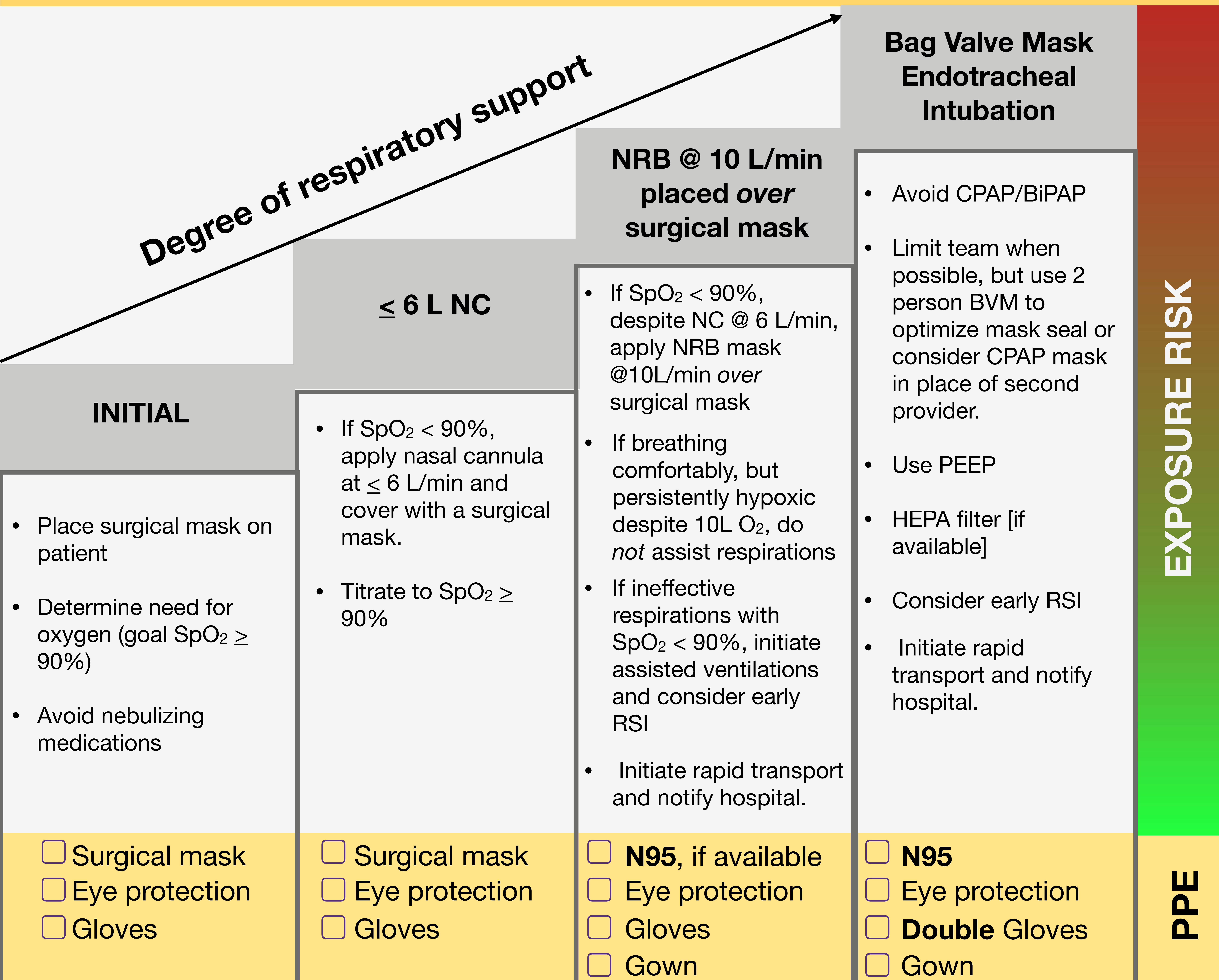


MLREMS Guidelines for Respiratory Distress/Failure COVID-19 Pandemic

Guiding Principles:

- Achieve adequate oxygenation and ventilation while minimizing exposure risk.
- All patients in respiratory failure should be assumed to be “suspected COVID-19”.
- No specific vital sign should drive invasive intervention in place of overall clinical picture and clinician judgment.



EXPOSURE RISK

PPE

AFTER HANDOFF

- Observed doffing procedure with hand hygiene
- Standard decontamination principles for ambulance and equipment

MLREMS Guidelines for RSI Providers

COVID-19 Pandemic

Guiding Principles:

- Achieve adequate oxygenation and ventilation while minimizing exposure risk to EMS personnel.
- All patients in respiratory failure should be assumed to be “suspected COVID-19”.
- No specific vital sign should drive invasive intervention in place of overall clinical picture and clinician judgment.

****If in ambulance, turn on ventilation system****

Don full PPE for aerosolizing procedures

- N-95 mask Eye protection Gown Double Gloves

Prior to
patient
contact

Presence of acute respiratory failure requiring positive pressure ventilation or invasive airway intervention?
(see Respiratory Distress/Failure Guidelines)

Initial patient
contact

YES

- Consider early tracheal intubation instead of CPAP/BiPAP or BVM
- If initiating BVM, optimize mask seal
- HEPA filter [when available] for positive pressure ventilation (PPV)

If intubating:

- Limit team to minimum necessary (≤ 3)
- If safe to do so, perform RSI with minimal to no BVM prior to intubation
- Observer > 6 feet away completes intubation checklist
- Most experienced clinician should intubate using a plan to maximize first pass success
- Early use of extraglottic airway instead of manual bagging for rescue oxygenation in case of failed airway attempt or anticipated difficult airway
- Ensure HEPA filter (if available) attached

NO

- Initiate transport without delay
- Ongoing reassessment for respiratory failure

Continued Care

- Observed doffing procedure with hand hygiene
- Standard decontamination principles for ambulance and equipment

After
patient
handoff