



Oakland County Medical Control Authority
***Emergency* System Protocols**
Treatment of Patients During Coronavirus Pandemic

September 3, 2020

Section 11.02

Treatment of Patients During Coronavirus Pandemic

Purpose: To reduce the exposure risk of EMS personnel when providing treatment during COVID-19.

I. Requests for EMS should be screened for risks of COVID-19:

- a. Fever
- b. Chills
- c. Cough
- d. Shortness of Breath
- e. Sore Throat
- f. Loss of Sense of Taste/Smell
- g. Muscle Pain
- h. Headache

Patients who screen positive for any of the above will be treated as a possible COVID-19 patient.

II. Avoid cross contamination

- a. Do not reach into drug box/ bag, or medical bag(s) with contaminated gloves.
- b. Close drug box/bag, and medical bag(s) when performing aerosolized procedure to prevent contamination of drug box/ bag and medical bag(s).
- c. When treating patient in the ambulance, activate patient compartment exhaust fan at maximum level.
- d. When available, use HEPA filtration to filter expired air from the patient. If a HEPA filter is not available, attempt to contain exhausted air by another means.
- e. If rescue breathing is performed, avoid hyperventilation, whenever possible.

III. Cardiac Arrest

- a. For patients in cardiac arrest follow the Cardiac Arrest General Protocol 5-1 with the following modifications:
 - i. Administer a nasal cannula to deliver oxygen. Place a surgical mask over the patients nose, mouth and nasal cannula.
 - ii. Avoid performing rescue breaths, and do not attempt ET intubation.
 - iii. If the airway must be secured, utilize only a supraglottic airway device. **Refer to Emergency Airway Protocol, 7-9.**
 - iv. **CAUTION:** Do not allow oxygen to flow across the defibrillator's adhesive pads during defibrillation.
 - v. Patients in continuous cardiac arrest **WILL NOT BE TRANSPORTED**, regardless of mechanical CPR device. Resuscitation will either be terminated on scene or ROSC



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sustained (continued palpable pulse and systolic BP \geq 60 mmHg for >5 minutes)

BEFORE moving the patient to the patient compartment of a vehicle.

- vi. For witnessed arrests inside the patient care compartment:
- Pull vehicle to the side of the road and perform resuscitation in full PPE, with doors **OPEN**.
 - If patient has mechanical CPR device in place and has lost ROSC, the device may be resumed with continued transport to the hospital, as long as all personnel in the patient compartment have sufficient respiratory PPE in place.