COVID-19: Emergency Medical Services Non-Transport Guidance

Purpose
To identify patients that are safe to assess and not transport to a hospital during widespread cases of confirmed COVID-19 patients.

Indication for COVID-19 Non-Transport Protocol

- This guidance is only applicable if local EMS agency medical direction has decided to enact non-transport guidelines based on local indications and in consultation with hospital community leaders, EM, DOH, etc.
- Healthcare infrastructure is overwhelmed
  - Hospitals are exceeding maximum census
  - Hospitals and stand-alone emergency departments are experiencing significant overcrowding
- Other exclusions defined by the medical director

1. Initial Assessment
- If call takers advise that the patient is suspected of having COVID-19, EMS clinicians should put on appropriate PPE before entering the scene.
- Initial assessment should begin from a distance of at least 6 feet from the patient and be limited to one EMS provider if possible.

2. Patient Assessment

   Yes to Any
   Proceed with standard medical treatment protocols if no to any questions.

- Does the patient have a fever that has been greater than 100.4 degrees?
- Does the person have fever or symptoms of lower respiratory illness (e.g., cough, shortness of breath)?
- Is the patient older than 50 years old?
- Are vital signs not within the following limits?
  - Respiratory Rate >8 or <20
  - O2 Saturation > 94%
  - Heart Rate < 100 bpm
  - Systolic BP at least 100
  - GCS 15

3. Exclusions?

   No to All
   Proceed with standard medical treatment protocols if yes to any questions.

- Chest pain, other than mild with coughing
- Shortness of breath with activity
- Syncope
- Diaphoretic
- Cyanotic
- Respiratory Distress
- Other exclusions defined by the medical director

4. Non-Transport Disposition

   No to All
   Proceed with standard medical treatment protocols if yes to any questions.

- The patient has a support system.
- The patient is competent.
- The patient consents to not being transported.
- The EMS provider notifies local public health authorities.
- Patient should be followed up by local public health authorities, EMS agency community paramedicine programs, or other mechanisms.

Sources:

As of March 5, 2020