Emergency Medical Services Agency  
 Bulletin 2021-01  
 June 25, 2021

PLEASE POST

PREPARING FOR AND RESPONDING TO KNOWN OR SUSPECTED COVID-19 PATIENTS


This bulletin provides information regarding response and guidance for EMS field personnel responding to emergencies during the novel coronavirus infectious disease (COVID-19) pandemic. The information included in this bulletin reflects the June 17, 2021 CDPH and Cal OSHA recommendations and workplace guidelines for health care workers including EMS personnel. This bulletin will cover the following:

- Dispatch Procedures
- EMS Procedures
- Treatment and Transport

DISPATCH PROCEDURES

If your agency uses a Medical Priority Dispatch System (MPDS), please incorporate the following guidance to the Difficulty Breathing or Sick/Unknown MPDS cards.

One or more of the following indications meets criteria for confirmed or suspected COVID-19 infection.

- A positive COVID-19 test within the last 10 days, with or without symptoms.
- Complaint or suspicion of respiratory illness including cough, shortness of breath, difficulty breathing, fever, or flu-like symptoms.

If any of the above criteria are met, dispatchers will use the term “Meets Criteria” at the end of the dispatch. This information is intended to be used by responding EMS providers as an indicator of suspicion NOT a diagnosis.
EMS PROCEDURES

Per Cal OSHA June 17, 2021 guidelines, all EMS calls are considered a “Healthcare Setting”. As a result, the following guidelines apply to all responding EMS personnel regardless of their COVID vaccination status. This includes the use of appropriate face covering on all patient contacts.

It is no longer necessary for a single provider to perform an initial assessment while other personnel remain distanced. However, all responders should be prepared to upgrade their level of PPE if a patient presents with signs/symptoms consistent with possible COVID-19 or other aerosolized transmissible diseases (for example TB).

For all patients who are confirmed or have a high degree of suspicion for COVID on initial assessment, EMS Personnel shall don:

- N95 or P100 Respirator
- Eye protection (Full face shield or reusable goggles)
- Gown (including disposable gowns, Tyvek suits, wildland jacket, or other cleanable safety jacket)
- Gloves
- Place a surgical mask on the patient, or if they are wearing afacemask, leave it in place.
  - Oxygen may be administered with a nasal cannula under a face mask, or by oxygen mask with higher concentrations if needed. Oxygen saturation values in Covid 19 infected patients may present and remain lower than expected even with oxygen administration. Oxygen should be titrated according to patient’s clinical presentation of respiratory distress as well as sPO2 levels.

For all other patients, EMS Personnel shall don:

- Surgical mask or other defined face covering (see definition below)
- Gloves
- Place surgical mask on the patient, or if they are wearing a facemask, leave it in place.

The definition for face covering has been updated to mean, “a surgical mask, a medical procedure mask, a respirator worn voluntarily, or a tightly woven fabric or non-woven material of at least two layers. A face covering has no visible holes or openings and must
TREATMENT AND TRANSPORT

- It is not necessary to limit aerosol generating treatments, however EMS providers should exercise caution with these treatments which include:
  - Continuous Positive Airway Pressure (CPAP)
  - Administration of nebulized medications
  - Suctioning
  - Endotracheal Intubation
- Refer to EMS Bulletin 2020-06 “GUIDELINES FOR AEROSOL GENERATING TREATMENTS AND PROCEDURES” for more information.
- If aerosol-generating procedures are required, use the minimum number of personnel to perform the procedure(s) safely and adequately. Personnel performing aerosol generating treatments shall wear full PPE including N95 or P100 respirator, full face shield or reusable goggles, gown, and gloves.
- During transport, vehicle ventilation in both compartments shall be in non-recirculated mode. Use vehicle ventilation systems to maximize air changes.
- Prior to beginning ambulance transport, the driver should remove their face shield or goggles, gown and gloves and perform hand hygiene. Face covering shall be worn during transport.
- Family members and other contacts of patients who ride in the ambulance shall wear a face mask.
- Transport personnel shall provide an early notification to the receiving hospital of a suspect COVID-19 patient “meeting criteria”, including inter-facility transfers. Early notification will enable the receiving hospital to take appropriate infection control precautions prior to patient arrival. Hospitals may provide specific directions for patient arriving at their facility.
- Per SLO EMS Agency Policy #151, all hospitals in the County can currently receive a COVID-19 patient.