Response Checklist - COVID-19

All EMS Responses - Medium Precautions - Level II

1. PPE – minimum for all providers:

- Gloves & Goggles & N-95.
- Post response, if patient determined to be effectively no risk for COVID-19?

N-95 respirator may be stored in paper bag for later use (keep for no longer than 8 hours).

2. Door Triage/room scan/6 ft of separation:

- A. Does anyone have fever, cough, respiratory distress? YES- Level III PPE
- B. Dispatch positive screen for PPE? YES-follow instructions 3 and 4 below:

3. Treatment Precautions:

- Providers should be using Goggles/Face Shield on all responses.
- If safe/feasible, consider having the patient brought to the entry point of the building.
- Minimize providers in the building required for patient care.
- Surgical mask for the patient, nasal cannula can be used under a surgical mask.
- A surgical mask can be placed over a non-rebreather mask.
- NO ORAL TEMPERATURES

4. Transport Precautions:

- Driver will remove eye protection/gloves. Minimize providers in the back of unit.
- CDC guidance for ventilation during transport, see "Transporting Instructions."

Assisted care, adult family home, nursing home, clinic, jail, other high-risk facility = Level III PPE

High Precautions - Level III

- 1. Does anyone have a fever, or cough, or respiratory distress?
- 2. Is the Patient or Facility suspected to have COVID-19?
- 3. Had previous contact with a COVID-19 patient?
- 4. Is patient from a high-risk facility (Assisted Care, AFH, Nursing home, clinic, jail)?
- 5. May require aerosol-generating procedures?

If Yes to any question = High Precaution Level III PPE If No to all questions = Level II PPE

- 1. PPE- gloves, N-95, goggles or face shield, and gown. Surgical mask on patient.
- 2. Follow all Instructions in Level II
- 3. Contact the **MSO** for support as needed.
- 4. Contact destination hospital and advise you have an isolation patient.

Precautions for Aerosol Generating Procedures

If patient condition REQUIRES use of invasive airway interventions:

- Level III PPE required during all aerosol generating procedures:
 - o BVM, Suctioning, CPAP, iGel, Intubation, Nebulized meds, NRB (if no surgical mask).
 - o Nebulized meds used as a last resort-consider other appropriate treatments first.
- BVMs should be equipped with HEPA filters.
- Use Supraglottic airway (SGA) instead of intubation for suspected/known COVID-19 patients.
 - o Intubation allowed if SGA will not oxygenate and ventilate.
- DO NOT USE VENTILATORS
- Maximize area ventilation during these procedures-open doors, use exhaust fans.
- Contact Medical Control as needed for guidance.

Transporting Instructions

Family members and contacts of patients with possible COVID-19 should not ride in the transport vehicle.

NOTE: Per CDC, Hospitals not accepting any visitors. Only parents/guardians, POA, special needs patients.

- Isolate the ambulance driver from the patient compartment.
- During transport, vehicle ventilation in both compartments should be on non-recirculated mode to maximize air changes that reduce potentially infectious particles in the vehicle. If the vehicle has a rear exhaust fan, use it to draw air away from the cab, toward the patient-care area, and out the back end of the vehicle.
- Open the outside air vents in the driver area and turn on the ventilation fans to the highest setting.

Decontamination Checklist

Daily - Deep cleaning of stations and apparatus will be conducted at the start of every shift.

ALL PRIMARY DECON TO BE DONE BEFORE ENTERING STATION. DO NOT CONTAMINATE STATION.

PPE Gowns = single use Ey

Eye Protection and Goggles = decontaminate and reuse.

Level II – Properly dispose of PPE. Wash hands. Deep clean apparatus.

Level III - Transport units will perform decon at hospital:

Properly dispose of PPE. Wash hands. Deep clean apparatus. Disinfect goggles then wash with soap/water. Launder uniforms as appropriate per agency infection control guidelines

If any aerosol generating procedures were performed on a COVID-19 SUSPICIOUS PATIENT (symptoms or possible contact with COVID pt) or any time providers feel that higher level decon is warranted:

- 1. After patient transfer, properly dispose of PPE and wash hands.
- Deep clean apparatus wearing PPE (see guidelines below). Decon boots with spray CaviCide1.
- 3. Outside rig or in hospital decon room, doff and bag uniforms, don Tyvek suit.
- 4. Place bagged uniforms in exterior compartment.
- 5. Return to station. Launder uniforms wearing PPE.
- 6. Shower and don fresh uniforms.

