Federal Healthcare Resilience Task Force EMS/Prehospital Team

911 and EMS Algorithms

Product (EMS07) Purpose

Intended to provide procedural guidance to Public Service Answering Points (PSAPs) and EMS agencies on the appropriate EMS practitioner safety procedures and COVID-19 community mitigation procedures that are required to protect the public safety personnel, the patient's family members, hospital staff, and future EMS patients treated in the potentially contaminated response vehicle.

Developed By

The Federal Healthcare Resilience Task Force (HRTF) is leading the development of a comprehensive strategy for the U.S. healthcare system to facilitate resiliency and responsiveness to the threats posed by COVID-19. The Task Force's EMS/Pre-Hospital Team is comprised of public and private-sector Emergency Medical Service (EMS) and 911 experts from a wide variety of agencies and focuses on responding to the needs of the pre-hospital community. This Team is composed of subject matter experts from NHTSA OEMS, CDC, FEMA, USFA, US Army, USCG, and non-federal partners representing stakeholder groups and areas of expertise. Through collaboration with experts in related fields, the team develops practical resources for field providers, supervisors, administrators, medical directors and associations to better respond to the COVID-19 pandemic.

Intended Audience

State, Local, Tribal, and Territorial Governments (SLTTs) Emergency Medical Services (EMS) and 911 communication personnel

Expected Distribution Mechanism

EMS.gov, 911.gov, Stakeholder Calls, EMS stakeholder organization's membership distribution Email mechanisms, USFA website, Social Media posts

Primary Point of Contact

NHTSA Office of EMS, nhtsa.ems@dot.gov, 202-366-5440

Date Published

April 17, 2020

April 17, 2020

This guidance applies to all EMS delivery models including but not limited to; free standing, municipal third-service; fire-based, hospital-based, private, independent, volunteer, and related emergency medical service providers.

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^{*} This is a non-federal website. Linking to a non-federal website does not constitute an endorsement by the U.S. government, or any of its employees, of the information and/or products presented on that site.

911 and Emergency Medical Services (EMS) Algorithms

This document is based on published CDC guidance* with input from the EMS community

911 Call Taking & Dispatching these are steps to be considered as part of the 911 center's screening process

Determine if the call is for emergent or non-emergent support

•If requesting non emergent information, then direct call to 211/311/411/health dept, or, if permitted by policy, direct non-emergent medical call to community web-based COVID-19 Symptom Checker**, nurse call line or telemedicine call line



Inquire if person may have signs or symptoms and/or risk factors for COVID-19

- Symptoms may include fever, cough, sore throat, and shortness of breath**
- Emergency signs include trouble breathing, persistent chest pain or pressure, new confusion or inability to arouse, bluish lips or face
- •Risk Factors*** include age >/= 65, being in contact with a suspected or confirmed Covid-19 infected patient within the past 2 weeks, living in a nursing home, being immunocompromised, and having a chronic medical condition



Evaluate if person meets appropriate criteria and should be transported as a Person Under Investigation (PUI)****



Communicate information on possible PUI to EMS, fire, and law enforcement before arrival



Utilize medical dispatch procedures in coordinatation with EMS Medical Director and/or local/state public health department(s)

^{*}Interim EMS Guidance // **CDC Sympton Checker // *** CDC Guidance on Underlying Conditions // **** CDC PUI definition // **** CDC guidance on aerosol generating procedures //CDC clinical guidance management patients //

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FIRST RESPONSE (EMS, FIRE) ARRIVAL, TRANSPORT, AND TRANSFER

A single EMS clinician should don appropriate PPE for patient with confirmed or suspected COVID-19 and assess patient separate from all responding personnel not wearing PPE

If the patient meets PUI criteria all clinicians should wear approprite PPE
If the patient does not meet PUI criteria, at a minimum wear universal precautions and a respirator/mask

Follow appropriate PPE precautions for aerosol-generating procedures*****

Notify receiving healthcare facility that patient has signs or symptoms suggestive of COVID-19 and underlying medical conditions such as diabetes, etc.

Keep patient separated from other people as much as possible; consider placing facemask on patient if coughing or respiratory symptoms

Do not allow family members or other contacts of adult patients to ride in ambulance
If patient is a minor, allow one family member or guardian to ride in ambulance with patient

Isolate ambulance driver from patient compartment and keep pass-through doors and windows tightly shut

Follow healthcare facility procedures for transfer of patient to receiving healthcare facility

Follow appropriate protocols for cleaning and disinfection of vehicle and equipment

Doff PPE following appropriate protocols after decontamination of ambulance

Complete documentation

Notify chain of command if known, unprotected exposure occurred and follow exposure/risk management policies

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