



ALABAMA DEPARTMENT OF PUBLIC HEALTH


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State Health Officer



March 6, 2020

MEMORANDUM

TO: Public Safety Answering Points (PSAPs), 911 Centers, EMS Dispatch Centers
Emergency Medical Services Providers

FROM: Stephen Wilson, B.S., NRP, Director
Office of Emergency Medical Services 

William Crawford, M.D., FACEP
State Emergency Medical Services Medical Director 

SUBJECT: COVID-19 (Coronavirus) Guidance

The Alabama Department of Public Health Office of Emergency Medical Services (OEMS) has worked in conjunction with the Alabama Trauma Communications Center and the Alabama 9-1-1 Board to develop guidelines for suspected COVID-19. In order to assist and protect Alabama's first responders in providing the best care to the citizens of Alabama, the OEMS recommends that all dispatch centers and all emergency medical services providers follow the guidance in the link below and use the attached flow diagram for assistance in the treatment/transport of suspected Coronavirus cases.

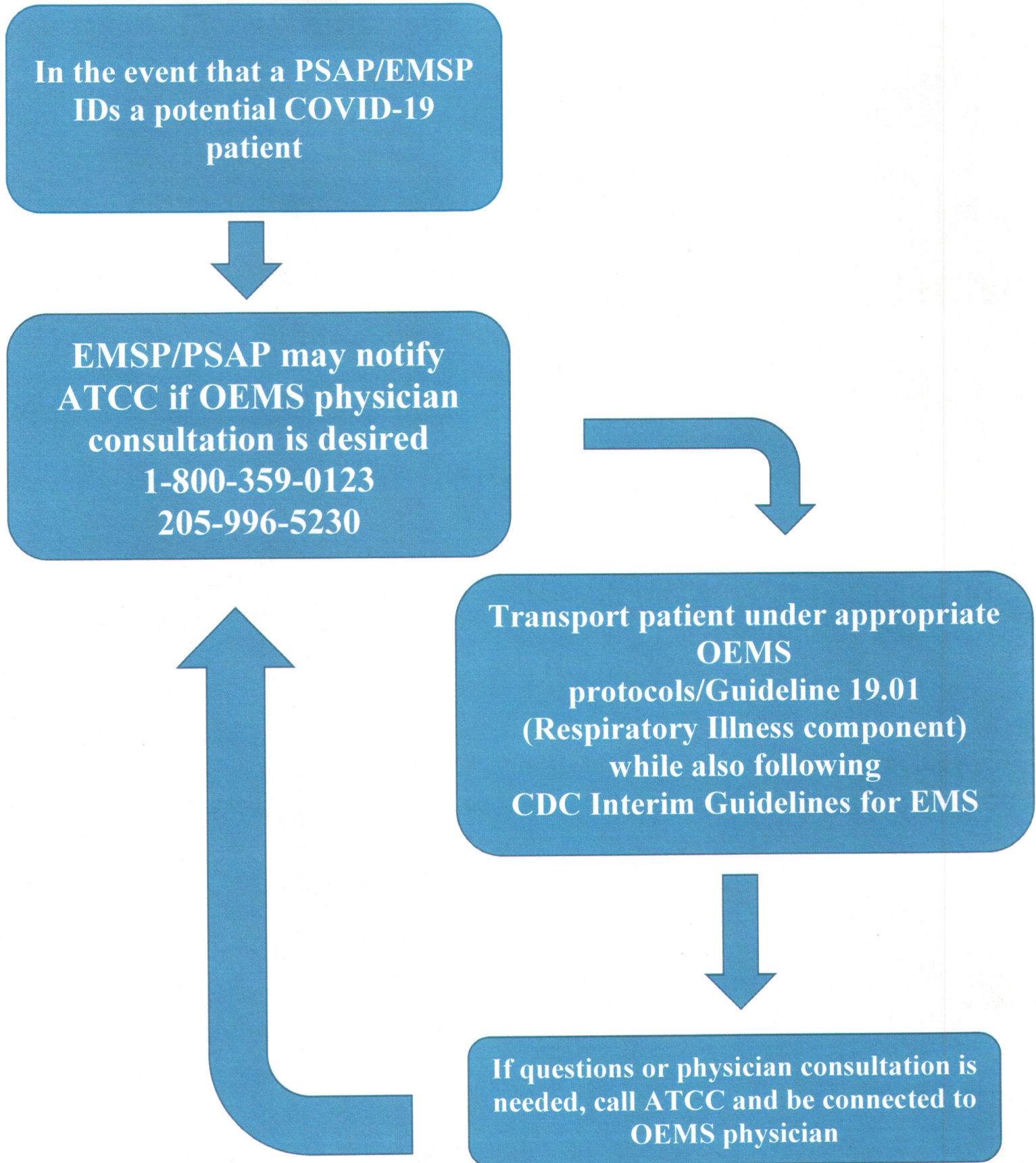
All EMS providers are required to follow this guideline which provides EMS personnel access to an OEMS physician for additional guidance. Guidance may include information on appropriate personal protective equipment use, patient treatment, and hospital destination decisions. Currently, patients may be transported to normal destination hospitals as outlined in the EMS protocols. EMS providers are encouraged to limit the number of EMS personnel caring for suspected COVID-19 patients to the minimum number required for patient care.

