a higher level of emergency medical personnel and equipment than the DU EMS unit. Patient care should always be transferred to Denver Health personnel or other responding ALS agencies if one of their units arrives on-scene with DU EMS. DU EMS personnel shall provide a hand off report and should lend all assistance necessary while on-scene, as long as dispatch is notified that DU EMS is available for another call and is only assisting Denver Health.



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4. Simultaneous Calls

- a) In the event that DU EMS has already been dispatched to or is on-scene for a medical emergency and is notified of another emergency, the DU EMS personnel or Campus Safety Officer in charge shall advise the Campus Safety Dispatch to call for an ALS unit to the call.

5. Multiple Patients

- a) In the event of multiple patients, DU EMS personnel shall notify dispatch and request as many ALS units as DU EMS personnel or the Campus Safety Supervisor deems fit to handle the call.

6. Providing Medical Advice/Care When Off-Duty

- a) If a potential patient contacts a member of DU EMS for medical advice or care, the following should occur: If an EMT member is approached by a potential patient who is requesting medical care, the member must summon the duty-crew no matter the nature of the illness. Phone consultations or the giving of medical advice without seeing the patient should be avoided. Instead, a member should advise the patient to activate DU EMS or visit the Health and Counseling Center if they are unsure of whether or not an ambulance will be necessary.



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SOG #: 9

Title: On-Duty Crew Procedure

Effective Date: October 31, 2018

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Start of Shift Procedure

DU EMS personnel shall arrive approximately five minutes before the start of shift. Upon arrival, personnel shall rendezvous in the Campus Safety Training Room 005. At which point, personnel will report to the second-floor conference room to retrieve portable radio batteries and supplies, if needed, contact Dispatch (ext. 1-2334) for the Campus Safety Supervisor to retrieve locker key, vehicle key, and medical bag. Personnel will pick up the Harris batteries and will clock in on the Kronos system, no sooner than five minutes before start of shift. At which point, personnel will proceed to CSO Training Room to pick up radio holster, if needed, radio units, PCR clipboard, and Hi-Vis Jackets, if needed. Personnel will then proceed to the vehicle bay, to inspect the vehicle for obvious signs: leaks of any kind, damage, and make sure the interior is clean and orderly. See Shift Change Procedure (SOG 13) for proper vehicle inspection. Personnel will then inform Campus Safety Dispatch that EMS-1 is in service using the following radio communication procedure.

EMS-1: EMS-1

CS Dispatch: EMS-1

EMS-1: EMS-1 is in service in vehicle number 791 with starting mileage 36278

CS Dispatch: Copy EMS-1. [Time Stamp]

If there is a change in personnel between shift A and B. Follow the shift change procedure.



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During Shift Procedure

On-duty personnel will perform AED Checks, Naloxone Implementation, and/or various trainings and community engagement events as requested by Assistant Chief of Operations.

On-duty personnel will remain in service during the duration of their shift and will follow all appropriate guidelines. If personnel leave Campus Safety Training Room, personnel will inform dispatch using proper radio procedures.

On-duty personnel will fill out all appropriate PCRs, call logs, and incident reports, if needed, in a timely fashion. Patient Care Reports must be completed by the end of shift and turned in to Campus Safety **Officer** Supervisor.

End of Shift Procedure

At the end of shift, personnel shall ensure that the vehicle is at the appropriate fuel level and clean. Personnel shall park it in the designated spot and remove all belongings from it. Personnel shall inform Campus Safety Dispatch that EMS-1 is out of service by the following radio communication procedure.

EMS-1: EMS-1

CS Dispatch: EMS-1

EMS-1: EMS-1 is out of service in vehicle number 791 with ending mileage 36290

CS Dispatch: Copy EMS-1. [Time Stamp].

Personnel shall place the PCR binder, radio units, radio holsters in the cabinet in their designated positions in the cabinet. Personnel shall ensure that the Hi-Vis Jackets are neatly placed in the cabinet. Personnel shall go to the second-floor and return the batteries, clock out, and return the locker key, vehicle key, and PCR(s) to the Campus Safety Officer Supervisor.



