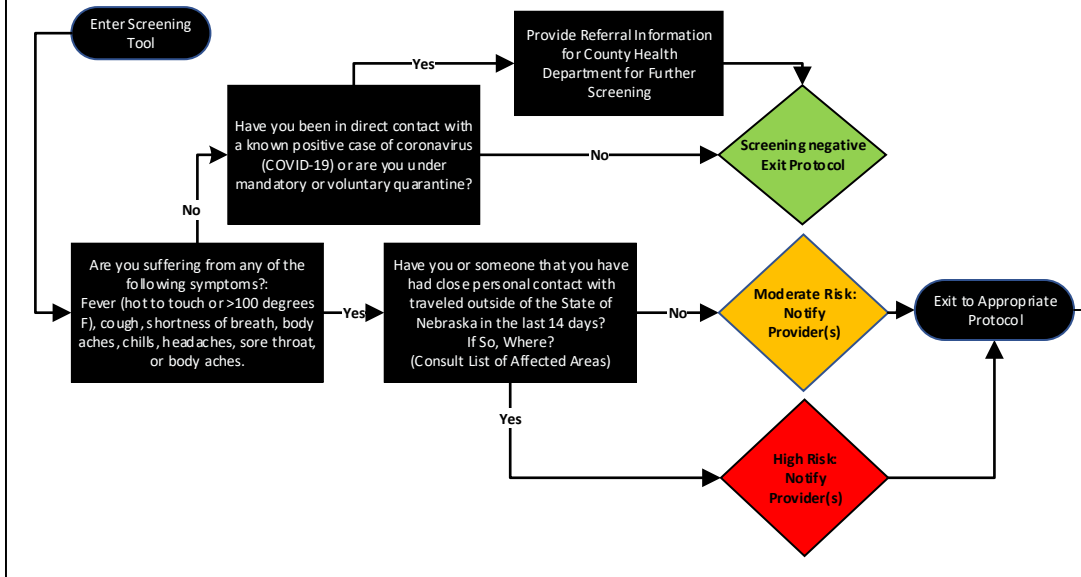




COVID-19 Guideline

Dispatch Center Screening Tool



Evolving Protocol:
Protocol subject to change at any time dependent on changing outbreak locations.
Monitor for protocol updates

**DISPATCH ONLY
EMS TRANSPORT UNIT**
Alert any EMS providers of a potential exposure patient before they arrive on scene

EMS

Do not rely solely on dispatch personnel to identify a potential exposure patient:

- EMD may be constrained by time and caller information.
- Obtain a travel history/exposure history and assess for clinical signs and symptoms.
- Limit number of providers necessary for care to limit potential exposures
- Maintain 6 ft (minimum) distancing from patient while interviewing until mask can be placed.

EMS Immediate Concern

- Traveler from area with known respiratory disease with or without symptoms
- Traveler from affected areas within past 14 days

AND

Fever, cough, shortness of breath, headache, joint/muscle aches, vomiting/diarrhea

NO → Exit to Appropriate Patient Care Guidelines

YES → EMS Personal Protective Equipment (PPE)

Aerosol generating procedures:
(NIPPV/Neulizer therapy/Intubation/Suctioning)
Try to avoid if possible. If unavoidable, contact medical control. Use highest level of PPE with face/eye protection (PAPR with hood preferred). If possible, keep rear compartment doors open during procedure.

If there is a known shortage of respirators and gowns, those items should be prioritized for aerosol-generating procedures.

Patient:

- Place standard surgical mask on patient
- Use non-rebreather mask if oxygen is needed
- In unable to tolerate mask, have patient cover mouth and nose when coughing.

