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## ADMINISTRATIVE BULLETIN

No. 20-BUL-014

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**TO:** Contra Costa County Hospitals and EMS/Fire/Law Agencies

**FROM:** Dr. Senai Kidane, EMS Assistant Medical Director *Senai Kidane*

**DATE:** June 17, 2020

**SUBJECT: COVID Updates**

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**This bulletin supersedes the administrative bulletin from 4/7/2020.**

### Principles

1. Although the COVID-19 pandemic has not yet overwhelmed the emergency healthcare system in Contra Costa County, we must prepare for the possibility that infections and outbreaks could be our reality for the next 1-2 years.
2. Each day, we are learning more about how the novel coronavirus behaves and the varied ways it manifests in patients clinically.
3. We are better prepared for future surges than we were two months ago, including ensuring providers have adequate supply of PPE.
4. Donning of appropriate PPE appears to be effective at preventing widespread transmission to healthcare workers.

### General Respiratory/Airway Management Guidance During the Ongoing COVID-19 Pandemic

1. It is difficult to discern a COVID-19 patient with precision based on signs and symptoms alone. Avoid aerosol generating procedures (CPAP, nebulized medications, suctioning, BVM, advanced airway) unless absolutely necessary (ex. moderate-severe respiratory distress, respiratory failure).
2. When a high-risk aerosol generating procedure is required on any patient, the provider is recommended to wear full PPE including N95/P100, gown, gloves, and eye protection (ex. goggles, face shield).
3. Utilization of BVM ventilation and I-Gel, often required for impending or present respiratory failure (including cardiac arrest), should proceed when indicated per prior protocols. Maintain a continuous seal with any BVM application, e.g., if possible, assign two personnel to BVM: one to secure and ensure the seal, the second to perform the ventilation.
4. BVMs, I-Gels, and other ventilatory equipment should be equipped with HEPA/viral filters to minimize exposure to personnel. Use with CPAP or nebulized treatments can vary with

product. If using in-line sampling capnography as well, make sure the filter is placed closest to the patient.

5. Avoid ETT/intubation via direct laryngoscopy if possible as it requires proximity to the patient's face and possibly a pause in CPR.
6. Aerosol-generating procedures should be performed outside or with the rear doors of the ambulance opened if time permits and/or with the HVAC system and exhaust fan activated when in the ambulance. This should be done away from pedestrian traffic.
7. For mild-moderate respiratory distress where albuterol is indicated, administer via MDI if possible.
8. See new Field Treatment Guideline specific to the management of patients that are highly suspected or confirmed to have COVID-19. All symptomatic patients with cough, fever, flu-like symptoms, or other symptoms suspicious of COVID-19 should continue to have a surgical mask placed on them.

### **Cardiac Arrest Management during the COVID-19 Pandemic**

1. Ascertain patient's DNR status and follow Contra Costa County field termination guidelines.
2. CPR will NOT be performed until participating personnel have on full PPE including N95/P100.
3. Limit providers to those necessary and actively participating in the resuscitation.
4. Once cardiac arrest is confirmed, place nonrebreather mask with overlying surgical mask on patient and initiate manual CPR until mechanical CPR device can be applied if available.
5. Initiate passive oxygenation for the first 3 cycles of CPR (6 minutes) by initiating high flow O<sub>2</sub> through the NRB. Ensure an adequate seal and monitor for emesis or pooling secretions.
6. **After the first 3 cycles of CPR, transition to BVM with HEPA/viral filter and BLS airway. If a filter is not available, insert and ventilate through an I-Gel.** Maintain a continuous seal with any BVM application (e.g. if possible, assign two personnel to BVM, one to secure and ensure the seal, the second to perform the ventilation).
7. **If ROSC is achieved, insert I-Gel (if not already placed) and ventilate with HEPA/viral filter attached if available.**