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SOG #: 10

Title: Emergency Medical Call Guidelines

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Campus Safety Dispatch Center shall contact EMS-1 through the radio for all emergency calls. At no time shall personnel on duty self-dispatch themselves to the call. Personnel shall respond to the location using the most direct and appropriate route. Personnel shall travel to the scene of emergency with due regard to traffic and pedestrians and adhere to all traffic laws while driving. Once personnel are on scene, they shall call code-6 on the radio. Personnel shall follow the Apparatus Guideline and Procedure SOG #6 at all times. Under no circumstance should DU EMS personnel make patient contact without the accompaniment of a Campus Safety Officer. Once patient contact is made, always maintain Body Substance Isolation Protocol and Scene Safety and all personnel should adhere to the American Heart Association Basic Life Support First Aid, CPR, and AED Guidelines. If needed, DU EMS personnel shall call code-14, either emergent or non-emergent, at the personnel or Campus Safety Officer's discretion.



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SOG #: 11

Title: Community Engagement Guidelines

Effective Date: October 31, 2018

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DU EMS personnel are encouraged to engage in planned community outreach activities, as long as the Campus Safety Supervisor is informed.

DU EMS personnel must be available for calls at all times and will leave the event, if, necessary to respond.

DU EMS personnel should bring their assigned vehicle with them and should park the vehicle in accordance to the Apparatus Guideline and Procedure SOG #6. DU EMS personnel may choose to keep the medical bag with them, or they can leave it in the locked car if they so choose.

DU EMS personnel shall inform the Campus Safety Dispatch Center with their location and what event they are performing

ie) “EMS-1 code-6 at Centennial Halls for Community Outreach”

After the event is over, DU EMS personnel shall call in-service with the updated location.



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SOG #: 12

Title: AED Unit Inspections and Naloxone Unit Inspections

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All DU EMS personnel shall be expected to perform AED Unit Inspections and Naloxone Unit Inspections.

Personnel shall receive their assignments from the Assistant Chief of Operations prior to shift and are expected to complete the inspection by the end of shift.

Personnel shall call Campus Safety Dispatch with the detail

ie) EMS-1 code-6 at Driscoll for an AED Check.

Personnel shall call code-6 once on scene of the location

IE) EMS-1 is code-6 at Driscoll

Personnel shall call dispatch to unlock doors, if required. The door number will be printed on the upper right or left hand of the door.

IE) EMS-1, door admit, 00098 at Driscoll

NOTE: When repeating the door number, repeat the number on a number by number basis

IE) Door number zero-zero-zero-nine-eight

AED checks will be checked for expiration date, if all materials are visible/present, if the flashing green light is flashing. DO NOT TURN THE AED ON. If the AED fails a check, report it on the sheet and inform the Assistant Chief of Operations. After the checks, fill out the checklist provided in the clipboard. Once back at base, submit a report through the Member's Only Page.

Personnel shall update dispatch whenever they are in-service and will to update dispatch if going to another location or going back to base.



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SOG #: 13

Title: Shift Change Procedure

Effective Date: October 31, 2018

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1. Attendance

- a) All DU EMS personnel must be present at shift change.
- b) The only exception is if the previous crew is currently on a medical call. At that point, the on-coming personnel shall wait for the crew to return. Once the outgoing crew have returned, the on-coming crew shall clock in, obtain the handoff report, and begin their start of shift procedure.
- c) All DU EMS personnel are expected to attend the bi-weekly crew meeting. Attendance is mandatory unless personnel provide an acceptable excuse to the Assistant Chief of Operations.

2. Responsibilities at Shift Change

- a) Personnel must be in full uniform and possess all items expected to be carried by an on-duty DU EMS personnel. The off-going crew must stay in service until relieved by on-coming crew. At each shift change, the on-going and off-going crews must hand over the vehicle keys, radio locker key, radio(s) w/ radio holster, and med bag. The off-going crew must give a handoff report to on-coming crew detailing the nature of calls they received, equipment used, issues encountered, any apparatus updates (e.g. low tire pressure, refueling, pre-existing damage to the car, or cleanliness of car) and any safety hazards pertaining to DU EMS personnel.

3. Shift Schedule

- a) Shift change occurs at 2300 unless both DU EMS personnel members are working from 1900 to 0300.



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4. Member(s) Not Present at Shift Change

- a) If a crew member is more than fifteen minutes late for shift change without prior notice to the Assistant Chief of Logistics, he or she will be considered not present at shift change. In the case that a member is not present at shift change, an incident report shall be filed out by another DU EMS personnel on shift and will be sent to the Campus Safety Supervisor for appropriate action.
- b) In the event that personnel do not arrive for a scheduled shift change or arranged shift change, and the current on-duty personnel cannot stay on-duty, the following should occur:
 - i) The person scheduled should be contacted using any means necessary. The Assistant Chief of Operations should also immediately be contacted and informed of the DU EMS personnel absence. If the Assistant Chief of Operations cannot be reached, contact the President.
 - ii) The Assistant Chief of Operations and President will then contact other DU EMS personnel to fill the vacant spot.
 - iii) If no other member can be contacted, and there are not two EMTs on the crew, DU EMS must be placed out of service by informing dispatch and the Campus Safety Officer in charge until a crew can be formed.