Providers utilize:

- Contact, Droplet, and Airborne Precautions
- Eye protection
- N95 Mask (or higher) or PAPR (Facemasks may be used if a respirator is not available)
- Exam Gloves
- Goggles/face shield
- Disposable Gown
- Create negative pressure in care compartment (See Pearls)

Personnel in ambulance cab utilize:

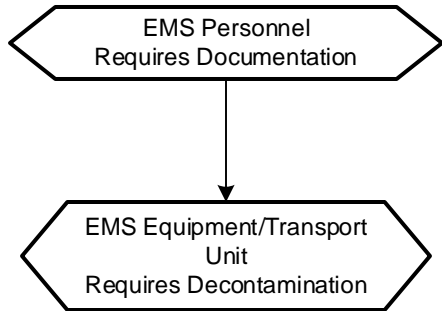
- N95 Mask (or higher) or PAPR
- Remove all PPE except N95 or high and perform hand hygiene PRIOR to entering the cab of the ambulance

EMS General Treatment Considerations → Notify Hospital

Special Circumstances Section



COVID-19 Guideline



Maintain Records

- Of all prehospital providers who were in the room with the patient at the scene and who were in ambulance during transport (self-monitoring for symptoms for 14 days is recommended, even if wearing appropriate PPE).
- This does not mean the providers can no longer work.
- If all prehospital provider names (students, observers, supervisors, first response, etc.) are listed in the Patient Care Report then this is a sufficient record.

Wash Hands:

Thoroughly after transferring patient care and/or cleaning ambulance

Safely clean vehicles used for transport:

- Follow standard operating procedures for the containment and disposal of regulated medical waste.
- Follow standard operating procedures for containing and reprocessing used linen.

Wear appropriate PPE when:

- Removing soiled linen from the vehicle. Avoid shaking the linen.
- Clean and disinfect the vehicle in accordance with agency standard operating procedures.
- Personnel performing the cleaning should wear a disposable gown and gloves (a respiratory should not be needed) during the clean-up process; the PPE should be discarded after use.
- All surfaces that may have come in contact with the patient or materials contaminated during patient care (e.g. stretcher, rails, control panels, floors, walls, work surfaces) should be thoroughly cleaned and disinfected using an **EPA-registered disinfectant** appropriate for SARS, MERS-CoV, or coronavirus in healthcare settings in accordance with manufacturer's recommendations.

Pearls

- **Transport**
 - **Limit transport of the patient only** (No family or others unless absolutely necessary, have family ride in cab and apply PPE)
Occupants in cab of vehicle all should wear N95 Mask (or higher) or PAPR.
 - **Limit number of providers in vehicle required to provide patient care in order to limit exposures**
 - **Ensure use of all PPE for crew and passengers when aerosol generating procedures utilized**
- **Negative pressure in care compartment**
 - Door or window available to separate driver and care compartment space:
 - Close door/window between driver and care compartment and operate rear exhaust fan on full/high.
 - No door or window available to separate driver and care compartment space:
 - Open outside air vent in driver's compartment and set rear exhaust fan to full/high.
 - Set vehicle ventilation system to non-recirculating to bring in maximum outside air.
 - Use recirculating HEPA ventilation system, if equipped.
- **Airborne precautions:**
 - Standard PPE with fit-tested N95 mask (or PAPR respirator) and utilization of a disposable gown, single pair of gloves, and face shield/goggles.
 - Level appropriate for COVID-19, Aspergillus, Tuberculosis, Measles (rubeola), Chickenpox (varicella-zoster), smallpox, influenza, Rhinovirus, Norovirus, and Rotavirus.
- **Contact precautions:**
 - Standard PPE with utilization of a gown, change of gloves after every patient contact, and strict hand washing precautions.
 - This level is utilized with GI complaints, blood or body fluids, C-diff, scabies, wound and skin infections, MRSA, Clostridium difficile is not inactivated by alcohol-based cleaners. Washing with soap and water is indicated
- **Droplet precautions:**
 - Standard PPE plus a standard surgical mask for providers who accompany patients in the treatment compartment and a surgical mask or NRB O2 mask for the patient.
 - This level is utilized when Influenza, Meningitis, Mumps, Streptococcal pharyngitis, Pertussis, Adenovirus, Rhinovirus, SARS, and undiagnosed rashes.
- **All-hazards precautions:**
 - Standard PPE plus airborne precautions plus contact precautions.
 - This level is utilized during the initial phases of an outbreak when the etiology of the infection is unknown or when the causative agent is found to be highly contagious (e.g. SARS, MERS-CoV, COVID-19).
- **COVID-19 (Novel Coronavirus):**
 - **For most current criteria to guide evaluations of patients under investigation:**
<http://www.cdc.gov/coronavirus/2019-nCoV/clinical-criteria.html>