

Title: Coronavirus Disease-19 (COVID-19) Policies and FAQs

Effective Date: 03/13/2020

Reviewed by: Ankit Parikh, Akarsh Teki, Harshit Dhawan (2020 Line Officers)

Approved by: Ankit Parikh, Akarsh Teki, Harshit Dhawan (2020 Line Officers)

Target Audience: All Plainsboro Rescue Squad Members

Hi All,

With the COVID-19 storm picking up and recent confirmed cases in neighboring towns, I think it's time I send out a little PSA about it. I apologize sincerely that I didn't do this earlier. I'm sure you all have questions on what our procedures are and how can we help to minimize the spread if we have a patient who has the potential to be a COVID-19 carrier. Please follow along this document to find answers to many of your questions. If you have other questions that are not answered in this document, please feel free to reach out to me via email, phone call, or text.

First of all, I would like to thank all of you for helping out in this time of need. We truly are neighbor helping neighbor. As volunteers, what we all do for this community is very noble, but what you do in situations like this goes above and beyond and I'm so grateful to have all of you to help the Squad help the community. The biggest thank you goes to each and every one of you.

With that said, your health comes first. Then your patient's health. That's EMS 101. The risk of contracting COVID-19 are relatively low. The risk of having severe symptoms from a contracted disease are even lower. And if you are a healthy individual who is not at either extreme of age, you are very unlikely to contract the disease or have any significant symptoms from it. The majority of people who have contracted the disease are recovering from it, but the media will only talk about the sick ones or the death toll. Take whatever the media feeds you with a grain of salt. Don't take it all at face value. The day they try to diminish the hysteria instead of causing it, is the day we all need to be worried about. Nonetheless, make sure that you are taking precautions to minimize your exposure.

About COVID-19:

Most common symptoms of COVID-19 include cough, chest congestion, runny nose, respiratory distress, sore throat, fever greater than 100.4 Fahrenheit, body aches. These symptoms may occur 2-14 days after exposure. Be cognizant of these symptoms for any of your patients as well as for yourself. We do have thermometers on the trucks if you choose to measure their temperatures.

Personal Protective Equipment Usage:

Gloves:

ALWAYS WEAR GLOVES. Go through multiple pairs of gloves if needed. Make sure to take them off before touching "clean" surfaces (or wear a new set of gloves). Please remove all PPE equipment while driving or being in the cab. And make sure to decontaminate the cab as well. We are ordering more gloves. Replenish gloves from the hospital if you can so as to not use our supply when possible.

N95s, safety glasses/goggles, surgical masks:

Use masks and safety glasses/goggles when in close contact with a patient who is coughing or if you suspect you have the potential to have contact with respiratory or oral secretions (CPR calls, vomiting, suctioning, intubations, nebulizers, BVM ventilations, etc.). IT IS NOT NECESSARY TO USE AN N95 or safety glasses/goggles ON EVERY CALL. We are on short supply and the issue is that major vendors are prioritizing getting these masks to hospitals and there are no options available on the retail side since

the general public has been fed by the mass hysteria and gone out and purchased all of them. It's extremely hard to find these masks. I'm working with the rest of the Line, our medical supply officer Don, and our vendors to get them to us as soon as they have more but they may be on back order for weeks to months. So, please use them sparingly and if you take them into the scene and don't use them, please make sure to put them back in the box for future use. PLEASE DO NOT DISCARD UNUSED MASKS. I have kept 10 sizes of each mask in each truck. If they are running low, please let me know. I have spares that I've taken home so we can use them judiciously and I can keep track of how many are left. PLEASE DO NOT PUT N95 MASKS ON PATIENTS. PLEASE USE SURGICAL MASKS WITH OR WITHOUT THE CLEAR FACE SHIELD ON THE PATIENTS. Please clean the safety glasses/goggles with bleach wipes and place them back in the truck after they are clean and dry. DO NOT DISPOSE OF THEM.

Gowns:

Use gowns when performing aerosol-generating procedures (CPR calls, vomiting, suctioning, intubations, nebulizers, BVM ventilations, etc.). Once again, gowns are tough to come by so please use them judiciously and if you take them into scene and don't use them, please put them back for future use. The gowns have been ordered and should be coming in soon. I'll be making COVID-19 kits that include a gown for the PROVIDER, a duckbill N95 mask for the PROVIDER, a pair of safety glasses for the PROVIDER, and a surgical mask for the PATIENT. If you open one of these kits, but don't use all parts of it, please do not discard those parts. Make a new COVID-19 kit with the leftovers.

