

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

Purpose – To manage, treat, and/or transport patients that are COVID-19 positive (confirmed or highly suspected) during a public health emergency.

Patients with a PMH of asthma, COPD, or other chronic respiratory condition who are not febrile and have no symptoms of viral illness should be managed medically using traditional respiratory protocols.

Healthcare provider protection:

- Always utilize appropriate PPE based on the current CDC guidelines for EMS.
- Attempt to ascertain symptoms, history, and information from safe distance (by telephone prior to arrival or in-person at safe distance or in well-ventilated/open-space environment.
- Apply a surgical mask to the patient when possible/tolerated to limit exposure.
- Avoid unnecessary contact (limit crew size, limit non-emergency patient interactions, isolate vehicle operators, avoid by-standers or family gathering, etc.). (See guidelines 03/17/20).
- Avoid procedures that generate aerosols and ensure environment has adequate ventilation.

Temporary Patient Care protocol for patients in acute respiratory distress:

- If hypoxic, provide Oxygen by hi-flow NRFM, place surgical mask on patient as well
- DO NOT UTILIZE STEROIDS, CPAP or NEBULIZERS
- Have patient bring any prescribed rescue-inhaler (MDI) and spacer; have patient utilize prior to loading into ambulance and use prn during transport
- Administer 0.3 mg Epinephrine IM (pediatric dose if 0-9 kg: call med control; 10-30 kg: 0.15 mg; > 30 kg: 0.3 mg) and/or
- Administer 2 g Magnesium Sulfate (pediatric dose 25-50 mg/kg – max dose 2 g) IM/IV

Temporary Patient Care protocol for patients in cardiac arrest:

- Do not begin resuscitation until all providers involved are wearing appropriate PPE
- 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 the cardiac arrest at the scene, DO NOT TRANSPORT UNLESS ROSC is achieved
- Attempt to maximize ventilation in the environment and limit exposure to EMS personnel
- For pediatric patient or if there is no ROSC after 15 minutes of BLS/ACLS obtain Code Gray from Medical Control.