

## COMMUNITY EMERGENCY MEDICINE SERVICE

Conditions we can help you with	Standard CEMS crew adds	CEMS crew may add (crew dependant)
Abdominal Pain	Advanced assessment Limited blood tests Access to alternative pathways	Ultrasound for AAA rule-out
Allergies/Anaphlyaxis	Initial emergency treatment Second line emergency treatments Assessment and scene discharge for less severe cases	Advanced airway intervention
Back pain	Advanced assessment Enhanced analgesia Supply of analgesia for home use Referral to community services e.g. OT/physio	
Breathing problems	Advanced assessment Supply of antibiotics/steroids for home use Blood gas testing Access to non-ED pathways Shared decision making with patient about community or hospital disposition Liaison with community services Referral direct to specialties ReSPECT form/ceiling of care planning	Chest ultrasound
Burns	Initial emergency treatment Advanced assessment Enhanced analgesia Supply of analgesia for home use Direct referral to burns unit	Critical care skills including pre- hospital emergency anaesthetic Advanced airway intervention Surgical Airway (will become core skill)
Cardiac Arrest	Initial response Advanced life support Post-resuscitation Care Consideration of termination of resuscitation Cardiac arrest leadership Blood gases	Critical care skills including pre- hospital emergency anaesthetic Ultrasound Echo in life support Intubation
Chest pain	Initial response and emergency treatment Advanced assessment	Chest ultrasound
Choking	Initial response and emergency treatment	Intubation Surgical airway
Seizures	Initial response and emergency treatment Second line emergency treatment Advanced assessment Liaison with community services	Critical care skills including pre- hospital emergency anaesthetic



## COMMUNITY EMERGENCY MEDICINE SERVICE

Condition	Standard CEMS crew adds	CEMS crew may add (crew dependant)
Diabetic problems	Advanced assessment Blood tests/blood gases/ketone test Prescribing Liaison with community services Access to alternative pathways Direct referral to specialties	
Eye problems	Advanced assessment Direct referral to specialties	
Falls (Consider LIVES Falls team)	Advanced assessment Blood testing Liaison with community services	
Headache	Advanced assessment Supply of analgesia for home Direct referral to specialties and non-ED pathways	
Cardiac Arrhythmias	Initial response and emergency treatment Advanced assessment Pacing and cardioversion Direct specialty referrals/access to virtual wards	
Haemorrhage/Wounds	Initial response and emergency treatment Advanced assessment Wound care (glue, sutures, staples) Management of severe nose bleeds Access to community services Direct specialty referrals Enhanced medications	
Overdose/Poisoning	Initial response and emergency treatment Advanced assessment Blood gas testing	Critical care skills including pre- hospital emergency anaesthesia
Maternity Emergencies	Initial response and emergency treatment Emergency childbirth management In early pregnancy- pregnancy testing, referral to specialist pathways	More advanced pre-hospital obstetric training e.g. for shoulder dystocia/breech Resuscitative hysterotomy
Mental Health	Advanced assessment Liaison with community pathways	Sedation for Acute Behavioural Disturbance (will become a core skill)



## COMMUNITY EMERGENCY MEDICINE SERVICE

Condition	Standard CEMS crew adds	CEMS crew may add (crew dependant)
Sick Person/Other	Advanced assessment Blood tests Ultrasound Prescriptions/medication supply Catheterisation Access to virtual wards	
Stroke	Initial response and assessment Identification of stroke mimics Access to TIA pathways **Timely transport to hospital is the priority in acute FAST+ stroke**	
End of life care	Discussion around best interests and patient preference at end of life Liaison with community teams Initiation of end of life just-in-case medications Completion of ReSPECT form	
Limb injuries	Advanced assessment Enhanced analgesia Antibiotics for open fractures Benecast splinting	Procedural sedation for limb manipulation (will become core skill)
Head injuries	Advanced assessment Decision making in complex cases (e.g. elderly on anticoagulants) Scene discharge if no indication for CT scan	Critical care skills including pre- hospital emergency anaesthesia
Major trauma	Pre-Hospital trauma management skills (minimum PHTLS) Enhanced analgesia	FAST Ultrasound scanning Critical care skills including pre- hospital emergency anaesthetic and emergency surgical skills
Unconscious patient	Advanced assessment Blood tests/blood gases Consideration of end-of-life care	Intubation Critical care skills including pre- hospital emergency anaesthetic
Inter-Hospital Transfer	Monitoring and treatment as per rest of CEMS skillset Emergency response to UTC etc	Assistance with complex patient transfer needs- discuss with crew prior to dispatch
Major incident	Initial response if closest (first crew on-scene) Triage Direct patient care (may specifically be useful for P3 patient scene discharge and signposting)	

LIVES. COMMUNITY EMERGENCY MEDICINE SERVICE

## HOW TO REQUEST US

CREW ON SCENE? IF CEMS CAN PROVIDE SUPPORT

CONTACT CONTROL AND REQUEST CEMS CALL BACK/ ATTENDANCE AS NEEDED

CEMS AVAILABLE WILL CALL CREW TO DISCUSS CASE/OFFER REMOTE SUPPORT CEMS AVAILABLECEMS UNAVAILABLEWILL ATTENDDUE TO DEMANDSCENE(SORRY WE TRY

EMS UNAVAILABLE DUE TO DEMAND (SORRY WE TRY OUR BEST TO SUPPORT ALL CREWS)

ANY QUESTIONS? PLEASE DON'T HESITATE TO ASK ANY OF OUR TEAMS ON THE ROAD

ANY FEEDBACK PLEASE EMAIL FEEDBACK@LIVES.ORG.UK OR CALL 01507 525999

LIVES.ORG.UK