



Yolo County Health and Human Services



Kristin Weivoda
EMS Administrator

John S. Rose, MD, FACEP
Medical Director

Date: March 3, 2020

To: Yolo County First Responders and EMS Providers

From: Ron Chapman, MD, MPH, Yolo County Health Officer
Kristin Weivoda, EMS Administrator
John S. Rose, MD, EMS Medical Director

Subject: Novel Coronavirus (COVID-19) Update #3

Healthcare Provider Exposure & Workforce Monitoring

This memo is to update the procedures to be followed when any droplet respiratory illness is present or is suspected during your patient assessment, transport, or during an interfacility transfer. It is intended to provide guidance on exposure risk and workforce monitoring.

Both Influenza and COVID-19, as well as other colds and transmittable respiratory illnesses, are spread via droplet transmission and may be a significant threat to healthcare provider safety. Proper PPE should be taken for protection against exposure during any of these situations, not just for COVID-19.

Routine contact and airborne exposure control precautions will offer protection to any COVID-19 PUI or any other respiratory droplet infection. These precautions consist of placing a surgical mask on the patient and having the healthcare providers wear an N95 or P100 mask.

Recommendation Actions:

- Responding to a patient with signs or symptoms of respiratory infection:
 - Involve the fewest EMS/Fire/Law personnel required to minimize possible exposures.
 - Place a surgical mask on the patient.
 - Any healthcare provider within 6 feet should don an N95 or P100 mask.
 - Cough-generating procedures (e.g., mechanical ventilation, nebulizer treatment) should be avoided during prehospital care.
 - All personnel should avoid touching their face while working.
- During Transport:
 - Restrict the number of providers in the patient compartment to only essential personnel to minimize possible exposures.
 - Prohibit family members and other contacts from riding in the ambulance, if possible.

- If necessary, evaluate family members and other contacts for the presence of fever and lower respiratory symptoms. If either symptom is present, ask them to stay home.
- Set the vehicle's ventilation system to non-recirculating mode in order to maximize the volume of air brought into the vehicle from the outside. If the vehicle has a rear exhaust fan, use it to draw air away from the cab, toward the patient-care area and out the back end of the vehicle.
- If a vehicle is without separate compartments and ventilation must be used, open the outside air vents in the driver area and turn the rear exhaust ventilation fans to the highest setting. This will create a negative pressure gradient in the patient area

EMS/Fire/Law personnel who will directly care for a patient with possible COVID-19 infection, or who will be in the compartment with the patient, should follow Standard Contact and Airborne Precautions, including the use of eye protection. Recommended PPE includes:

- Don a single pair of disposable patient examination gloves. If gloves tear or become heavily contaminated, dispose of the gloves and use a new pair;
- Don a disposable isolation gown;
- Use respiratory protection (i.e., N-95 or higher-level respirator); and
- Wear eye protection (i.e. goggles or disposable face shield that fully covers the front and sides of the face).

EXPOSURE RISK & MITIGATION:

Any EMS/Fire/Law personnel responding to a respiratory illness or unknown/suspected COVID-19 patient shall don appropriate PPE prior to making contact with the patient. The EMS/Fire/Law Enforcement personnel are considered "low risk" contact(s) and:

- May remain on shift and continue providing patient care.
- Shall be self-monitored daily for fever or any cold/flu or respiratory symptoms. If symptoms develop, stop work, isolate at home, and notify employer and public health.

Any EMS/Fire/Law personnel who has a breach in PPE care for or during transport of a patient with known COVID-19, or who is later confirmed to have COVID-19, is considered to have "moderate risk" contact(s) and:

- Shall report the breach immediately to your Supervisor/DICO.
- Supervisor or DICO will call the EMS/Public Health Duty Officer 530-321-3620
 - The breach and exposure risk will be assessed by public health
 - Based on the breach and exposure risk, the individual(s) may:
 - Be excluded from work for 14 days from the date of exposure.

Any EMS/Fire/Law personnel providers who are not wearing appropriate PPE when they encounter an ill respiratory patient, known or unknown for COVID-19 status:

- Shall report the incident immediately to your Supervisor/DICO.
- Supervisor or DICO will call the EMS/Public Health Duty Officer 530-321-3620.

- The EMS/Fire/Law personnel:
 - The EMS/Public Health Duty Officer will follow up with the hospital and determine if the patient meets CDC/Local Health Officer criteria for COVID-19 PUI.
 - If the patient does not meet CDC/Local health Officer criteria for COVID-19, the personnel may return to duty.
 - If the patient does meet criteria for COVID-19 PUI, then follow “Breach” procedure above.

Please do not hesitate to call the EMS/Public Health Duty Officer (530-321-3620), available 24/7, with any questions or concerns that may arise, including while on a scene.

We will continue to provide updates if the situation changes, including if the situation worsens or there is a known risk to our cities or county.