# Pandemic Response - Low Risk Patient Disposition During Hospital Surge # 1

This protocol is specific to the 2020 COVID-19/SARS-CoV-2 response. It is authorized by delegation of authority of the MDPB to the Maine EMS Medical Directors for use during the COVID-19 Pandemic.

This protocol is divided into steps which are on unique pages. These steps are essential for EMS clinician and patient safety and **must** be exercised during all patient encounters during the pandemic. Maine EMS, the MDPB and the State Medical Directors expect these steps to remain in place until public health experts determine that these increased safety measures are no longer necessary. These steps **must** be considered in **all** patient encounters while this protocol is in place.

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, chills, symptoms of lower respiratory illness (e.g., cough or shortness of breath), fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea, vomiting, or diarrhea.

EMT/ADVANCED EMT/PARAMEDIC - Follow all steps listed in the *Pandemic Response Protocol (PRP 1.1, page 161)*, including PPE, social distancing, & limiting clinicians 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 <u>16 years and older</u>. 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 clinicians **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 (**PRP 2a, page 167**), Return to Care Instructions (**PRP 2b, page 168**), and Infection Control Instructions (**PRP 2c, page 169**).

For children under 16 years old, consider the severity of disease, DO NOT PERFORM THE PMEWS, and proceed to PRP 2.3 (page 166)

E A P

# Pandemic Response - Low Risk Patient Disposition During Hospital Surge # 2

		Evaluate patient for severity of disease:								
		Evaluate patient for severity of disc	YES	NO						
	P	1. Respiratory Distress? • severe shortness of breath,								
ı		<ul> <li>unable to finish a sentence in one breath</li> <li>use of accessory muscles</li> </ul> 2. Increased Respiratory Rate?								
E A		<ul> <li>over 30 breaths per minute in an adult.</li> <li>Oxygen Saturations less than 93% on room air?</li> </ul>								
		4. Respiratory Exhaustion?								
		5. Evidence of Severe Dehydration or Shock?  • SBP less than 90 mmHg and/or DBP less than 60 mmHg								
		<ul> <li>reduced skin turgor,</li> <li>severely dry mucous membranes,</li> <li>dizziness on postural changes</li> <li>6. Changes in Mental Status?</li> <li>Any alteration of mental status, agitation, seizures, drowsiness, etc.</li> </ul>								
		7. Chest pain								
		8. Patient with worsening symptoms?								
ı		(Especially in second week of illness)  9. Any history of immunosuppression?  • Patients treated for HIV, patients receiving chemotherapy,								
		transplant patients, autoimmune disease or immunosuppre	essive inerapy.							
		ALL NO?	Any YES?							
		(PMEWS) Score (skip if less than 16 years old)  ≥ 5  and should be to maintaining infollimiting exposure	Then, patient is considered "Clinically Ill" and should be transported to the hospital, maintaining infection control principles of limiting exposure to patient, masking patient,							
		Score < 5 aerosol-generating	wearing approriate PPE, and minimizing aerosol-generating procedures, when possible. Alert hospital as soon as operationally feasible.							

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 (C)		<35	35.1-36	36.1-37.9	38-38.9	> 39					
Neuro				Alert	Confused Agitated	Responsive to Voice	Responsive to Pain				

# Pandemic Response - Low Risk Patient Disposition During Hospital Surge # 3

## (continued from PRP 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 (**PRP 2a**), Return to Care (**PRP 2b**) and Infection Control (**PRP 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 approriate PPE, and minimizing aerosol-generating procedures, when possible.

Alert hospital as soon as operationally feasible.

E A P

# Maine EMS Pandemic Response Home Care Instructions



For more information: 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 clinician'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 clinician 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 clinicians and state and local health departments.

# Maine EMS Pandemic Response Return to Care Instructions



For more information: 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 clinician for any other symptoms that are severe or concerning

https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html?CDC\_AA\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Fsymptoms.html

Page 172 PRP 2b

# Maine EMS Pandemic Infection Control Instructions



For more information: 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.

## Cover your mouth and nose with a cloth face covering when around others

- You could spread COVID-19 to others even if you do not feel sick.
- The cloth face covering is meant to protect other people in case you are infected.
- Everyone should wear a cloth face covering in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.
- Do NOT use a facemask meant for a healthcare worker. Currently, surgical masks and N95 respirators are critical supplies that should be reserved for healthcare workers and other first responders.
- Continue to keep at least 6 feet between yourself and others. The cloth face covering is not a substitute for social distancing.

## **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.