911 and Emergency Medical Services (EMS) Algorithms

This document is based on published [CDC guidance](#) with input from the EMS community

911 Call Taking & Dispatching
these are steps to be considered as part of the 911 center’s screening process

## Determine if the call is for emergent or non-emergent support
- If requesting non-emergent information, then direct call to 211/311/411/health dept, or, if permitted by policy, direct non-emergent medical call to community web-based COVID-19 Symptom Checker**, nurse call line or telemedicine call line

## Inquire if person may have signs or symptoms and/or risk factors for COVID-19
- Symptoms may include fever, cough, sore throat, and shortness of breath**
- Emergency signs include trouble breathing, persistent chest pain or pressure, new confusion or inability to arouse, bluish lips or face
- Risk Factors*** include age >/= 65, being in contact with a suspected or confirmed Covid-19 infected patient within the past 2 weeks, living in a nursing home, being immunocompromised, and having a chronic medical condition

## Evaluate if person meets appropriate criteria and should be transported as a Person Under Investigation (PUI)****

## Communicate information on possible PUI to EMS, fire, and law enforcement before arrival

## Utilize medical dispatch procedures in coordination with EMS Medical Director and/or local/state public health department(s)

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*Interim EMS Guidance // **CDC Symptom Checker // *** CDC Guidance on Underlying Conditions // **** CDC PUI definition // ***** CDC guidance on aerosol generating procedures // CDC clinical guidance management patients //

Document Developed by the Healthcare Resilience Task Force
Emergency Medical Services (EMS) Prehospital Team
This guidance applies to all EMS delivery models including but not limited to; free standing, third-service; fire-based, hospital-based, private, independent, volunteer, and related emergency medical service providers.
FIRST RESPONSE (EMS, FIRE) ARRIVAL, TRANSPORT, AND TRANSFER

A single EMS clinician should don appropriate PPE for patient with confirmed or suspected COVID-19 and assess patient separate from all responding personnel not wearing PPE

If the patient meets PUI criteria all clinicians should wear appropriate PPE

If the patient does not meet PUI criteria, at a minimum wear universal precautions and a respirator/mask

Follow appropriate PPE precautions for aerosol-generating procedures

Notify receiving healthcare facility that patient has signs or symptoms suggestive of COVID-19 and underlying medical conditions such as diabetes, etc.

Keep patient separated from other people as much as possible; consider placing facemask on patient if coughing or respiratory symptoms

Do not allow family members or other contacts of adult patients to ride in ambulance

*If patient is a minor, allow one family member or guardian to ride in ambulance with patient*

Isolate ambulance driver from patient compartment and keep pass-through doors and windows tightly shut

Follow healthcare facility procedures for transfer of patient to receiving healthcare facility

Follow appropriate protocols for cleaning and disinfection of vehicle and equipment

**Doff** PPE following appropriate protocols after decontamination of ambulance

Complete documentation

Notify chain of command if known, unprotected exposure occurred and follow exposure/risk management policies

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