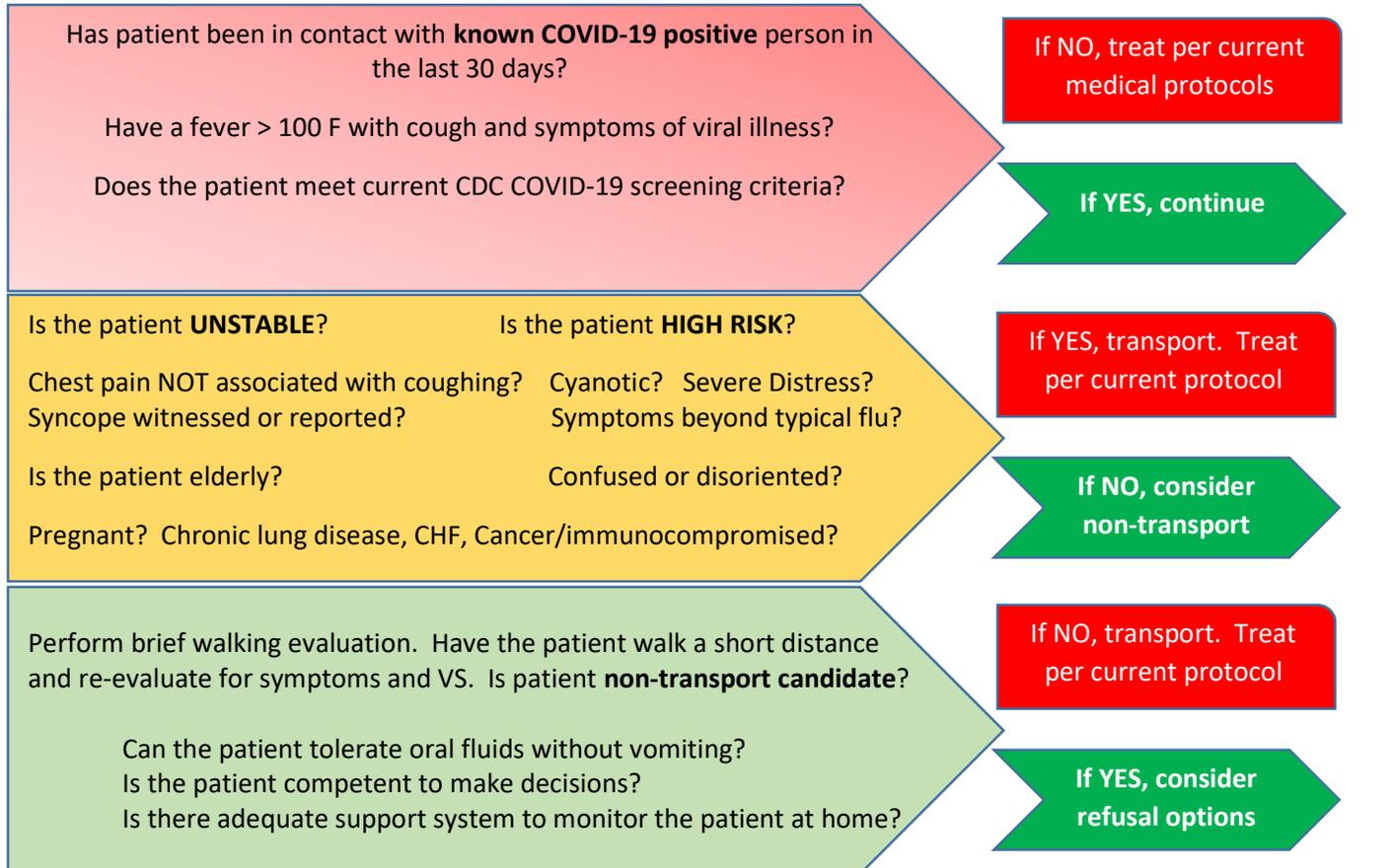


**Rappahannock Regional EMS Council
Temporary Infectious Disease (COVID-19) Patient Management Protocol (as of 04/02/2020)**



Patient Refusal / Non-Transport

Provide written guidance and advise the patient:

- You may or may not have the COVID-19 virus. Transport to ED does not guarantee you will be tested
- If you want to be tested, you should contact your primary care physician.
- If not allergic, self-administer Tylenol according to packaging instructions for fever/aches.
- You should rest, drink plenty of water, and stay hydrated.
- You should stay home and avoid contacting others until symptoms have subsided and you are without a fever (un-medicated) for 72 hours.

Treatment / Transport for COVID-19 positive or highly suspected case.

- If hypoxic, provide Oxygen by NRFM and place surgical mask on patient as well
- DO NOT UTILIZE STEROIDS, CPAP, or NEBULIZERS
- Have the patient bring any prescribed rescue-MDI and utilize before/prn during transport
- For severe respiratory distress
 - o Administer Epinephrine IM and/or Magnesium Sulfate IV/IM

Cardiac Arrest management for COVID-19 positive or highly suspected case.

- Apply full PPE before beginning resuscitation.
- DO NOT INTUBATE THE PATIENT – utilize a SGA/BiAD or rescue airway
- Apply and utilize a HEPA filter in-line with the BVM
- Limit personnel performing chest compressions, utilize automated CPR device
- Work cardiac arrest at scene, DO NOT TRANSPORT UNLESS ROSC is achieved
- If pediatric or no ROSC after 15 minutes of BLS/ACLS obtain Code Gray from Medical Control