Note: Crew members involved in aerosol generating procedures who do not transport:

See decon guidance on page 3

Cleaning EMS Transport Unit after Transporting a Patient with Suspected/Confirmed COVID-19

- 1. Allow for maximum ventilation in patient compartment by keeping all doors open while delivering patient.
- 2. PPE for rig decon: gown and gloves minimum. Googles and mask if splashes or sprays anticipated.
- 3. Routine cleaning and disinfection procedures (e.g. using cleaners and water to pre-clean surfaces prior to applying disinfectant) are appropriate for SARS-CoV-2 (COVID-19). Pre-cleaning removes gross contaminants prior to disinfection.
- 4. Follow directions on CaviCide 1 bottle for thorough disinfection.
- 5. Products with EPA-approved emerging viral pathogens claims are recommended for use against SARS-CoV-2. Refer to List N on EPA website. CaviCide1 has demonstrated effectiveness against viruses similar to SARS-CoV-2 on hard non-porous surfaces. Therefore, this product can be used against SARS-CoV-2 when used in accordance with the directions on hard, non-porous surfaces." Follow directions on the CaviCide 1 Bottle.
- 6. Clean and disinfect all surfaces that patient may have contacted and all surfaces that may have been contaminated by aerosol generation.
- 7. Clean and disinfect all reusable patient-care equipment before use on another patient. Primarily use CaviCide1 spray, and allow a dwell time of 1-2 minutes. CaviWipes 1 are for items that are difficult to clean with a liquid, e.g., EKG leads.

PPE Precautions – Levels I, II, III







Level II / Medium

-Gloves

-N-95

-Goggles

Level III / High

-Gloves

-N-95

-Goggles/Face Shield

-Gown

Donning PPE Sequence: MEGG

Level I / Standard

. Mask

2. Eyes

3. Gown

4. Gloves

1. Gloves

2. Gown- Wash Hands

3. Eyes

4. Mask- Wash Hands

<u>Decon guidance for non-transport crews when aerosol generating procedures were performed on COVID-19 SUSPICIOUS PATIENT</u>

AT SCENE:

- 1) Doff and bag all PPE.
- 2) Decon boots.
- 3) Doff and bag uniforms.
- 4) Don Tyvek suit.
- 5) Bagged uniforms placed in exterior compartment.
- 6) Return to station.
- 7) Launder contaminated uniforms wearing PPE.
- 8) Shower and don fresh uniform.

If unable to decon at scene:

To Doff PPE, just reverse the donning sequence: GGEM

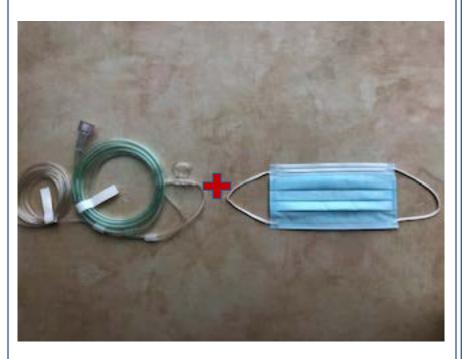
Do steps 1-4 on ramp-NOT INSIDE THE BAY

Decon inside of rig wearing PPE per instructions on page 2.

Care of the infectious patient needing oxygen or advanced airway management

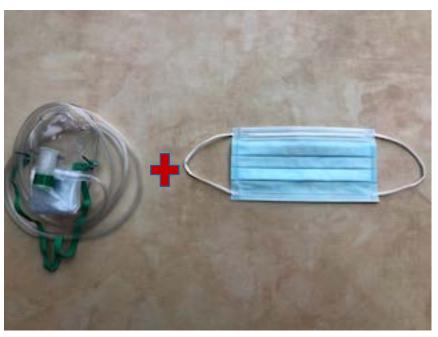
Nasal Cannula

- 1. Place nasal cannula
- 2. Place surgical mask over the face
- 3. Titrate oxygen flow rate from 2-6 LPM



Non-Rebreather

- 1. Place non-rebreather mask
- 2. Place surgical mask over the face on top of NRB mask
- 3. Titrate oxygen flow rate from 6-15 LPM



BVM

- 1. Place HEPA filter on exhalation port
- 2. Ensure and maintain mask seal
- 3. Titrate oxygen flow rate to patient need



<u>l-gel</u>

- 1. Place HEPA filter on exhalation port
- 2. Place ETCO2
- 3. Ensure I-gel is seated appropriately



EMS - COVID-19 HOSPITAL NOTIFICATION CHECKLIST

YES to both questions in this RED box = Advise Hospital of a HIGH probability isolation patient:
Symptoms: Has the patient had any off the following symptoms of acute respiratory infection? □ Fever (or subjective fever) □ New cough □ New shortness of breath (without alternative diagnosis)
☐ New onset myalgias (soreness/achiness in muscles)
Exposure: Has the patient had any of the following in the last 14 days before symptom onset? Close contact with, or part of, an COVID-19 illness cluster in a facility or group Close contact with a suspected or lab-confirmed COVID-19 case Healthcare worker or in a high-risk occupation (e.g. EMS, firefighter, public safety) IF NO to all questions in this RED box proceed to next checklist
YES to any questions in this YELLOW box = Advise Hospital of a MEDIUM probability isolation patient: Cough Runny nose Sore throat IF NO to all questions in this YELLOW box proceed to next box
IF NO to ALL RED and YELLOW box questions = Advise Hospital of a LOW probability isolation patient

NOTE: Per CDC, Hospitals not accepting any visitors. Only parents/guardians, POA, special needs patients.