



## Rappahannock Emergency Medical Services Council, Inc.

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*Serving Caroline, Colonial Beach, Culpeper, Fauquier, Fredericksburg,  
King George, Orange, Rappahannock, Spotsylvania and Stafford*

To: REMS Council EMS Agencies, Providers, and Designated Infection Control Officers

From: Wayne Perry, Executive Director

Date: Tuesday March 17, 2020

Re: Infectious Disease Information

The REMS Council is receiving frequent updates on the COVID-19 pandemic. The Regional Medical Director is also aware of challenges or potential challenges for patient care, treatment, and transport related to COVID-19. There are frequent updates regarding transmission and a sustained demand for PPE is potentially going to impact patient care and EMS response in the region. There have been some initial discussions about treat/release, voluntary or even compelled transport denial using medical control. Some agencies have begun to look at staffing during surge capacity and PPE shortage. We encourage agencies to have discussions with [PSAP's](#), leadership, OMD's, and DICO's to plan for a variety of situations. Please review the [Healthcare Personnel Risk Assessment](#) tool and the [surge capacity planning workbook](#) on our website for a resource list.

The Regional Medical Director has provided information on the following page for guidelines and suggestions for focused exposure reduction during patient care. This will remain in effect throughout the designated Virginia State of Emergency. All providers and agencies are encouraged to limit procedures which generate aerosol that are not immediately life-saving procedures. In addition, several documents and links are available on our website from the [Virginia Department of Health](#), the [Centers for Disease Control](#) and the [World Health Organization](#) which provide information for healthcare providers. We encourage you to frequently review this and other information on our emergency preparedness page as it is updated and changing as new information is learned. Also, please help us to share this information as broadly as possible.

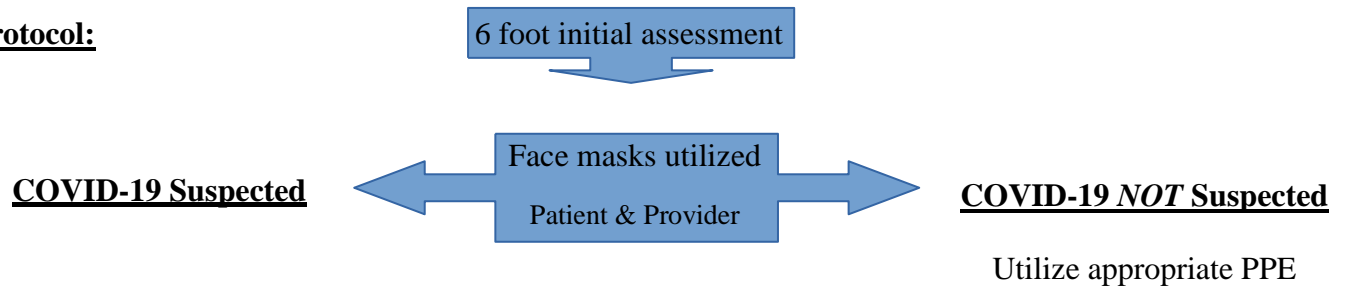
It is imperative that we maintain a well-prepared and educated public health response component of our regional EMS system. Should you have any questions or concerns, please seek clarifications and additional information from a reliable source. If you should need information, we continue to be an information clearinghouse and interagency liaison for the region. As such, we welcome your comments and feedback on how to serve you best. Thank you for your professionalism and dedication to the regional EMS system.

## Suggested Focused Exposure Reduction Procedure COVID-19

**Criteria:** Patients with signs and symptoms of highly infectious illness Ex. [Coronavirus](#) (COVID-19)

- Fever, Cough, Shortness of breath
- Recent travel in the last two (2) weeks to [area of known contamination](#)
- Exposure to persons with risk factors

**Protocol:**



**PPE:** [Gloves, Isolation Gown, N-95, Face shield/eye PPE](#)

[N-95 or Respirator for aerosol procedures](#) (avoid optional procedures that produce aerosolization)

**Airway:** if needed, apply nasal canula/capnography, or NRB with **\*surgical mask overtop**

If Nebulizer/CPAP/Suction/BVM/Intubation/CPR is needed **\*HVAC/exhaust/windows should be open**

Isolate equipment, bags, and kits as to [minimize contamination](#).

**Hospital Transport:** If transport is required take effort to **MINIMIZE Cross Contamination**

Limit or exclude non-essential personnel (students, family, ride-alongs)

**Drivers & Support personnel:** Doff, Dispose of PPE, and Wash/sanitize hands

Close openings between cab & patient compartment

Stop apparatus/open doors if needed during aerosol producing procedures

**DO NOT DRIVE WITH REAR DOORS OPEN**

**Patient Care Providers:** Limit exposure and close contact; Wear face and eye PPE in Patient Compartment

Notify facility early & Enter receiving facility at their direction

Use Exhaust fan & non-recirculated HVAC

**Doff PPE and wash hands for at least 20 seconds prior to leaving patients room**

**Documentation:** List all persons & level of contact – EMS/Fire/Law/Bystander (no contact, indirect, or direct)

Notify EMS Supervisor, Safety Officer, Infection Control Officer, Health and Safety Officer etc.

**Cleaning:** Wear clean and appropriate PPE during cleaning (gloves, gown, goggles/eye protection)

Open Doors during decontamination and [clean non-disposable equipment and touch surfaces per Agency Policy & CDC/VDH Guidelines](#); avoid cross-contamination of items such as bags and equipment.

**PEARL:** If short on gowns/N95 – Reserve use for aerosol-generating procedures. Also consider using cloth patient gowns in absence of isolation gowns.