Hygiene:

The biggest thing you can do is WASH YOUR HANDS OFTEN. Wash hands with soap and warm/hot water and lather and scrub for at least 20 seconds before rinsing. Wash them twice if you want. But also moisturize them so that the frequent hand washing doesn't cause dry cracking skin that can lead to an opening for a pathogen to enter. Use hand sanitizer when needed. Do not use hand sanitizer as a sole method of cleaning. If that's all you have available in the moment, go ahead and use it. But don't forget to wash your hands after you get to the hospital or come back from the call. Use hand sanitizer AFTER washing hands as an additional layer of protection if you so choose. DO NOT touch your hands or clothes or any other contaminated objects to your mouth, nose, eyes, ears, or any orifice or mucus membrane structures to minimize transmission.

On Call:

Dispatchers are asking ALL patients and anyone who is currently in that residence regarding COVID-19 (recent travels, sick contacts, fevers, chills, flu-like symptoms). If all is normal or it is not that type of call, they may not relay that information to you. If you are concerned and want those answers, ask them over the radio or call them at 609-799-2333 (extension 0) to talk to the dispatcher. Introduce yourself and ask them any questions you may have to give you that peace of mind.

For now, the OICs will decide who goes into a scene and who doesn't. I highly recommend minimizing how many people go into a scene, so I implore OICs to use extreme caution when they make this determination. If you determine that this patient has the potential for it, send all non-required personnel back with PD or sit them up front in the passenger seat so as to minimize contact with the potential infection. Alternatively, you can also ask Dispatch if they can call back and have the patient step outside of the house and into your ambulance instead of making entrance into the residence. Obviously, you can only do this with patients who are capable of doing it but it's something that you can think about. Please take appropriate PPE prior to entering the scene. Initiate your evaluation of patient from a distance of at least 6 feet, place surgical mask on patient (surgical mask with or without a face shield or NRB mask if patient also requires oxygen), and limit how many members are in direct contact

with the affected individual on scene as well as during transport. Make sure to take all gowns and gloves off when you drive. You may keep the N95/duckbill mask and safety glasses/goggles on if you want.

In the event this infection becomes more widespread, the Line is working on implementing protocols that will only allow essential personnel to take calls. This will include EMT2s and higher only. Cadets and trainees will be allowed to come in for training, meetings, etc. but will be barred from taking calls. For now, this is not part of our protocol, but the Line will keep a close eye on things to determine if we need to go down that route. If anyone is uncomfortable at any time or in any situation, please let the OIC or the Line know so they can take the appropriate measures to remove you from that situation.

If you come into contact with anyone who has the potential for it or has the actual disease, please write a Special Report at your earliest convenience. At the very least, include type of exposure (coughing, respiratory droplets, oral secretions, etc.), what level of PPE was donned (gloves, mask, glasses, etc.), and who was exposed in that report. Also notify the Line Officers of the following information via email: Incident Number, Patient Name, Patient DOB, Date of Call, Time of Call, and Crew Members who were exposed so we can do any follow up that may be needed. If you get exposed, please decontaminate the ambulance, come back to the Squad, wash all your uniforms, and decontaminate the ambulance again due to you sitting on it with potentially infected clothes or touching areas with contaminated hands.

Decontamination:

Decontaminate the inside of the truck (driver's compartment and back cab). At the very least, decontaminate the following but also other surfaces: high touch areas such as steering wheel, mic, air horn button, button panel or touch screen, spotlight joysticks, seats, seatbelts, door handles, grab bars, stretcher straps, stretcher padding, stretcher buttons, stretcher yellow bars and red handles, Oxygen tank, Captain's seat/CPR seat/bench seat padding, BP cuffs, stethoscopes, thermometers, outside surfaces of all interior cabinets, all surfaces on interior of ambulance, personal mics/radios, pens, penlights, cellphones. I'm sure there's a whole lot of things I haven't mentioned but these are the ones that came to me off the top of my head.

When cleaning stretcher and ambulance, use the hospital's stuff as much as possible. Decontaminate before leaving the hospital and use their bleach wipes. This helps preserve our short supply and keep our costs down. Try to minimize how much of our stuff you use. That doesn't mean to delay decontamination so that you can do it at the hospital but when possible, use hospital supplies. Also remember that the bleach wipes and Sani-wipes work by evaporation so don't wipe and dry with a cloth. Let it evaporate so that it can do its job properly. If you need to decontaminate extensively, know that there is a decontamination shower at Princeton, and you can ask them to open it up for you to use. I'm sure other hospitals also have them, but I personally have never used one at a different hospital. Do not hesitate to ask them to use it if you deem it is necessary. If you need to go out of service for decontamination, please call Dispatch and let them know you are going to be delayed at the hospital. Try to also call a Line Officer if it's going to be an extensive delay. I don't care what time you call me. If you need to call me, please do so.

