

# Metro Region EMS System General Patient Care and PPE Guidelines for First Responders



## COVID-19 pandemic First Responder General Patient Care Guidelines

### Background:

First Responder agencies, including both Fire Departments and Law Enforcement play a vital role in pre-hospital emergency care. In many areas they are the first providers on scene and perform the initial patient assessment that helps triage additional resource needs. They also play a vital role in caring for life threatening emergencies when present. The COVID-19 pandemic has introduced many challenges and concerns about the safety of providing this important care. PPE supply chain shortages have also placed limitations on many agencies ability to respond. As the situation continues to evolve and PPE supplies remain limited, it is important to prioritize use, maintain responder safety and continue to provide care with a 'greatest good for the greatest number' philosophy.

### Guidelines:

1. All PSAPs should screen for the potential of febrile respiratory illness.
  - a. Query callers for fever and cough or shortness of breath.
  - b. Alert responding agencies of a **"Positive Infectious Screen"**.
  - c. This screen should not slow or prevent the provision of emergency pre-arrival instructions (PAI) or transferring to secondary PSAP for PAI if indicated.
    - i. If transferred the secondary PSAP should screen when practical and notify the Primary PSAP if Infectious screen positive as soon as possible.
    - ii. Primary PSAP shall then alert responding agencies.
2. Approach the scene with standard scene safety practices.
3. **Assign a single responder to initiate the patient assessment (preferably highest level trained)**
4. The provider should perform hand hygiene then don standard droplet PPE.
  - a. Surgical mask (or available equivalent or higher level)
    - i. N95 masks should be reserved for aerosolizing procedures.
  - b. Eye protection
    - i. Put on eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face) upon entry to the patient room or care area. Personal eyeglasses and contact lenses are NOT considered adequate eye protection.
  - c. Gloves
  - d. Disposable gown
    - i. If limited availability, then reserve for aerosolizing procedures.
5. **Perform a "doorway/threshold assessment"**
  - a. **At least 6 feet away, with direct visualization of the patient.**
    - i. **Through closed door or window is preferred.**
  - b. Ask Chief Complaint.
  - c. Ask the patient if they had a recent nebulized treatment.
  - d. Assess mental status.
  - e. Assess respiratory status.
    - i. Respiratory rate.
    - ii. Ability to speak full sentences.

Current as of March 20, 2020

These guidelines may change according to CDC or MDH recommendations.

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6. For patients with normal mental status and no respiratory distress.
  - a. No further patient contact is needed.
  - b. Continue to observe at a distance.
7. If altered mental status, in respiratory distress or other obvious need for care.
  - a. Immediately place mask on patient or toss one in for the patient to don.
    - i. Simple surgical mask or 'Cone' type mask with elastic band is preferred.
  - b. Administer oxygen per normal patient care guidelines.
    - i. Nasal cannula should go under the mask.
    - ii. If higher flow needed, oxygen mask replaces Simple/Surgical, Cone mask.
  - c. **Do Not** administer Nebulizer treatments.
  - d. Perform any life-threatening interventions as needed.
  - e. If additional providers needed, they should have the same PPE.
8. Assist transporting ambulance crew as needed.
9. Upon completion of patient care.
  - a. Discard all disposable PPE at the scene.
    - i. If no patient contact within 6 feet, then discard gloves only.
    - ii. Watch each other removing gear to prevent accidental contamination
    - iii. If uniform 'coveralls' are used, remove and bag prior to leaving the scene.
    - iv. Use gloves and hand hygiene when handling contaminated laundry.
    - v. If uniform or equipment is contaminated, it can be washed with standard laundry soap
    - vi. Reusable goggles, wraparound framed safety glasses or face shield should be cleaned after each use with disinfectant wipes or a 10:1 bleach solution.
  - b. Perform hand hygiene.

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