Who To Contact

The director of your Public Safety Answering Point (PSAP) is a good source of information about the 9-1-1 system. The PSAP director is also the person to contact to answer any questions or concerns about specific medical calls your facility has made to 9-1-1.

Maine EMS (the Bureau of Emergency Medical Services within the Maine Department of Public Safety) is the licensing authority for Maine’s Emergency Medical Dispatch (EMD) System. Questions and concerns about the EMD system may be directed to the Maine EMS staff.

Quick Reference Guide
For Calling an Ambulance

Call 9-1-1 = if the patient needs evaluation or stabilization at a hospital for an illness of injury.

Call Dispatch Non-Emergency Tel.# or EMS Service Directly = If the patient is being transported for routine procedures, tests, check-ups or relocation.

The number to call for a non 9-1-1 ambulance response is:

Write in non-emergency tel.# to call for non-emergency transfers.

Avoid medical terminology, if possible (use plain English)

Be prepared to answer questions asked by the dispatcher, including (but not limited to) the following:

- What’s the address (of the emergency/transfer? 
- What is the phone number you’re calling from?
- Okay, tell me exactly what happened
  - Avoid lengthy descriptions
- Are you with the patient now?
- How old is the patient?
- Is the patient male or female?
- Is the patient awake
- Is the patient breathing
- Was the patient seen by a nurse or doctor within the last two hours?

Your cooperation, patience and understanding will minimize dispatch time and help ensure the best medical care for the patient.

EMS Response to Health Care Facilities

A Health Care Facilities Guide to Accessing Emergency Medical Services (EMS) Through Maine’s 9-1-1 system.
Introduction:
This brochure was created to assist health care facilities, physicians’ offices and other health-care-related organizations that may require ambulance transport for one of its patients. The brochure:

- Describes Maine’s 9-1-1 system;
- Gives examples of when to use – and when not to use the 9-1-1 system for obtaining an ambulance response to your facility; and
- Provides an overview of the Emergency Medical Dispatch protocol used by Maine’s Public Safety Answering Points (PSAPs).

Maine’s 9-1-1 System
Maine’s 9-1-1 system handles well over 650,000 9-1-1 calls each year. Calls are received at one of twenty-six Public Safety Answering Points (PSAPs) and are dispatched by the PSAP or by a local dispatch center in your community.

When Should Our Facility Call 9-1-1
You should call 9-1-1 anytime you have a medical, fire or police emergency.

Specifically, for medical calls, call 9-1-1 when a patient requires evaluation or stabilization for an acute or chronic problem.

You should not use 9-1-1 for stable patients being transported for routine procedures, check-ups or relocation. Instead, use the dispatch center’s non-emergency business line or contact the ambulance service directly through its business line.

Emergency Medical Dispatch
In order to ensure consistent service to the public, dispatchers are licensed by the State as Emergency Medical Dispatchers. Emergency Medical Dispatchers use carefully scripted protocols to determine the nature of a medical emergency, provide necessary information to emergency medical services (EMS) personnel responding to the scene and provide pre-arrival instructions that may include how to perform CPR, clear an obstructed airway.

When you call 9-1-1, the dispatcher will start by asking for the address of the emergency and the phone number from which you’re calling. If you are disconnected, the dispatcher has the address to which to send first responders and a phone number where you can be reached.

Although you may have called on behalf of your patients many times before, please do not become upset or indignant that the dispatcher “should know where we are and what our phone number is”. Remember that the dispatchers handle dozens of calls each day and use a scripted protocol to ensure consistent service.

You’ll also be asked:

“Okay, tell me exactly what happened”

- A detailed medical history is not required, just what occurred that caused you to call for the ambulance (e.g., “the patient is experiencing difficulty breathing”, “the patient is having chest pain that started during a stress test”). Please avoid the use of medical terminology, when describing the patient’s conditions – be succinct and use “plain” English, to the extent possible.

“Are you with the patient now?”
“How old is the patient”
“Is the patient male or female”
“Is he (the patient awake)”
“Is he breathing”

- The aforementioned questions are asked of all callers. Although it takes a matter of seconds for the questions to be asked and the responses given, it’s important to remember that the dispatcher is typing this information into the computerized dispatch system and the process may take a few seconds longer than you expect.

“Was the Patient seen by a nurse or doctor within the last two hours”

- If the patient has been assessed by a nurse or doctor in the previous two hours, fewer additional questions are asked. Otherwise, the emergency medical dispatcher asks additional questions to better alert responders about the patient’s status and to determine whether the patient will benefit from pre-arrival instructions that the dispatcher can give to the caller over the phone.

Thanks
Thank you for taking the time to read this brochure. Your understanding and cooperation with emergency medical dispatchers will help ensure that your patients receive the very best medical care.