

# FAQs for Emergency Medical Services (EMS)

Information about Coronavirus Disease 2019 (COVID-19) is frequently changing, therefore EMS personnel are encouraged to check the DPH COVID-19 provider [webpage](#) and the CDC [website](#) for current information.

## 1. What are the typical symptoms of COVID-19?

Fever and mild to severe lower respiratory illness (e.g., cough, shortness of breath, chest pain) are the most frequently reported symptoms. Symptoms may also include chills, body aches. Some patients have reported gastrointestinal symptoms such as diarrhea and nausea prior to developing fever and lower respiratory symptoms. Other less commonly reported symptoms include sore throat, headache, and/or hemoptysis. Disease onset is currently believed to be between 2 to 14 days after exposure.

## 2. How is the virus transmitted?

It is believed that person-to-person transmission most commonly happens during close exposure to a person infected with COVID-19, primarily via respiratory droplets produced when the infected person coughs or sneezes or through aerosols produced during procedures (such as intubation or cardio-pulmonary resuscitation). Droplets can land in the mouths, noses, or eyes of people who are nearby or possibly be inhaled into the lungs of those within close proximity. It may also be transmitted by touching a surface or object that has the virus on it and then touching one's mouth, nose, or possibly eyes with unclean hands.

## 3. What should I do if I see a patient with symptoms of COVID-19?

If the 911 call center indicates that the patient is suspected of having COVID-19 or that patient has a fever, shortness of breath/difficulty breathing, or cough, EMS clinicians should:

- Put on PPE before entering the scene

If there are signs or symptoms concerning for COVID-19:

- Follow your Treatment Protocols regarding patients with potential COVID-19 infection.
- Start the initial assessment at least 6 feet from the patient, if possible.
- Provide the patient a surgical mask and ask them to put it on.
- Minimize patient contact to the extent possible until they are wearing a mask.
- If the patient requires oxygen, nasal cannula is preferred. Put the surgical mask over the nasal cannula. Deliver oxygen via mask only if clinically indicated.
- If the patient requires CPR or intubation, see below for additional precautions for aerosol-generating procedures.
- Notify the receiving hospital as soon as possible.

## 4. How do I protect myself during patient encounters?

There are several important ways to protect yourself including hand hygiene, appropriate use of personal protective equipment (PPE), and engineering controls when in the vehicle.

### *Hand Hygiene*

Perform hand hygiene before and after all patient contact, contact with all potentially infectious materials, and before putting on and removing PPE, including gloves. Wash with soap and water for minimum of 20 seconds, or if no hand wash station is available, use alcohol-based hand sanitizer containing at least 60% alcohol.

## *PPE*

EMS clinicians 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 Droplet Precautions as indicated below. Airborne Precautions should be followed if there will be any aerosol generating procedures (See Question 5)

- Disposable patient examination gloves
- Isolation gown (if there are shortages of gowns, they should be prioritized for aerosol-generating procedures, care activities where splashes and sprays are anticipated, and high-contact patient care activities that provide opportunities for transfer of pathogens to the hands and clothing of EMS clinicians (e.g., moving patient onto a stretcher).
- Surgical mask
- Eye protection (i.e., goggles or disposable face shield that fully covers the front and sides of the face).

## *Protection in the vehicle*

- When possible, use vehicles that have isolated driver and patient compartments that can provide separate ventilation to each area.
- If using a vehicle without an isolated driver compartment and ventilation, open the outside air vents in the driver area and turn on the rear exhaust ventilation fans to the highest setting in order to create a negative pressure gradient in the patient area.
- If drivers will be involved in patient contact (e.g., moving patients onto stretchers), they should wear all recommended PPE listed above.
- After completing patient care and before entering an isolated driver's compartment, the driver should remove and dispose of PPE and perform hand hygiene to avoid soiling the compartment. If the transport vehicle does **not** have an isolated driver's compartment, the driver should continue to wear a mask during transport.

## **5. What Personal Protective Equipment should EMS providers use if performing an aerosol-generating procedure such as Intubation or CPR on a patient with possible COVID-19?**

- EMS clinicians should wear a N-95 respirator or higher, gloves, gowns, and eye protection.
- EMS clinicians should ensure bag-mask devices and other ventilatory equipment, are equipped with HEPA/Virus filtration to filter expired air.
- If possible, the rear doors of the transport vehicle should be open, and the HVAC system should be activated during aerosol-generating procedures. This should be done away from pedestrian traffic.

## **6. What are the environmental cleaning recommendations?**

- After transporting a patient with suspected COVID-9, leave the rear doors of the transport vehicle open to allow for sufficient air changes to remove potentially infectious particles.
- Coronaviruses are inactivated by EPA-registered disinfectants if used correctly.
- Clean and disinfect using EPA-registered hospital disinfectants as recommended by their Instructions For Use (IFUs), paying attention to the wet contact time required.
- Wear a disposable gown and gloves when disinfecting the vehicles or surfaces. A face shield or facemask and goggles should also be worn if splashes or sprays during cleaning are anticipated.
- Properly dispose of PPE according to protocol.
- Follow waste management policy per protocol.

### **For more information**

Refer to CDC's [Interim Guidance for Emergency Medical Services \(EMS\) Systems and 911 Public Safety Answering Points \(PSAPs\) for COVID-19 in the United States](#) and the [LAC DPH Provider COVID website](#).