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SOG #: 14

Title: Scheduling for Duty

Effective Date: October 31, 2018

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All personnel shall bid for their desired shifts prior to the start of the next month on WhenToWork. The Assistant Chief of Operations shall schedule all employees and will deal with any issue that may arise. If there are any problems with overall scheduling, members will contact the Assistant Chief of Operations.



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SOG #: 15

Title: DU EMS Equipment

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1. Keys

- a) At the start of shift, DU EMS personnel will collect the DU EMS locker keys and vehicle keys from the Campus Safety Officer Supervisor. These keys will be the responsibility of the on-duty personnel while on shift and must be returned to the respective Campus Safety Officer at the end of shift. If a shift change occurs, the keys will be given to the oncoming personnel.

2. Radios

- a) All personnel in possession of a personal radio or radio equipment such as a radio holster, radio extension, radio batteries, or a battery charger shall be required to collect the equipment at the start of shift and return it to its respective location at the end of shift. Radios, holsters, and radio extensions should be returned to the training room locker while the radio battery should be returned to the radio battery charging station in the Campus Safety Building on the second floor.

3. Medical Equipment to be Brought On-Scene

- a) Radios, medical bag, and notepad must be brought on every call. Medical bags must be inspected prior to calling in-service for proper stocking and function of medical equipment. The AED must be inspected for damage and checked to make sure there is sufficient battery power. Anything missing, damaged or broken must be reported to the Campus Safety Officer Supervisor immediately.



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4. Vehicle Equipment Checks

- a) Vehicles must be checked at the beginning of each shift and before being called in service. Checks must include making sure gas is greater than three-quarter full, windshield wipers are functioning, headlights work, tire pressure is adequate, vehicle starts without problem and does not have any maintenance needs that would affect the safety of those driving the vehicle. Vehicles must be backed, while using a backer, into the parking spot next to the double doors for quick access to the vehicle during a call and med bags must be placed in the vehicle at the start of every shift.

5. Loss or Damage of Organization Property

- b) In all cases regarding the loss or damage of organization property, an incident report shall be written and then forwarded to the Assistant Chief of Operations, who shall then forward copies to Campus Safety administrators. The Campus Safety Officer Supervisor must also be notified immediately of any damage to, or loss of property.



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SOG #: 16

Title: Communication Procedures

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1) Radio Communication Policy

- a) All DU EMS radio communications must be compliant with Federal Communications Commission (FCC) regulations at all times. DU EMS personnel must ensure that all radio channels are clear of traffic before attempting to transmit. At no time will profanity, full names, or protected patient health information be transmitted over any frequency. Unit assignment numbers shall always be used instead of names. The transmitting party shall identify himself/herself first and then call the unit number of the personnel intended to receive the message (e.g.: “EMS-1 to Charlie-3”). In the event that personnel are attempting to make contact with Campus Safety Dispatch, the transmitting party must first identify themselves and wait for a response from dispatch before going ahead with traffic.

i) e.g.

(1) Transmitting member: “EMS-1”

(2) Dispatch: “EMS-1”

(3) Transmitting member: “We will be out doing training on the north side of campus and will remain in-service”

(4) Dispatch: “[Time Stamp]”

2) Method of Dispatching DU EMS

- a) When dispatching DU EMS to a medical emergency, the dispatcher shall follow this procedure:
 - i) Dispatch shall say “EMS-1” over the radio. The dispatcher shall wait for DU EMS to respond before proceeding.



