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CLINICAL BULLETIN			
Bulletin #	Title		Date Issued
#2020-04-08-01	Release of Response to Pandemic, Phase 2 Protocols and Provider Education Material		8 Apr 2020
Superseded	Released By:	Source:	Pages
N/A	Maine EMS	Maine EMS; U.S. CDC	1 Page and Attachments
Approved By:	J. Sam Hurley, MPH, EMPS, NRP Maine EMS Director	Matthew Sholl, MD, MPH State Medical Director	

As the current COVID-19 pandemic has continued to progress in the state, it is projected that patient volume will likely surge, potentially causing a significant strain on hospitals. This strain may lead to insufficient availability of hospital beds and resources to care for patients, creating a crisis in the continuum of patient care. Maine EMS is committed to providing guidance and patient care protocols to decompress such a strain to the greatest extent possible.

The State Medical Directors *have authorized use of the Phase 2 Pandemic Response protocol by EMS Clinicians effective at 0800 hrs on Friday, 10 Apr 2020, as Maine EMS will be operating under Phase 2 conditions as of that time.* The procedures outlined in Phase 2 are specific to EMS response to the 2020 COVID-19 pandemic. EMS Clinicians should, in addition, follow Phase 1 procedures.

To ensure EMS system preparedness, the State EMS Medical Directors and Maine EMS are releasing the Phase 2 Pandemic Response Protocol with its accompanying educational materials today. EMS Clinicians should review the material to prepare for Friday’s “go-live” date.

The Phase 2 Pandemic Response protocol education for EMS Clinicians is currently available on MEMSEd for responders of all Maine EMS levels of licensure. Please note that the training is part of the same course as the Phase 1 training but is located on the course page as a new module titled “Phase 2 – Pandemic Response.” The protocol itself, as well as supplemental resources for protocol use, will be available from the course site on MEMSEd, the Maine EMS website, and will be distributed to the EMS Regions, services, and to EMS Clinicians. Questions regarding the protocol should be directed to your service medical director(s), Regional Medical Director(s), and/or Maine EMS.

**Attachments:**

- Protocol: Pandemic Response, Phase 2
- Physician Phase 2 Quick Sheet (Reference Document for On-Line Medical Control)
- Patient Home Care Instructions
- Return to Care Instructions
- Infection Control Instructions

# Pandemic Response Phase 2, # 1

This protocol is specific to the 2020 COVID-19/SARS-CoV-2 response. It is authorized by the authority of the MDPB by the Maine EMS Medical Director for use during times of severe strain on the healthcare system. This is NOT a standing protocol, but will be enacted when significant strain is recognized within the EMS or hospital system. Strain may occur due to lack of staff, lack of resources, or both. Services are asked to collaborate **CLOSELY** with their partner hospitals as well as with Maine EMS, who would consider enacting parts of this protocol based on demonstrated need.

This protocol is divided into steps which are on unique pages. Maine EMS, the MDPB, and the State Medical Directors will use the elements of the following protocol that are most likely capable of addressing the community in question's needs.

**Phase 2: Trigger:** Widespread disease in Maine communities with strain on hospitals.

***THIS PROTOCOL IS ONLY AUTHORIZED FOR PATIENTS WITH SIGNS OR SYMPTOMS CONSISTENT WITH COVID-19, including fever and/or symptoms of lower respiratory illness (e.g., cough or shortness of breath).***

**EMT/ADVANCED EMT/PARAMEDIC - Please follow all steps listed in Phase 1, including PPE, social distancing, & limiting providers exposed to the patient.**

**Goal:** To allow Maine EMS personnel to make decisions regarding patient disposition *in the midst of the 2020 COVID-19 pandemic* with the assistance of On-Line Medical Control. This protocol is to be used for patients 16 years and older. It uses a physiologic scoring system called the *Pandemic Medical Early Warning System* (PMEWS) which was created to assist in the decision making regarding a patient's necessity for admission to a higher level of care. It is based on vital signs, including respiratory rate, O<sub>2</sub> saturation, heart rate, blood pressure, temperature, and neurologic status. This score, in combination with history of red flags or burden of chronic disease, helps determine which patients require immediate medical care, delayed medical care, or home care.

