

Arun Bantval <arbantval@gmail.com>

Fw: Decontaimination

Ankit Parikh <aparikh3191@yahoo.com>
To: Riding <riding@plainsbororescuesquad.org>

Fri, Mar 13, 2020 at 4:49 PM

Please see below in regards to deep decontamination of interior of rigs that Brian performed with his crew on Monday night. Email me or him if you have any questions regarding this cleaning. This is not something that needs to be done every day or after every call, but should be performed after any call that involves possible exposure. If possible, use hospital supplies to clean but we will have supplies available at the Squad and on the ambulances to properly decontaminate items as needed.

Ankit

---- Forwarded Message -----

From: brianjaygould@gmail.com <bri>brianjaygould@gmail.com>

To: "brianjaygould@gmail.com" <bri>strianjaygould@gmail.com>; 'Ankit Parikh' <aparikh3191@yahoo.com>

Cc: 'OIC's PRS' <oics@plainsbororescuesquad.org> Sent: Thursday, March 12, 2020, 09:17:56 AM EDT

Subject: Decontaimination

General:

- All inside and outside door handles/latches/rails
- Where ever one would place a hand to enter or exit the ambulance

Inside Cab:

- · Power switch
- Siren control
- Spotlight controller
- Microphones
- Radio control
- · Steering wheel
- · Turn signals
- · Wiper controls
- Seatbelts
- GPS
- Armrest/Door handle
- Garage door opener
- Call box (inside and out)

Inside:

- Interior cabinet components ***if touched during call
- Bench surfaces
- Refrigerated components (inside and out)
- Light control panel
- O2 control
- Main suction unit
- Portable suction unit and base/release

- AED
- Pulse ox
- Ear thermometer
- Stethoscopes (personal and rig)
- **Blood Pressure Cuffs**
- Pen-Lights
- Stretcher
 - Straps
 - Side rails
 - Yellow bars
 - Black handles
 - All buttons
 - Power loader arms/surface
 - O2 tank

Outside:

- Jumpkits (inside and outside)
- Combination lock on truck
- Sides of door
- Step on back of truck

Miscellaneous:

- Personal radios
- Pens
- Cellphones
- Flashlights
- Trauma shears, knives, etc.

From: Brian Gould brian jaygould@gmail.com> Sent: Thursday, March 12, 2020 8:55 AM To: Ankit Parikh <aparikh3191@yahoo.com> Cc: OIC's PRS <oics@plainsbororescuesquad.org>

Subject: Re: Self-quarantine

IMIHO, the travel issue is somewhat moot since travel isn't happening anyway. However, we do need to form a policy about crews who may have transported a patient who has had any flu symptoms. It takes time for testing to be done, but the crew could be transporting another patient within minutes of the prior patient.

- 1) The truck and crew go out of service for at least 10 minutes after EVERY transport for a full decontamination of the rig. (My decontamination notes to follow)
- 2) Possible relaxation of dress code for calls since it may be necessary for crews to actually wash their clothes between calls. Having a change will be very important. This would be done after any call with flu symptoms.
- 3) I know there have been issues with hand sanitizer, etc. I recommend making sure we have paper towels and a couple crates of Cavicide.
- 4) Send a note to parents of cadets from the chief that we are aware that there might be anxiety about the flu. Talk about our BBP training and history of successful protection, but let them know we will understand if they want to pull their kid from the squad during this crisis.
- 5) Call for crews to stay at the building and leave their uniforms there to be washed every day. Riding members are not to go home in clothes that have been on calls where exposure may have occurred. We give our crews time to don/doff uniforms for calls only and stay at the building in street clothes that haven't been on calls.

- 6) Create a public information officer position in case we have local exposures. You are going to need someone who can keep up with the facts and calmly respond to requests from the community members, other organizations and local press. I am volunteering for that position.
- 7) Purchase as much PPE as you can get ordered ASAP. We can deal with the budget allocation later. Emergencies happen and that is why we have a reserve.

On Thu, Mar 12, 2020 at 12:22 AM Ankit Parikh aparikh3191@yahoo.com wrote:

The Line has agreed to implement a self-quarantine policy for people who are traveling. Anyone traveling will have to notify the Line of their travel plans and upon returning will be placed on a self-quarantine for a period of time. This obviously depends on when and where the travel occurred. This basically entails that the person will be barred form coming to the Squad for that period of time so that it gives a chance for symptoms to develop if the person indeed has the infection. If they develop any symptoms over that quarantine period, they will be expected to get any required testing before being allowed back at the building. If they do not develop any symptoms, they will be cleared by the Line to return back to the Squad.

The Line is also toying with the idea of only allowing essential personnel (EMT2s and higher) ride. For now, we are going to keep it an OIC decision on whether to allow non-essential personnel but we are planning for the day where we may need to minimize exposure and keep it to two people riding as a crew.

As of now, the four South seniors (Roan, Mitali, Shivani, and David) who went on the Disney trip will be placed on a self-quarantine for seven days after coming back from their trip. This self-quarantine will end on March 23rd at 6 PM. If any of you sees them at the Squad prior to this date and time, I want you to tell them that they need to go home at that moment and I want to be made aware that they broke their quarantine. Suspensions will be handed out to anyone who breaks this quarantine timeline. Jegan will also be placed on a self-quarantine after he returns from his trip to India but I'm working with him to figure out his timeline. Stay tuned!

I hope everyone understands that this is not a punishment for traveling but rather a need to minimize the spread of this infection to our members and ultimately our patients. In this job, we need to be extra careful of being carriers of any conditions that could be dire if spread to our immunocompromised or sick patients. Considering this virus mainly affects the elderly and immunocompromised more than healthy patients, we need to take these measures proactively.

Regards,

Ankit Parikh