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There is growing number of known cases of COVID-19 in Santa Barbara County, and it is imperative that everyone continues procedures to reduce the risk of exposure. General infection control procedures like handwashing, equipment disinfection, social distancing, and wearing appropriate PPE are critical for your safety as well as reducing disease transmission. This guidance provides revised procedures to help identify individuals with potential Aerosol Transmissible Diseases (ATD), including COVID-19, as well as appropriate infection control procedures to minimize the likelihood of exposure.

To all prehospital providers:

- SARS Co-V-2 (virus responsible for COVID-19) is an emerging pathogen
- We are still learning its clinical characteristics; transmissibility, symptoms, duration, susceptibilities
- Patients can report various symptoms, and often report common symptoms in unique ways
- The “common” symptoms of COVID-19 become clearer as more people are infected, but there will always be atypical presentations. For example, a fair number of COVID-19 patients are losing their sense of taste and smell.
- It is incumbent on us as healthcare providers to be especially careful and error on the side of caution
- Wearing appropriate PPE dramatically decreases the risk of an exposure
- Basic PPE (surgical mask, gloves, eye protection) should be worn on all calls
- Full PPE (N95 or p100, gloves, gown, eye protection) should be put on immediately if you have any concerns for COVID-19
- Report any unprotected exposures per [Policy 506 – Communicable Disease Exposure Protocol for Emergency Responders](#)
- The number of cases of COVID-19 is expected to increase dramatically, as will the potential for exposure, both at work and in the community
- The most effective ways to prevent infection and/or transmission are:
 - Wear PPE as advised above
 - Wash your hands frequently, especially after every patient contact
 - Change your clothes before getting into your vehicle after your shift.
 - Wash uniforms after every shift

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Version 2 – March 26, 2020

AEROSOL TRANSMISSIBLE DISEASE (ATD) SCREENING AND RESPONSE

FOR ALL PATIENTS, DON STANDARD BODY SUBSTANCE ISOLATION PRECAUTIONS AND ENTER THE SCENE
MAINTAIN AT LEAST A SIX (6) FOOT DISTANCE AND DETERMINE THE FOLLOWING:

NOTE: IF DISPATCH ADVISES OF POSSIBLE ATD PATIENT PRIOR TO UNITS ARRIVING ON SCENE, PERSONNEL WILL DON APPROPRIATE PPE (LISTED IN RESPONDER GUIDANCE BELOW) PRIOR TO MAKING ENTRY INTO SCENE.

Fever, signs and symptoms of acute respiratory illness (e.g., cough and/or difficulty breathing) and/or gastrointestinal symptoms (e.g. abdominal pain, nausea/vomiting and/or diarrhea)

NO

CONTINUE WITH
ROUTINE
ASSESSMENT,
CARE AND
TRANSPORT

YES

RESPONDER GUIDANCE

- Limit number of personnel that come in contact with patient, based on severity of condition and level of care needed.
 - Prehospital Care team will don appropriate PPE:
 - NIOSH-certified disposable N95 or P100 (P100 mask required if performing aerosolizing procedures) respirator
 - Eye protection (goggles or face shield)
 - Non-sterile, fluid-resistant gown
 - Exam gloves
- NOTE: DISPOSE OF ALL PPE IF USED ON ANY SYMPTOMATIC PATIENT.**
- Place patient in a surgical mask if it does not interfere with treatment (i.e. oxygen, CPAP, BVM, etc.). *Note: some patients may not be able to tolerate mask due to respiratory symptoms.*
 - Treat patient per SBCEMSA policies and procedures
 - Consider limiting the performance of invasive airway procedures
 - Establish base hospital contact as soon as possible and advise of “possible aerosol transmissible disease patient.” Include signs and symptoms, history of present illness, and any recent travel history
 - If transported, family members and other contacts of patient should not ride in ambulance. If they do, those individuals should be placed in a surgical mask.
 - If transported, ensure that exhaust vent is on in patient compartment to draw air out.
 - Once call is complete, clean all equipment with medical disinfectant wipes labeled to be effective against human coronavirus.