LowCode, a software application developed by Priority Solutions Inc., electronically integrates and operates the Emergency Communication Nurse System™ (ECNS™). ECNS is the nurse-triage system implemented directly in emergency medical services (EMS) communication centers throughout the world to provide alternative referral options to patients with non-life-threatening, non-emergency, and low-acuity determinants as assessed by ProQA® and the MPDS® Protocols. The International Academies of Emergency Dispatch® is the regulatory body overseeing the clinical governance of ECNS.

At the core of LowCode lies an automated clinical content product. LowCode includes a series of symptom-specific, gender-specific, and age-specific trinary logic protocols, which are used by an Emergency Communication Nurse (ECN) in non-emergency situations to interpret the symptoms of callers and direct those callers to an appropriate Recommended Care Level. Each protocol features a logically structured questioning sequence, from high acuity to low acuity, thus ensuring that critical symptoms are identified early on in the process. Should any serious pathology be deemed possible, the appropriate protocols housed in LowCode software are seamlessly transferred to LowCode’s embedded ProQA system, along with information obtained during the call, and the appropriate ProQA dispatch code is triggered. Otherwise, the call will proceed through protocol assessment until a Recommended Care Level and Point of Care (locally available community health care delivery facilities and transportation options) are assigned and scheduled.

Different software functionality throughout this process includes stored demographic information such as patient call logs; the ability to immediately ascertain how many times a specific caller has utilized the system in a specific time frame; an electronic time stamp for each question asked and answered; medical history; and co-morbid conditions and concomitant medications, as well as patient allergies. Predictive text is used in many of the fields available in LowCode. Over 200 protocol titles, as well as known “aliases,” are available in the system. Aliases are synonyms of protocol titles. Differential Diagnoses and Considerations are also listed for ECN areas of inquiry and continuing education. Protocol overviews, clinical rationales, and reference lists are available for each individual protocol question. A question history is kept in a running-tally format on the screen for quick ECN review.
Each protocol consists of an array of flow-control and logic pointers linked to clinical content containing triage questions and final Point of Care scheduling and instructions. The questions are dynamically personalized in real time to the caller's demographics to foster effective dialogue between caller and nurse. The protocols are IT platform independent in that all requisite protocol flow and content instructions are maintained in the databases.

LowCode is symptom, history, and evidence based. It is built upon five principles:

1. Most calls transferred to the system are benign and self-limited
2. Focus is on caller information and patient education
3. Continued education for nurses is built throughout the system
4. Protocols support Standard of Care and Best Clinical Practice
5. LowCode is maximally customizable with Recommended Care Levels and Points of Care

The protocols provide a reproducible, standardized approach to phone triage. They also provide Emergency Communication Nurses (ECNs) with a structured question sequence, thereby eliminating unintended variation in the call, such as forgetting to ask a key question, not accounting for a caller's underlying illness, or the inadvertent introduction of bias into the call process. This approach minimizes malpractice risk and enables process improvement techniques and statistical analyses to be used in improving triage performance.

At the same time, the protocols foster an appropriate use of discretion by ECNs. For example, there is an override switch that enables a nurse to select the Recommended Care Level that he/she feels is the most appropriate given the circumstances of the individual call. In such cases, the system prompts the nurse to explain why the system's suggested disposition was not invoked. This becomes part of the call record. ECNs select self-care instructions and call-back scheduling. ECNs also have discretionary abilities to back out of questions or entire protocols.

A fully integrated Directory of Services (DOS) package is available on request. It auto-launches when a Point of Care is reached in LowCode. It seamlessly allows for alternate treatment options to be identified in real time as the last component of the system.

LowCode contains an array of operational reporting abilities as well as a comprehensive XML data export capability. Quality Assurance and Quality Improvement are integral aspects of the system, and AQUA™ supports the QA/QI function.

Here's a small sample of LowCode's reporting capabilities:

- Key Performance Indicators
- CSV Report
- CSV QA Script Report
- CSV KPI Report