EMS providers **MUST** consult with On-Line Medical Control before deciding **not** to transfer a patient. If the patient is not transferred, they must be provided with discharge instructions including: Home Care Instructions (**Phase 2a**), Return to Care Instructions (**Phase 2b**), and Infection Control Instructions (**Phase 2c**).

**For children under 16 years old , consider the severity of disease, DO NOT PERFORM THE PMEWS, and proceed to Phase 2.3**

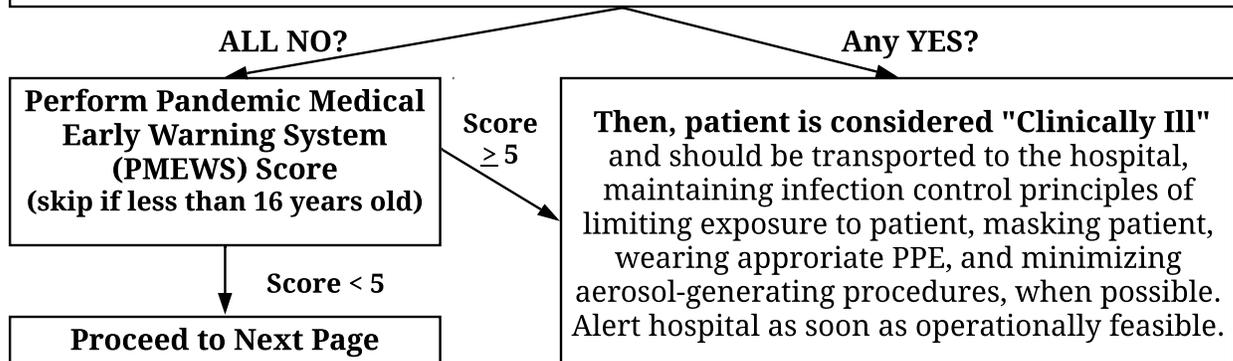
E A P

# Pandemic Response Phase 2, #2

E A P

**Evaluate patient for severity of disease:**

	YES	NO
1. <b>Respiratory Distress?</b> <ul style="list-style-type: none"> <li>• severe shortness of breath,</li> <li>• unable to finish a sentence in one breath</li> <li>• use of accessory muscles</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
2. <b>Increased Respiratory Rate?</b> <ul style="list-style-type: none"> <li>• over 30 breaths per minute in an adult.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
3. <b>Oxygen Saturations less than 93% on room air?</b>	<input type="checkbox"/>	<input type="checkbox"/>
4. <b>Respiratory Exhaustion?</b>	<input type="checkbox"/>	<input type="checkbox"/>
5. <b>Evidence of Severe Dehydration or Shock?</b> <ul style="list-style-type: none"> <li>• SBP less than 90 mmHg and/or DBP less than 60 mmHg</li> <li>• reduced skin turgor,</li> <li>• severely dry mucous membranes,</li> <li>• dizziness on postural changes</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
6. <b>Changes in Mental Status?</b> <ul style="list-style-type: none"> <li>• Any alteration of mental status, agitation, seizures, drowsiness, etc.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
7. <b>Chest pain</b>	<input type="checkbox"/>	<input type="checkbox"/>
8. <b>Patient with worsening symptoms?</b> <i>(Especially in second week of illness)</i>	<input type="checkbox"/>	<input type="checkbox"/>
9. <b>Any history of immunosuppression?</b> <ul style="list-style-type: none"> <li>• Patients treated for HIV, patients receiving chemotherapy, transplant patients, autoimmune disease or immunosuppressive therapy.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>



Pandemic Medical Early Warning System (PMEWS) Score							
Score	3	2	1	0	1	2	3
RR	<8			9-18	19-25	26-29	>30
O2 Sat	<89	90-93	94-95	>95			
Pulse	<40	41-50		51-100	101-110	111-129	>130
SBP	< 70	71-90	91-100	>100			
Temp		<35	35.1-36	36.1-37.9	38-38.9	> 39	
Neuro				Alert	Confused Agitated	Responsive to Voice	Responsive to Pain

# Pandemic Response Phase 2, #3

(continued from Phase 2.2)

## Consider the patient's age.

higher risk = age less than 16 years or greater than 65 years

## Consider patient's past medical history.

Assess for underlying pulmonary, cardiac or renal disease, diabetes or underlying malignancy

## Evaluate the patient's eligibility for home care.

Are there caregivers in the home?  
Is there a separate room where the patient can recover without sharing immediate space with others?  
Are there resources for access to food and other necessities?  
Are there medically fragile patients in the home?