The Centers for Disease Control has provided guidance to PSAPs/911/EMS dispatch centers and EMS providers which can be found at www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-for-ems.html and on the OEMS webpage under Health and Medical Preparedness. Due to changes in guidance and the release of updated information, we encourage you to check these websites frequently.

If you have any questions about the Coronavirus, please contact the Office of EMS at 334-206-5383. Through effective communication, assessment, and coordination, we can reduce the amount of potential exposure to this disease.

SW/WC
Attachment

Alabama EMS COVID-19 Flow Diagram



HISTORY AND PHYSICAL EXAM

Signs and Symptoms of Influenza

• Rapid onset of symptoms	• Difficulty breathing with exertion
• Doctor has already diagnosed influenza	• Cough
• Fever	• Shaking chills
• Pleuritic chest pain	• Sore throat (no difficulty breathing or swallowing)
• Nasal congestion	• Runny nose
• Muscle aches	• Headache

KEY POINTS

- All EMS personnel engaged in aerosol generating activities (e.g. endotracheal intubation, bag-mask ventilation, nebulizer treatment, or CPAP [use expiratory filter]) should wear the PPE as described in this treatment protocol.
- When transporting a patient with symptoms of acute febrile respiratory illness, notify the receiving healthcare facility so that appropriate infection control precautions may be taken prior to patient arrival.
- Any nonessential equipment that can be removed from the patient compartment of the ambulance before transport will hasten the time needed to disinfect and return to service.
- After the patient has been removed and prior to cleaning, the air within the vehicle may be exhausted by opening the doors and windows of the vehicle while the ventilation system is running. This should be done outdoors and away from pedestrian traffic.
- Routine cleaning methods should be employed throughout the vehicle and on non-disposable equipment. Routine cleaning with soap or detergent and water to remove soil and organic matter, followed by the proper use of disinfectants, are the basic components of effective environmental management of influenza. Reducing the number of influenza virus particles on a surface through these steps can reduce the chance of hand transfer of virus particles. Influenza viruses are susceptible to inactivation by a number of chemical disinfectants readily available from consumer and commercial sources.

