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ADMINISTRATIVE BULLETIN

No. 20-BUL-011

TO: Contra Costa County 911 Field Provider Agencies

FROM: Dr. David Goldstein, EMS Medical Director 

DATE: April 22, 2020

SUBJECT: Treat and Refer During the COVID-19 Emergency

This administrative bulletin serves to aid Contra Costa EMS paramedics in identifying patients that are ideal for 'Treat and Refer' during the COVID-19 emergency. The following acuity table can help determine candidates that meet the criteria of low acuity:

		COMPLAINT	
		MINOR SYMPTOMS MINOR INJURY PM DISCRETION (FOR OTHER LOW ACUITY SYMPTOMS)	MODERATELY/SEVERELY ILL • Concerning complaint or exam • *Abnormal vital signs • ALOC • Increased work of breathing
DEMOGRAPHIC	LOW RISK • Ages < 60 y/o • No comorbidities	Category – LOW ACUITY Crew Action • Assess, Educate, & provide referral • Medic CAN override transport request	Category – MODERATE OR SEVERE ACUITY Crew Action • Assess • Educate • Tx as needed • Transport per protocol
	HIGH RISK • Ages > 60 y/o • Cancer • Pregnancy • Lung/Cardiac/Renal disease • Diabetes • Immunosuppressed • Acute Behavioral Health Issue • Intoxication	Category – POSSIBLY LOW ACUITY Crew Action • Assess • Educate • Refer if appropriate, transport if unsure • Pt must consent to care plan and be able to navigate referral, otherwise transport	

* Asymptomatic patient with COVID-19 can present with low oxygen saturation alone. Patients with O2 sat ≤94% should be transported to the hospital.

All of us recognize that the safety of our patients is a priority. In addition to utilizing the acuity table above, we wish to reiterate that the following principles and parameters should also be observed:

- 'Treat and Refer' candidates should not be difficult to recognize. If after a thorough ALS assessment, the paramedic is unsure if the patient meets criteria for low acuity, the patient should be transported to the hospital. Base station consult should not be used to determine qualification for Treat and Refer.
- A referral must be completed and documented.
- It is important that providers recognize and attempt to mitigate any bias in the decision-making process. If a qualifying patient does not appear to have the ability to successfully navigate a referral and/or still desires transport the ED, strong consideration should be made to facilitate the patient's request depending on the urgency of the patient's condition and the status/capacity of emergency medical system at the time of contact.

