

Covid-19 EMS Operations for PPE

<p>Person Under Investigation (PUI) presenting with either or one or more the following:</p> <p>A. Confirmed Positive for Covid-19</p> <p>B. Symptoms - Cough, Fever, SOB, Sore Throat, Severe Muscle Aches or NVD</p> <p>If the patient doesn't meet A or B, full PPE is not required.</p> <p>*If crew dons full PPE, EMS notification to the hospital is required.</p>	<p>PPE to use for a patient with confirmed Covid-19 or PUI</p> <p>On your Patient: Surgical Mask Only</p> <p>EMS Providers delivering care within 6':</p> <p>Gown, Gloves, N95 Respirator & Face Shield</p>
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Possible patient scenarios—approach guidelines

<p>1. Patients who can walk, and whose condition will not be exacerbated by walking, should walk.</p> <ul style="list-style-type: none"> • Driver should stay greater than 6' from the patient until stability and ambulatory status are determined. • Cab and patient compartment should be isolated by closing the divider. • Follow air ventilation guidelines and operational procedures. • Upon arrival at the receiving facility, crews should communicate an effective plan with each other and the patient. The driver will remain in the vehicle and avoid patient contact. Patient must be escorted for transfer of care.
<p>2. Patients who are unstable and require extrication. Patient Assessment Algorithm</p> <ul style="list-style-type: none"> • The minimum amount of providers who are needed to move or treat the patient should be utilized. All providers within 6 feet must don full PPE. All other should remain at least 6' away from the patient. • A provider that did not don full PPE should drive the ambulance. • If the driver has donned full PPE, prior to getting in the driver's seat, all PPE except the N95 must be removed. • Upon arrival at the receiving facility, crews should communicate an effective plan with each other and the patient. If the driver can remain in the vehicle and avoid patient contact, they should do so. If the driver is needed for patient movement, additional PPE must be donned.

<p>Post Transport</p> <ul style="list-style-type: none"> • Upon arrival at the destination and after removal of the COVID-19 or PUI patient from the ambulance, leave the ambulance doors open for 20 minutes prior to decontamination. As COVID-19 is transmitted through droplets, this 20-minute period allows settling of any droplets on hard surfaces. You can then wipe the surfaces and clean the ambulance with gloves only. • Disinfect all hard surfaces and materials. Linen should be disposed of at the receiving facility. • Doff and dispose all PPE. 	<p>Treatment & Special Circumstances</p> <ul style="list-style-type: none"> • Aerosolized type procedures such as nebulized medications & CPAP should not be done if patient is stable. • For aerosolized type procedures, provider will wear full PPE and the interventions must be stopped prior to leaving the ambulance. • Supraglottic airway should be the primary advanced airway. • Cover Nasal Cannulas and NRB masks with a Surgical Mask. • Only a parent or guardian of a pediatric patient or those essential to patient care will be allowed to accompany the patient. This one person must wear a surgical mask and be secured in the patient compartment.
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<p>Tablet/Documentation</p> <ul style="list-style-type: none"> • Tablet must stay in the front of the ambulance. • Wipe down and decontaminate after each call as it is an often touched hard surface. 	<ul style="list-style-type: none"> • Patient Signature on PCR must be "unable to obtain signature, COVID-19 related", reason "Isolation Precautions"
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