## **Discuss the Feasibility of HOME CARE with OLMC.**

Patients **most appropriate** for home care include those with the following characteristics:

1. Meet all criteria for less severe disease (Box 1 previous page)
2. Age is outside the extremes of age (older than 15, less than 65)
3. Is generally healthy without significant burden of underlying medical disease
4. Has support, resources and caregivers in the home with no medically fragile co-habitants

### **If Home Care Deemed Appropriate by OLMC.**

1. Leave the *Maine EMS Pandemic Response Home Care (Phase 2a)*, *Return to Care (Phase 2b)* and *Infection Control (Phase 2c) Instructions*.
2. Leave patient with surgical masks (if available) to wear when others are in their designated room.
3. Consider obtaining a phone number to perform telephone rechecks with the patient.
4. Consider contacting the patient's Primary Care Physician or local public health authorities.
5. Ask the patient to call 911 for worsening of symptoms, including worsening dyspnea.

### **If Home Care Deemed NOT Appropriate by OLMC.**

Transport to the hospital maintaining infection control principles of limiting exposure to patient, masking patient, wearing appropriate PPE, and minimizing aerosol-generating procedures, when possible.

Alert hospital as soon as operationally feasible.

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# Maine EMS Pandemic Response Phase 2

## Physician Quick Sheet



Phase 2 allows EMS clinicians to **not** transport carefully selected, well-appearing patients *after* consultation with **On-line Medical Control (OLMC)** during the COVID-19 pandemic.

Please review the protocol in its entirety as this protocol is a significant change from normal operations; close oversight from OLMC is critical.

To be considered by EMS for non-transport, patient must meet the following criteria:

- EMS completes screening evaluation for severe disease,
  - if negative, then
    - EMS completes the Pandemic Medical Early Warning System Score (PMEWS) for those 16 years and older,
      - if PMEWS<5 (or patient < 16 years old), then
        - EMS considers PMHx and whether appropriate support exists for home care.

Pandemic Medical Early Warning System (PMEWS) Score							
Score	3	2	1	0	1	2	3
RR	<8			9-18	19-25	26-29	>30
O2 Sat	<89	90-93	94-95	>95			
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Temp		<35	35.1-36	36.1-37.9	38-38.9	> 39	
Neuro				Alert	Confused Agitated	Responsive to Voice	Responsive to Pain

Challen K et al. BMCHealth ServicesResearch 2007, 7:33

If all of the above conditions are met, EMS will contact OLMC and discuss whether non-transport is appropriate for the patient.

**OLMC** makes final decision regarding transport or non-transport.

If non-transport is selected, please remind EMS to:

- Leave home care instructions (located in their protocol)
- Leave surgical masks, if available.
- Establish a follow-up plan. There are at least four options for follow-up:
  - EMS follow-up with patient by phone
  - PCP follow-up with patient (EMS provider should initiate from scene if this option is chosen, i.e. EMS contact PCP to arrange follow-up)
  - ED or OLMC follow-up with patient (refer to your ED or hospital follow-up process)
  - Public health resources, if available



Protocols can be found at:  
<https://www.maine.gov/ems/protocols-resources/coronavirus>



# Maine EMS Pandemic Response Home Care Instructions



For more information: [www.cdc.gov/COVID19](http://www.cdc.gov/COVID19)

## What to do if you are sick with coronavirus disease 2019 (COVID-19)

If you are known to have COVID-19 infection, are awaiting the results of testing, or suspect you have been infected, please follow the steps below to help prevent the disease from spreading to other people in your home and community:

### Stay home except to get medical care

Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.

### Call ahead before visiting your doctor

Tell the office that you have or may have COVID-19. This helps them take steps to keep other people safe.