Influenza/Respiratory Illness (continued)**3.23**

TREATMENT	DRUGS/PROCEDURES
<ul style="list-style-type: none"> • Treat using General Patient Care Protocol (3.01). • Use appropriate standard infectious precautions. • Appropriate PPE for suspected cases of influenza includes disposable N-95 mask, eye protection, and disposable non-sterile gloves. Disposable non-sterile gown is optional depending on the situation (follow guidance of service medical director). • If dispatch advises the EMSP of the potential for acute febrile respiratory illness symptoms on scene, do PPE for suspected cases of influenza prior to entering scene. • If the EMSP encounters individuals with symptoms of acute febrile respiratory illness prior to donning PPE, stay more than six (6) feet away from individuals with symptoms and exercise appropriate routine respiratory droplet precautions. If patient has signs or symptoms of influenza or acute febrile respiratory illness, do the PPE described above before coming into close contact with them. • All patients with acute febrile respiratory illness should wear a surgical mask, if tolerated by the patient. • Encourage good patient compartment vehicle airflow/ventilation (turn on exhaust fan) to reduce the concentration of aerosol accumulation when possible. 	<p><u>EMT:</u></p>
	<p><u>Advanced:</u></p>
	<p><u>Intermediate:</u></p>
	<p><u>Paramedic:</u></p>

Infectious Diseases

19.01

EMSP may be first on the scene of a potential infectious disease situation. This guideline is intended to assist EMSP with identifying signs, symptoms, and appropriate management. Based on information from dispatch, EMSP should have a suspicion of any infectious disease potential. EMSP should don the appropriate PPE prior to entering the scene. If EMSP encounters individuals with symptoms of infectious diseases prior to donning PPE, stay more than six (6) feet away from individuals with symptoms and exercise appropriate PPE precautions. Once a specific Serious Infectious Disease (SID) has been confirmed, or has been suspected, the EMSP should contact the TCC for further instructions related to the disease. ADPH plans for specific SID's should be followed upon confirmation or orders from a Medical Control Physician.

Signs and Symptoms of Most Infectious Diseases

1. Rapid onset of symptoms
2. Difficulty breathing with exertion
3. Cough
4. Fever
5. Pleuritic chest pain
6. Nasal congestion
7. Muscle aches
8. Shaking chills
9. Sore throat
10. Headache
11. Diarrhea
12. Fatigue
13. Recent travel to infected regions

Those who exhibit fever, severe headaches, muscle pain, weakness, fatigue, diarrhea, vomiting, abdominal pain, and unexplained hemorrhaging (or bruising), and have recently travelled to the Congo, or the West Central region of Africa, may have contracted the Ebola virus. For those who are suspected of having Ebola, prior to transporting the patient, contact the ATCC for further instructions.

Ambulance Preparation

1. Any nonessential equipment that can be removed from the compartment of the ambulance before transport will hasten the time needed to disinfect and return to service.

2. Ensure good patient compartment vehicle airflow/ventilation (turn on exhaust fan) to reduce the concentration of aerosol accumulation when possible.
3. If necessary seal cabinets and drape interior, including floor and squad bench, with plastic or visqueen.
4. All patients with acute febrile respiratory illness should wear a surgical mask, if tolerated by the patient.

Transport and Arrival at the Hospital

1. When transporting a patient with symptoms of acute febrile respiratory illness, notify the receiving healthcare facility so that appropriate infection control precautions may be taken prior to patient arrival.
2. All EMSP engaged in aerosol generating activities (e.g. endotracheal intubation, bag-mask ventilation, nebulizer treatment, or CPAP [use expiratory filter]) should wear the appropriate PPE
3. The receiving hospital should be contacted as soon as possible. The EMSP should communicate patient condition and potential infectious disease.
4. EMSP should follow hospital procedures upon arrival in regards to patient routing.
5. Routine cleaning methods should be used throughout the transport vehicle and on non-disposable equipment. Routine cleaning with soap or detergent and water to remove soil and organic matter, followed by the proper use of disinfectants, are the basic components of effective environmental management of infectious diseases. Reducing the number of particles on a surface through these steps can reduce the chance of hand transfer of any particles.

Any disposable equipment should be placed in a biohazard bag and disposed of following a biohazard plan for infectious diseases.