**Purpose:**

1. To identify patients that are safe to assess and not transport to a hospital during widespread cases of confirmed COVID-19 patients.
2. To maintain the highest possible standards of medical care for as many patients as possible.
3. To recognize that the transport of non-critically ill individuals with possible COVID-19 infections may not be in their nor the general public’s best interest.

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| **ALL PROVIDERS**  |

1. Initial Assessment:
	1. EMS clinicians should wear appropriate PPE before entering the scene and assume any patient may have COVID 19.
	2. Initial assessment should begin from a distance of at least 6 feet from the patient and be limited to one EMS provider if possible.
2. Patient assessment:

Asymptomatic

Just concerned about COVID-19 or COVID-19 exposure?

* Advise the patient that no transport is indicated and no in person medical care advised per CDC recommendations and provide patient with Home Resources Handout with hotline and virtual visit information. If patient still wants to be transported, contact medical control. Follow Medical Controls direction regarding transport.

Symptomatic. Assess for signs and risk factors.

* 1. Does the patient only have symptoms of an upper respiratory viral illness?

Ex: cough, nasal and chest congestion, sore throat, body aches.

* 1. Is the patient less than 60 years old?
	2. Patient has no significant comorbidities (diabetes, heart disease, chronic lung disease (COPD/Asthma, etc), chronic renal disease (on dialysis), liver disease, cancer, autoimmune disorders, chemotherapy patients, patients on immunosuppressant medications and pregnant women)?
	3. Are vital signs within these acceptable limits?
		1. Resp. Rate: 8-20 breaths per minute or age appropriate limits
		2. O2 Sat: greater than or equal to 92%
		3. Heart Rate greater than 50 and less than 110 bpm or age appropriate limits
		4. Systolic BP 90 or greater than age appropriate lower limits
		5. GCS: 15
	4. If YES to all of the above: Patient is a candidate for non-transport. Proceed to Exclusions.
	5. If symptoms more than just upper respiratory viral illness: proceed with medical treatment under appropriate protocol.
	6. If NO to any:

Unless health system is overwhelmed (determined by community incident command), treat and transport.

If the health system is overwhelmed and you feel the patient does not need to be transported, contact Medical Control. If Medical Control agrees that patient does not need transport, follow Medical Control direction and provide patient with Home Resources Handout with hotline and virtual visit information.

1. Exclusions:
	1. Chest pain, other than just with coughing.
	2. Shortness of breath with activity (that is more than usual).
	3. Syncope.
	4. Cyanotic.
	5. Respiratory Distress.
		1. Word Counting: Ask the patient to take a deep breath and count as high as they can.
		2. If they can count to 15+ in the same breath, they are probably not in respiratory distress.
	6. ***IF YES TO ANY:***
		1. Unless health system is overwhelmed (determined by community incident command), treat and transport.
		2. If the health system is overwhelmed and you feel the patient does not need to be transported, contact Medical Control. If Medical Control agrees that patient does not need transport, follow Medical Control direction and provide patient with Home Resources Handout with hotline and virtual visit information
	7. If NO to all: Proceed to Non-Transport Disposition.
2. Non-Transport Advisement
	1. If either of the following conditions are met, patient will be advised no transport is indicated.
		1. Patient can take care of themselves and has access to resources.
		2. Patient has a support system that will take care of them.
	2. Suggested wording

"*Based on your age, medical history, and our current assessment, you may have COVID-19 but your condition is not currently severe.  Unfortunately, there is currently little we can do to treat COVID-19 besides rest, hydration and taking acetaminophen and/or NSAIDS for pains and fever. Fortunately, you don't meet criteria for evaluation in the emergency department. In order to limit exposures and preserve resources, we recommend no transport for you to the hospital at this time but will give you alternative information regarding home care, alternative access and recommendations.  If you want additional help or assessment, please contact a hotline or get a virtual visit with the contact information listed on the handout.  There are symptoms listed on the top of this handout indicating need for emergency medical care and if you or your family develop any of those criteria, do not hesitate to call us again or go directly to the emergency department.”*

* 1. If patient still wants to be transported, contact medical control. Follow Medical Controls direction regarding transport.
1. Transport to ED:
	1. If the patient is not safe for Non-Transport, transport them to the ED of their choice.
	2. ASAP, notify the receiving facility that the patient has a potential COVID-19 infection.
	3. Keep the patient separated from other people as much as possible.
	4. Family/other contacts **should not** ride in the transport vehicle unless absolutely necessary.
* IF family rides in the transport vehicle, they should wear a facemask.

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| Age | Pulse Range | Respiratory Rate | Systolic BP Lowest Normal |
| Newborn | 120-160 | 30-60 | 60 |
| Up to 1 year | 100-140 | 30-60 | 70 |
| 1-3 years | 100-140 | 20-40 | 76 |
| 4-6 years | 80-120 | 20-30 | 80 |
| 7-9 years | 80-120 | 16-24 | 84 |
| 10-12 years | 80-120 | 16-20 | 90 |
| 13-14 years | 60-100 | 16-20 | 90 |