



Title Awake and Breathing	Date 06/02/2022
CDE Discipline Medical	CDE Credit Hours .5

I verify that I have read or have watched the contents of this document or video and am familiar.

Please return this to your agency's training coordinator for CDE credit. If you have any questions, please contact us at 911training@elpasoteller911.org

X _____

Signature

DATE

X _____

Printed Name

X _____

Agency

AWAKE AND BREATHING

BACK TO THE BASICS



ASK AWAKE AND BREATHING SEPARATELY

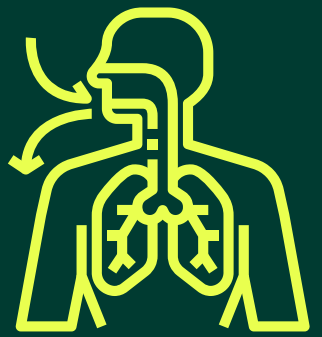
UPS I (AS WRITTEN)

Awake and Breathing are to be read as separate questions. If we combine the questions, it can be confusing to the caller. You, as the calltaker, would not know which question was being answered.

1ST PARTY CALLERS

CASE ENTRY STANDARD 2 (FIRST-PARTY CALLERS)

Awake and Breathing are considered obvious when you speak to a 1st party caller. However, in case entry, if a 1st party caller has INEFFECTIVE Breathing, go back and change the answer to "Is he breathing?" to INEFFECTIVE/AGONAL in ProQA.



4. **1st party callers** using phrases like "I can't breathe" or "I can barely breathe" may be further assessed by their ability to speak normally or in complete sentences, their level of apparent distress or agitation, and the presence of airway noises (i.e., stridor, wheezing, gasping, etc.). **Breathing effectiveness ranges from** normal breathing to mild shortness of breath to **DIFFICULTY SPEAKING BETWEEN BREATHS** to fighting for air (**INEFFECTIVE BREATHING**). When in doubt, the EMD should err on the side of patient safety.

WHEN IS IT OBVIOUS FOR OTHER SITUATIONS?

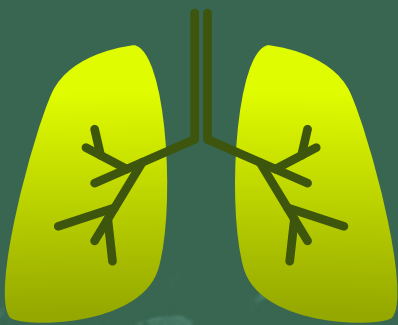
- WHEN AN ANSWER TO A SPECIFIC QUESTION HAS ALREADY BEEN EXPLICITLY STATED BY THE CALLER OR SPONTANEOUSLY PROVIDED (EXAMPLES: SHE IS AWAKE. SHE IS BREATHING. SHE IS CONSCIOUS.)
- IF YOU CAN GUARANTEE (WITHOUT ASKING TO AVOID A FREELANCE QUESTION) THAT THE PATIENT IS IN THE BACKGROUND

PLEASE CLARIFY WHEN:

- CALLER ANSWERS AMBIGUOUSLY/DOESN'T REALLY ANSWER THE QUESTION
- THE CALLER DOES NOT UNDERSTAND THE QUESTION
- THE CALLER DOESN'T ANSWER AFTER A REASONABLE AMOUNT OF TIME.



OTHER RELATED INFORMATION:



INEFFECTIVE BREATHING

The following, or reasonable equivalents, when volunteered at any point during Case Entry (code as ECHO on 2, 6, 9, 11, 15, 31):

- "Barely breathing"
- "Can't breathe at all"
- "Fighting for air"
- "Gasping for air" (**AGONAL BREATHING**)
- "Just a little" (**AGONAL BREATHING**)
- "Making funny noises" (**AGONAL BREATHING**)
- "Not breathing"
- "Turning blue" or "Turning purple"

2. **Unknown breathing** status indicates a **3rd or 4th party** caller who cannot personally verify the patient's status.

9. If the Chief Complaint and status of **consciousness and breathing are unknown** initially (**3rd party caller**), go to Protocol 32.

If consciousness is **unknown**, immediately **verify** whether the patient is **breathing**.

Frenza's Law

A thing not looked for is seldom found.

1. Often, unknown problem calls are 3rd party. Obtaining specific symptoms may be difficult; however, a **problem isn't "unknown" until all required questioning has been completed.**

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