1. Use appropriate PPE precautions – gloves for all patients and additional protective equipment prn

2. Assess scene for potential hazards and number of adult and pediatric patients

3. Activate additional resources prn (e.g. EMS personnel, HAZMAT, law enforcement)

4. Perform patient assessment to determine Provider Impression. Refer to appropriate Treatment Protocol(s) to guide patient management *(Ref. 1200, Treatment Protocols Table of Contents)*

5. For pediatric patients, assessment should be performed per *MCG 1350* and include determination of the patient’s weight in kg *(MCG 1309)*

6. If after complete assessment there is no medical or psychiatric complaint and no signs of trauma or illness – document *No Medical Complaint* 

7. **CONTACT BASE** if difficulty in determining Provider Impression or appropriate protocol to use

8. Continue assessment and treat per *TP 1202-P, General Medical* until the Provider Impression is established, at which point the appropriate treatment protocol should be used
SPECIAL CONSIDERATIONS

1. EMS personnel are mandated reporters of child abuse and neglect, and a report should be made when suspected as per Ref. 822. Communicate suspicion for child abuse and/or neglect to accepting ED staff when home suggests children could be at risk for harm (e.g., unkempt home, evidence of drug or alcohol abuse, unsafe living conditions, known or suspected domestic violence), when the history does not match with the severity of physical findings (e.g., child posturing after a roll off the couch), when patterned injury or burns are noted (e.g., circular burns as from a cigarette, whip marks on the skin, burns of both hands or feet), or when child reports physical or sexual abuse. Children < 3 years of age and those with developmental delay are at increased risk of abuse. This must also be accompanied by notification to the Department of Children and Family Service (DCFS).

2. Parents/caregivers can be concerned about signs and symptoms in children which may not show at the time of paramedic assessment. This does not exclude the possibility that an emergency exists. If there are no physical signs and the complaint does not otherwise have a provider impression associated with it - document No Medical Complaint.

If parents/caregivers have ongoing concerns these patients require transport to an EDAP for evaluation.