

## A. Introduction

Individuals with autism spectrum disorders may respond differently to certain stimuli and medical examinations. It is crucial for EMS providers to be able to recognize certain signs that may indicate the patient is on the spectrum, and modify their treatment approach accordingly whenever possible. Reasonable accommodations should be made, without compromising patient care according to protocols.

## B. Procedure

### EMR/BLS

#### 1. Initial Assessment/Care Protocol 1.

**NOTE: Remember to treat all patients with dignity and respect, and be mindful of the patient's individual needs and circumstances.**

- a) **Ensure safety:** If the patient is in a dangerous environment, move them to a safe location. Be mindful of any environmental factors that could exacerbate the patient's condition, such as extreme temperatures, loud noises, or bright lights.
- b) **Assess the patient's condition:** Approach the patient calmly and assess their level of consciousness, breathing, pulse, and other vital signs. Be cautious of touching the patient. When possible, ask and proceed slowly. Take your time to show the equipment, and explain your actions. Demonstrate use of equipment if possible.
- c) **Determine the patient's special needs:** Ask the patient or their caregiver about any special needs or accommodations they require, such as communication devices, mobility aids, medications, or emotional support animals. Be on the lookout for medical bracelet/necklace, or other personal items that could have additional information.
- d) **Communicate effectively:** Speak clearly and calmly, use simple language, and be patient. If the patient has communication difficulties, use alternative communication methods such as written notes or sign language interpreters. Engage family members and/or caregivers to assist with communication.

**NOTE: Visual cues can be very helpful (i.e. pointing on yourself or someone else) or communication cards/devices.**

- e) **Provide appropriate care:** Provide all necessary medical treatment according to protocols, while still taking into account the patient's special needs.
- f) **Consider transportation needs:** Determine the most appropriate method of transportation for the patient, taking into account their special needs. If necessary, arrange for a specialized ambulance or transport vehicle equipped with the necessary equipment and accommodations.
- g) **Document the patient's special needs:** Record the patient's special needs in the narrative section of the patient care report, along with any relevant medical information, treatment provided, or modifications needed.

2. Use the [MDFR Sensory Bag](#) to calm and reassure the patient.
  - a) Headphones (Help patients filter out sensory input and reduce sensory overload)
  - b) Fidget Toy (Help patients regulate emotions and reduce stress)
  - c) Red Ball (Help patients regulate emotions and reduce stress)
  - d) Communication Aids

### **C. Special Considerations**

1. **Communication:** Patients with certain disabilities (deafness, nonverbal autism), may have difficulty communicating their needs or symptoms. Consider using alternative methods of communication such as written notes, drawings, caretaker, or interpreter to ensure that the patient receives appropriate care.
  - a) **Written Communication:** Notes or text messages may be helpful tools for communication. Use simple language and keep sentences short.
  - b) **Sign Language:** Sign language interpreters may assist with communication if on scene. Hand gestures such as thumbs up or pointing may assist patients who may be limited with verbal communication.
  - c) **Picture Communication:** [Section E](#).
  - d) **Augmentative and Alternative Communication (AAC) Devices:**
  - e) **Tactile Communication:**
    - i. Be attentive and sensitive to the patient's specific needs and abilities when choosing the form of communication.
    - ii. Be aware that it is common for them to repeat what you say or answer with the last option given.
  - f) **Sensory Issues:** Patients may have a heightened sensitivity to noise, lights, touch or other sensory stimuli. Attempt to minimize any stimuli that may exacerbate patient's condition (lights and sirens, bright lights, loud noises).
  - g) **Emotional Distress:** Be calm and supportive, provide emotional support as needed. Use caretakers to assist with patient care. Be aware of the patient's support network and involve them in the patient's care as appropriate.

## D. Sensory Bag

A sensory bag for special needs patients may be a helpful tool to help calm them down in an emergency situation. These bags will be placed on all MDFR frontline response units.

1. **Fidget Toys:** Provide tactile stimulation and may help calm anxiety.
2. **Noise Canceling Headphones:** For patients sensitive to noise, these may reduce sensory overload.

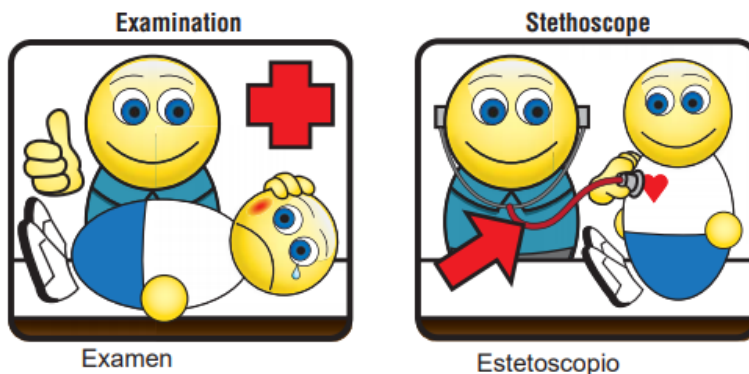


**NOTE: Sensory bags are single use. Bags may be given to patients, family members or caregivers.**

## E. Communication Aids

**Visual Aids/Communication Aids** are picture boards or calming images on cards that can provide a focal point and help patients feel grounded. Picture cards or communication books can also help patients express their needs or emotions, and can help patients communicate with responders during patient assessment.

1. Communication aids will accompany the sensory bags to help nonverbal/autistic patients and their family members express their needs or emotions.
2. Communications aids will be available in both [English/Spanish](#) and [English/Creole](#).



<https://emlrc.org/flpedready/>

3. These communication aids will come assembled in a binder clip, and may be provided in the Sensory Bags for patients to keep.



**NOTE: Communication cards are single use. They may be given to patients, family members or caregivers.**



## **F. Requesting Supplies**

To obtain replacement Sensory Bags and/or Communication Cards after items have been issued to patients, complete an [EMS Service Request](#).