**Emerging Infectious Disease (Suspected COVID19)**

### History
- Flu-like illness
- Cough
- Shortness of breath

### Signs and Symptoms
- Fever > than 100.4°F
- Rhinorrhea/nasal congestion
- Productive cough
- Chills
- Weakness and or flu-like symptoms
- Body aches
- GI symptoms (Diarrhea, etc)
- Loss of taste/smell
- Pernio/Chilblains (sores on hands/feet)

Interrogation indicates (+) COVID19 or high suspicion of COVID19

#### Don PPE to protect from Droplet/fluid contamination
Universal Precautions with proper PPE required
- N95 mask, impermeable gown, gloves, eye protection
- Place a surgical mask on the patient
- Limit patient contact to one provider only, if possible
- All providers should attempt to maintain ≥ 6’ distance from the patient when feasible and does not interfere with indicated patient care

#### Low acuity
Is patient a candidate for self-isolation at home
And/or a candidate for non-transport?

#### Respiratory Distress/Bronchospasm/Wheezing?

#### Mild-Moderate signs and symptoms
- If SPO2 < 94% - Supplemental O2
  - NC - up to 6L/min
  - NRB - 10L/Min up to 15L/min
- Alternate positioning (lateral decubitus, consider opposite side if initial side is ineffective)
- Consider Albuterol
  - MDI with spacer (Use patient’s if available)
  - Nebulized Albuterol 5 mg/ 6 ml NS

#### Moderate-Severe signs and symptoms
- Supplemental O2
  - Non-Rebreather Mask 15L/min
  - Consider CPAP (remove if progressing to respiratory failure)
  - Consider in-line Albuterol - 5mg/6ml
  - For impending respiratory failure, assist respirations with BVM and filter
  - Consider iGel placement, as indicated

#### Manage any shock/hypotension, pain, or nausea/vomiting

#### Notify receiving facility as early as possible to allow for patient care preparations. Contact Base Hospital for medical direction, as needed.

#### Decontamination
- Doff PPE
- Clean vehicle and reusable equipment with appropriate disinfectants.