



COUNTY OF SAN LUIS OBISPO HEALTH AGENCY

PUBLIC HEALTH DEPARTMENT

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Emergency Medical Services Agency

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URGENT

PLEASE POST

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

This bulletin replaces Bulletin 2020-03 dated March 20, 2020

This bulletin provides information regarding the Emergency Medical Services (EMS) response and guidance for EMS field personnel who contact patients who may have or are suspected of having novel coronavirus infectious disease (COVID-19). The information included in this bulletin is the most up to date but will change rapidly in the coming days and weeks. The SLO County EMS Agency (EMS Agency) will provide updates as they become available. This bulletin will cover the following areas:

- Dispatch Procedures
- EMS Procedures
- Treatment and Transport
- Guidelines for EMS Personnel with Potential Exposure

The State of California EMS Authority has a [COVID"-19 Resource Portal](https://ems.ca.gov/covid19) <https://ems.ca.gov/covid19>. It is recommended that all providers review and regularly check the site for updates.

DISPATCH PROCEDURES

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

Screen Callers for Potential COVID-19

Any complaint or suspicion of respiratory illness including cough, shortness of breath, difficulty breathing, or flu-like symptoms, meets the criteria for a suspect COVID-19 patient.

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Additional Screening that may further define the level of risk:

- In the last 14 days, had close contact with a person that was told by doctor they either have or might have COVID-19

Notify EMS Personnel

Immediately notify responding EMS personnel if the patient meets criteria as a known or suspect COVID-19. In these cases, dispatchers will use the term “Meets Criteria” at the end of the dispatch.

EMS PROCEDURES

The following guidelines are being taken to decrease, as much as possible, exposure to known or suspect COVID-19 patients, and to reduce the amount of PPE used.

The guidelines in this bulletin apply only to known or suspect COVID-19 patients, either by dispatch or initial assessment. All other EMS patients should be treated using current policies, procedures, and protocols.

Initial Patient Contact to Known or Suspect COVID-19 Patient

- **Send one member of the EMS team, in full PPE, to make initial patient contact and assessment.**
- **The person making initial contact should be a Paramedic with the responding ambulance provider.**
- **If a fire agency is first on scene, a member of the fire agency should don PPE and make initial contact.**
- The person making initial patient contact should place a **surgical mask** on the patient immediately. Other responding personnel should remain as far away from the patient as possible with their PPE ready to don if they are needed for patient care.
- Oxygen should be **titrated** to maintain SPO2 \geq 94%. This can be accomplished with a nasal cannula under a surgical mask, or an oxygen mask with higher concentrations if needed.
- Anyone having close patient contact shall wear full PPE:
 - Gloves
 - Gown
 - Single-use, full face shield **or** goggles
 - N95 or better respirator
- Refer to the guidelines for donning and doffing PPE:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx>

The County of SLO Emergency Operations Center (EOC) is working on ways to mitigate the shortages of PPE. Information will be sent out as it becomes available.

TREATMENT AND TRANSPORT

- **Limit treatment activities for known or suspect COVID-19 patients unless the patient is unstable.**
- Exercise caution with aerosol generating treatments such as:
 - Continuous Positive Airway Pressure (CPAP)
 - Administration of nebulized medications
 - Suctioning
 - Endotracheal Intubation
- If aerosol-generating procedures are required, use the minimum number of personnel to perform the procedure(s). Personnel performing treatment to suspected COVID-19 patients **must wear full PPE during patient contact.**
- If possible, the rear doors of the transport vehicle should be opened, and the HVAC system should be activated during aerosol-generating procedures. This should be done away from pedestrian traffic.
- During transport, vehicle ventilation in both compartments should be in non-recirculated mode. Use vehicle ventilation systems to maximize air changes.
- If the transport vehicle does not have an isolated driver's compartment, the driver should remove the face shield or goggles, gown and gloves and perform hand hygiene. A respirator (N95) should continue to be used during transport.
- Prohibit family members and other contacts of suspected COVID-19 patients from riding in the ambulance, if possible. If necessary, evaluate family members and other contacts for the presence of respiratory illness indicating suspected COVID-19. If symptoms are present, ask them to stay home.
- 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.

Documentation

In the narrative section of the patient care report (PCR) for each known or suspect COVID-19 patient, list each member of your agency, whether they had patient contact, and the list of PPE they wore. This documentation is the minimum required, nothing prevents any agency from adding data fields and closed call rules for PPE use in their PCR systems.

Cleaning and Disinfection

- Perform environmental cleaning and disinfection procedures of EMS transport vehicles and equipment
- Dispose of PPE in red bags.

GUIDELINES FOR EMS PERSONNEL WITH POTENTIAL EXPOSURE TO COVID-19

Consistent with CDC recommendations prehospital care personnel that have experienced a low, medium, or high-risk exposure¹ to a COVID-19 positive patient and are asymptomatic should be allowed to work. These personnel should still report temperature and absence of symptoms each day prior to starting work and should wear a facemask (surgical or N95) while at work for 14 days after the exposure. If these personnel develop even mild symptoms consistent with COVID-19, they must cease patient care activities, don a facemask (if not already wearing), and notify their supervisor or occupational health services prior to leaving work.

EMS responders who had close contact with known or suspected COVID-19 patients and wore full PPE for the entirety of the contact, may return to work without restriction. EMS providers who did not have close contact, with or without PPE, may also return to work without restrictions.

¹Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease (COVID-19). Please click on the following link, then go to "Workforce Maintenance Policy" for further information. <https://emsa.ca.gov/covid19>

- For questions regarding this Bulletin, please contact the EMS Division, Med/Health Branch, County of SLO EOC at 805-788-2514.
- Check www.sloemsa.org for the latest guidance.
- Updated information about COVID-19 is available at www.slocounty.ca.gov/covid19 or at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>.
- Infection prevention and control recommendations is available at <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/infection-control.html>.
- Additional information for healthcare personnel is available at <https://www.cdc.gov/coronavirus/2019-nCoV/guidance-hcp.html>