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- ii) Personnel shall respond: “EMS-1”
 - iii) The dispatcher will after this initial response from DU EMS, provide all pertinent information to DU EMS following this format: “Respond to (location) for a (age and sex) complaining of (chief medical complaint of patient). [Any additional pertinent information shall be provided after this initial dispatch sentence has been given.] This will be the “dispatch time”.
 - iv) Personnel shall acknowledge the dispatch information and transmit “Clear” to dispatch and request any additional information at this time (if needed).
 - v) On-shift personnel will then get in their vehicle and respond in a timely and appropriate manor. This will be the “responding time”.
- 3) Individual Radio Responsibility
- a) It shall be the responsibility of the on-duty personnel to obtain any additional information from the dispatcher (if possible) depending on the nature of the dispatch including, but not limited to: Is the patient conscious? Is the patient breathing? Is this drug or alcohol related? Is the patient still seizing? Is the patient combative? Are Campus Safety Officers on scene? At no time shall DU EMS members make patient contact without being escorted by at least one Campus Safety Officer.
- 4) When DU EMS personnel arrive on scene at a medical emergency, it is the on-duty personnel’s responsibility to notify the dispatcher that “EMS-1 is Code-6.”
- a) A member is on scene when any of the following conditions are met:
 - i) Patient contact is made
 - ii) If in a building, personnel is at the same building as the dispatched location
 - iii) If a member can visually see the patient
- 5) Scene Safety Notification
- a) It is to be reiterated that DU EMS and Campus Safety protocols forbid on-duty personnel to proceed on-scene to any call in which dangerous or austere conditions may be encountered. This includes, but is not limited to battery, assault, suicide, homicide, fires



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and/or explosions, fights, riots, and mental disturbances. In this scenario, DU EMS personnel will request for a scene safety check from the dispatcher prior to going on-scene. Regardless of potential danger, it is required that DU EMS personnel make contact with a Campus Safety Officer before entering onto any scene. This policy is strictly enforced.

6) Recording of Call Status Times

- a) There are seven times expected for any call in which DU EMS responds to a patient for the purpose of documentation. DU EMS personnel may call dispatch to ascertain time information.
 - i) Dispatch
 - ii) Responding
 - iii) On Scene Time
 - iv) Patient Contact Time
 - v) ALS Dispatch Time (if code 14 is called)
 - vi) ALS Patient Contact Time
 - vii) Back in-Service Time



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SOG #: 17

Title: Documentation Procedure

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Patient Care Reports (PCR)

- 1) The DU EMS PCR is a legal medical document and is governed and protected under the medical records laws for the State of Colorado. In order to protect the legal rights and confidentiality of our patients, the information provided on this document is only available to the pertinent medical personnel. Any individual outside the normal distribution of this document requesting information shall be referred to Campus Safety Administrators for access. In general, the following guidelines must be followed for the entire run report:
 - i) A Call Log Entry must be generated every time DU EMS goes out on a call: whether it be an Emergency Medical Call, Community Outreach, AED Checks, or for anything dispatched to DU EMS. Upon arrival on the scene, EMS may be canceled before patient contact is made. In the event that DU EMS is canceled while en-route, a PCR will still be generated, and a call log must still be filled out.
 - ii) If patient contact is made, a PCR must be filled out in addition to a call log entry.
- b) All components of any report shall be written in blue or black ink, preferably in block letters (example: BLOCK LETTERS) and must be legible. Script is only appropriate for signatures at the bottom of the report.
- c) Corrections on the report may be made by crossing out the error with a single horizontal line. The reporting EMT must initial all such corrections. Never scribble, black out, or erase any information.
- d) Margins of the report shall not be used for notes or comments for any reason. The report must be completed as neatly as possible.



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- e) The PCR should always be filled out by the primary care technician. Under no circumstances may another member fill out any part of or complete a PCR unless they were the primary care technician for that patient.
 - f) PCR reports and call log entries must be completed and turned into the Campus Safety Supervisor before the End of Shift.
5. Incident Reports
- g) For any incident that warrants such action, an incident report may be completed documenting an incident, using incident report forms to be provided by the Assistant Chief of Operations
- 2) Near-Miss Reports
- a) For any potential incident (such as almost hitting another vehicle, animal, pedestrian, for almost performing a wrong medical procedure, or for dropping a patient) that warrants such action, may be completed using a near-miss reporting form to be provided by the Assistant Chief of Operations



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SOG #: 18

Title: Resources

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- 1) AHA Guidelines for First Responders: <https://eccguidelines.heart.org/wp-content/themes/eccstaging/dompdf-master/pdf/files/part-15-first-aid.pdf>
- 2) Denver Metro Protocols: <http://www.dmemsmd.org/protocols>
 - a) http://www.dmemsmd.org/sites/default/files/Denver%20Metro%20Protocols%20January%202019_0.pdf
- 3) Denver Metro Protocol Changes:
 - a) http://www.dmemsmd.org/sites/default/files/2019_January_DMESMD_ListofChanges_0.pdf
- 4) Location of Call Logs, Incident Reports, Near-Miss Reports: www.du-ems.org
 - i) Found Under Members Only Page



University of Denver

Emergency Medical Service



Standard Operating Guidelines and Procedures Handbook

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Marius Rosu	March 31, 2019	All SOG revision