Public PSA:

Please do your part to educate the public on this virus to minimize the hysteria that has been created. The more paranoia there is, the more that people are going to call for every small sniffle and illness. That increases our burden by increasing our call volume and making us unavailable for other potential serious emergencies. Plus, this puts us at a heightened risk of being in contact with potential COVID-19 carriers. Most of the general public gets their information from news outlets and not scientific studies so

their view of this pandemic might be skewed, and they may be misinformed. It is our duty to act as public servants to help alleviate some of their stresses about this virus and answer their questions regarding it. If you do not have an answer to their questions or they want to seek more information regarding COVID-19, please have them email us at either covid19@plainsboroescuesquad.org or line@plainsboroescuesquad.org and a Line Officer or my designee will gladly assist them with whatever questions they have.

Other FAQs

What to do if you get sick?

If you get sick, please stay at home and let the Line know. Follow the CDCs protocols for self-quarantine. Do not leave your house for at least 7 days once the symptoms started. Stay at home till the symptoms persist if they go on for more than 7 days. Stay at least 6 feet from everyone else in your home if you cannot isolate yourself completely. Try to sleep alone. Wash your hands regularly with soap and water. Stay away from vulnerable individuals such as elderly and those with underlying health conditions.

What are the protocols for self-quarantine?

Those of you who travel to certain areas of the country or out of the country will be placed on a self-quarantine upon arrival. What this entails is that you will be barred from coming to the Squad for the duration of the quarantine and if you don't have any symptoms in that period, you'll be welcome to show up at the Squad as you normally would. In the event you have any symptoms, you'll be barred from entering the Squad till you are symptom free and have received proper medical care. These cases will be looked at individually by the Line to make determination of who is allowed at the Squad and who isn't. I highly recommend that you do not travel during this time unless absolutely necessary.

Which hospital to take them to?

Penn Medicine Princeton Medical Center is able to handle COVID-19 patients but you absolutely need to let them know before hand so they can get appropriate measures in place for your arrival. All area hospitals are able to handle them but DO NOT JUST SHOW UP. Please call them before hand or if you cannot do that, please have one person enter the hospital and let them know and let them give you directions on their procedures before you bring the patient in. I recommend going to the closest hospital to minimize our contact time with the patient.

What should I bring to Squad for duty other than normal uniform?

When on duty, please bring spare clothes to the Squad so you can change into them after a call where you could have potentially been exposed to COVID-19. The procedure is that upon return to the Squad, you'll be putting all your clothes to wash in our washer and dryer and utilize a jumpsuit once you put yourself back in service. I also recommend that you size yourself for a jumpsuit upon arrival at the Squad for your shift and hang on to that jumpsuit till your shift ends so that you don't have to search for one when the need arises. This way you're ready to go before that need arises.

What to do if we get dispatched to mutual aid outside our normal mutual aid jurisdiction?

A special report needs to be filed ASAP. I need to let Dan Reichard know so that he can follow that up with the State. The State is requiring this information to be passed onto them so they can monitor if any towns are abusing the system to avoid taking calls.

Here's a link that talks a little bit more in depth of what I've covered here if anyone is interested:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-for-ems.html>

LASTLY, PLEASE DO NOT USE THE SQUAD'S SUPPLIES AS YOUR PERSONAL SUPPLIES. I AM HOPING THAT I CAN GET ENOUGH MASKS ORDERED TO PROVIDE EACH MEMBER WITH FOUR MASKS EACH FOR YOU AND YOUR FAMILY BUT THAT PLAN OBVIOUSLY HINGES ON THE FACT THAT I CANNOT FIND MASKS ANYWHERE. I WANT TO PROVIDE THAT FOR YOUR FAMILIES BUT PLEASE DO NOT TAKE THESE SUPPLIES FROM THE SQUAD AT THIS TIME. I HOPE TO BE ABLE TO PROVIDE EACH PERSON WITH MASKS AS SOON AS I HAVE SUPPLY.

Regards,
Ankit Parikh
Chief
Plainsboro Rescue Squad