Emergency Medical Services Agency


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 all current 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

With the sharp decline in COVID cases from the Omicron variant, these revised guidelines for PPE use shall be followed when responding to EMS incidents:

All patients who are confirmed COVID positive or have a high degree of suspicion of COVID infection, or when performing any aerosol generating procedures:

- **N95 or P100 Respirator**
- Gloves
- Eye protection
- Gown, including disposable gowns, Tyvek suits, wildland jacket, or other cleanable safety jacket
- Place a surgical mask on the patient unless performing aerosol generating procedures. If the patient is wearing a facemask, 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.

**ALL other patients:**

- Surgical mask
- Gloves
- Any other PPE deemed appropriate by EMS personnel

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, 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.