



Emergency Medical Services Agency

Bulletin 2020-06 March 30, 2020

PLEASE POST

GUIDELINES FOR AEROSOL GENERATING TREATMENTS AND PROCEDURES

The SLO County EMS Agency and Medical Director, with the support of the State EMS Authority, immediately approves the following changes and modifications to procedures that may generate excessive uncontrollable aerosolized output. These changes will remain in effect for the duration of the COVID-19 pandemic event.

Limit aerosol producing treatments in known or suspected Covid-19 patients UNLESS the patient is unstable with worsening respiratory distress.

These treatments include:

- Continuous Positive Airway Pressure (CPAP)
- Administration of nebulized medications
- Bag Valve Mask (BVM)
- Suctioning
- Endotracheal Intubation (ETI)

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 prior to entering the ambulance. A respirator (N95) should continue to be used during transport

Bag Valve Mask Devices (BVM)

All BVM's used by EMS personnel should have a HEPA filter at the expiratory port. This is intended to augment PPE recommendations and should be initiated as soon as available. Even with a HEPA filter, EMS providers shall wear full PPE when performing this procedure.

CPAP

If available, CPAP devices used by EMS personnel should have a HEPA filter at the outlet port of the device. As with BVM, providers shall wear full PPE when using a CPAP device.

Albuterol

The following forms of Albuterol administration are permitted and approved for use to mitigate unnecessary aerosol release. The BAN device may be used immediately with the simple just in time training. Albuterol multidose inhalers may be used once the EMS Agency updates the formulary and protocols. The patient use portion of these devices are single use/disposable.

- Breath Actuated Nebulizer (BAN) devices. BAN devices create aerosol in response to the patient's inspiratory flow only as opposed to the constant aerosol when using our current nebulizers. Preparation and dosing of albuterol is unchanged with these devices. If your agency chooses to use these, they may be placed into service immediately with simple just-in-time training (JIT) on using the device. JIT should be provided by the agency purchasing the BAN device for their personnel.
- Albuterol multidose inhalers (MDI) with a disposable contained collection chamber (aerochamber) and disposable plastic mouthpiece. The EMSA will provide dosing information, basic instructions on use, and updates to existing protocols and drug formulary.

Suctioning and ETI

There are currently no changes regarding the use of suction or ETI. Those procedures should be used consistent with current policies, procedures, and protocols. It is important that the guidelines listed above are followed when performing these procedures. Additionally, it is recommended that a P-100 mask be applied **if available**, otherwise an N-95 along with all other PPE shall be used.

If you have any questions or concerns regarding the information in the bulletin, please contact Mike Groves, EMS Group Supervisor, at 805 788-2514 or mgroves@co.slo.ca.us