### Separate yourself from others at home

Stay in a specific room away from other people and pets. If possible, use a separate bathroom. Avoid touching your eyes, nose, and mouth.

### Wear a facemask if you are sick

**If you are sick:** You should wear a facemask when you are around other people (e.g., sharing a room or vehicle) or pets and before you enter a healthcare provider's office.

**If you are caring for others:** If the person who is sick is not able to wear a facemask (for example, because it causes trouble breathing), then people who live with the person who is sick should not stay in the same room with them, or they should wear a facemask if they enter a room with the person who is sick.

### Clean your hands often

**Wash hands:** Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.

**Hand sanitizer:** If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.

**Soap and water:** Soap and water are the best option if hands are visibly dirty.

**Avoid touching:** Avoid touching your eyes, nose, and mouth with unwashed hands.

### Cover your coughs and sneezes

Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately wash your hands with soap and water or clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.

### Avoid sharing personal household items

Do not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. Clean items with soap and water.

### Clean all "high touch" surfaces regularly

Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

### Monitor your symptoms

Seek medical attention if your illness is worsening (e.g., difficulty breathing). **Before** seeking care, call your healthcare provider and tell them that you have, or are being evaluated for, COVID-19.

Persons who are placed under active monitoring or facilitated self-monitoring should follow instructions provided by their local health department or occupational health professionals. If you have a medical emergency and need to call 911, notify the dispatch personnel that you have, or are being evaluated for COVID-19. If possible, put on a facemask before emergency medical services arrive.

### Discontinuing home isolation

Patients with confirmed COVID-19 should remain under home isolation precautions until the risk of secondary transmission to others is thought to be low. The decision to discontinue home isolation precautions is made on a case-by-case basis, in consultation with healthcare providers and state and local health departments.

From: <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>



For more information: [www.cdc.gov/COVID19](http://www.cdc.gov/COVID19)

## What to do if your symptoms worsen from coronavirus disease 2019 (COVID-19)

If you develop **emergency warning signs** for COVID-19, seek **medical attention immediately**.

If you call 911, let the dispatcher know if you have COVID-19, are awaiting test results or suspect that you have been infected.

### **Emergency warning signs include:\***

- 1. Difficulty breathing or shortness of breath**
- 2. Persistent pain or pressure in the chest**
- 3. New confusion or inability to arouse**
- 4. Bluish lips or face**
- 5. Lightheadedness or feeling faint**

**\* This list is not all inclusive. Please consult your primary medical provider for any other symptoms that are severe or concerning**

# Maine EMS Pandemic Infection Control Instructions



For more information: [www.cdc.gov/COVID19](http://www.cdc.gov/COVID19)

## Infection control strategies to prevent coronavirus disease 2019 (COVID-19)

If you or your loved one are known to have the COVID-19 infection, are awaiting the results of testing, or suspect you have been infected, please consider these steps to decrease spread of COVID-19:

### Clean your hands often

- **Wash your hands** often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol**. Cover all surfaces of your hands and rub them together until they feel dry.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands.

### Avoid close contact

- **Avoid close contact** with people who are sick
- Put **distance between yourself and other people** if COVID-19 is spreading in your community.

### Stay home if you are sick

- **Stay home** if you are sick, except to get medical care.

### Cover coughs and sneezes

- **Cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow.
- **Throw used tissues** in the trash.
- Immediately **wash your hands** with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.

### Wear a facemask if you are sick

- **If you are sick:** You should wear a facemask when you are around other people (e.g., sharing a room or vehicle) and before you enter a healthcare provider's office. If you are not able to wear a facemask (for example, because it causes trouble breathing), then you should do your best to cover your coughs and sneezes, and the people who are caring for you should wear a facemask if they enter your room.
- **If you are NOT sick:** You do **not** need to wear a facemask in the home unless you are caring for someone who is sick (and they are not able to wear a facemask). Facemasks may be in short supply and they should be saved for caregivers.

### Clean and disinfect

- **Clean AND disinfect frequently touched surfaces daily.** This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
- **If surfaces are dirty, clean them:** Use detergent or soap and water prior to disinfection.