TO: All RCEMS Employees and Allied Agencies
FROM: Dave Johnston, EMS Chief
DATE: March 22, 2020
SUBJECT: Modified EMS Responses for COVID-19
REF: EMS Memo 20-10

Summary:
Reno County EMS has modified Personal Protective Equipment (PPE) guidelines and response procedures for emergency responses due to elevated public health threat level from COVID-19.

Personal Protective Equipment Guidelines:
The minimum PPE of an N-95 respirator, eye protection and gloves are to be donned on the following call types:
- Difficulty Breathing
- Fever / Flu Systems
- Unconscious Unknown
- Cardiac Arrest
- Any call where COVID-19 is suspected
- Gowns should be used in addition the above PPE if there is a positive initial screen for COVID-19. Additionally, gowns are indicated when procedures may produce droplets. (Nebulized medications, airway procedures and BVM)

Response procedures:
Reno County Emergency Communications will utilize the Emerging Infectious Disease Surveillance tool to screen for possible COVID-19 patients. Dispatch will alert responding agencies to a possible “Signal 12” patient if the screening is positive. The screening tool may not be effective and responders need to also screen for potential COVID-19 patients prior to coming into close proximity. The steps below are to be followed to prevent responders from becoming contaminated.

- Responders may request the caller’s phone number prior to making contact to screen for COVID-19 symptoms.
- Only a single provider with proper PPE should contact the patient for screening.
- If appropriate the initial screening should be from a distance of at least 6 feet to determine the need for additional providers and appropriate PPE.
- If possible have the patient be brought outside for evaluations.
- Only those providers and supplies needed to provide patient care should come into contact or close proximity to the patient with a positive COVID-19.
- The patient should be immediately fitted with a surgical mask or a non-rebreathing mask to minimize respiratory droplets.
- Exposure at 6 feet or greater and less than 10 minutes provides little risk to clinicians.
- Other providers that are able to remain outside of the 6-foot zone should wear the minimum of surgical masks and gloves for protection.
- Ideally, for patients within a residence, providers not involved in patient care should remain outside, only those supplies and equipment needed for care should be brought to the patient.
- Patients with mild symptoms should be encouraged to self-isolate and
- Patients that appear able to ambulate without exacerbation of their condition should be encouraged to move themselves to the cot when transport is indicated.
- Individuals wanting to accompany the patient will not be allowed to ride in the ambulance. Exceptions will be made for pediatric patients.
- All family riders will be fitted with a surgical mask and must ride, appropriately restrained in the patient compartment. No riders will be permitted in the cab with the driver.
- Prior to transport the driver will appropriately doff all PPE with the exception of the mask and red bag these items. The cab HVAC system should be set to circulate fresh air, no recycle setting.
- In the patient compartment the exhaust fan should be continually operated on HI to vent to the outside during transport.
- The ambulance and equipment must be appropriately disinfected prior to returning to service.

At some point, if COVID-19 becomes prevalent in the community, HFD may discontinue all medical responses with the exception of high-acuity situations, such as cardiac arrest. It is unknown at this time if they will continue to respond to cardiac arrest calls with two engine companies.

As COVID-19 continues to evolve these procedures will no doubt evolve as indicated by community and department needs.