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Title:	<b>COVID-19: Regional Update/PPE Recommendations</b>		
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*The Regional Emergency Medical Advisory Committee (REMAC) of New York City is responsible to develop, approve and implement prehospital treatment and transport protocols for use within the five boroughs of the City of New York. The Regional Emergency Medical Advisory Committee (REMAC) of New York City operates under the auspices of Article Thirty of the New York State Public Health Law. This document was created in conjunction with FDNY in an effort protect EMS providers and the general public.*

In an effort to protect our EMS providers and frontline work force, REMAC NYC has developed PPE recommendations for the care of patients during the current COVID-19 pandemic. These are written in conjunction with NYC DOH advisories.

In the setting of a pandemic with widespread community transmission in NYC, all healthcare workers are at some risk for exposure to COVID-19, whether in the workplace or in the community. **Therefore, the NYC Health Department is asking ALL healthcare workers, regardless of whether they have had a known COVID-19 (SARS-CoV-2) exposure, to self-monitor by taking their temperature twice daily and assessing for COVID-19 like illness.**

NYC REMAC recommends that agencies monitor providers before the start of any shift.

### **Patient Assessment:**

Not all patients have visible signs/symptoms and therefore all patients must be considered suspicious for COVID-19.

1. When approaching a patient, the EMS provider should begin questioning the patient from 6 feet away.

The following patients should be considered **higher risk** for transmission:

- Patients with subjective (*states he/she feels hot*) or documented fever
- Any patients with fever / cough or respiratory symptoms
- Any AMS or unconscious or cardiac arrest patient
- Any Patient with respiratory symptoms

2. For **higher risk** patients:

- a. A surgical mask should be placed on the patient
  - i. **AT NO TIME IS AN n95 MASK TO BE PLACED ON A PATIENT.**
- b. It is recommended that EMS providers wear:
  - i. Face mask, surgical or n95, at the discretion of the agency medical director
  - ii. Eye protection and gloves
  - iii. Gowns (if available)

# THE REGIONAL EMERGENCY MEDICAL SERVICES COUNCIL OF NEW YORK CITY, INC.

## COVID-19: Regional Update/PPE Recommendations

3. Respirators (n95s) should be prioritized for procedures that are likely to generate respiratory aerosols, which would pose the highest exposure risk to HCP.
  - a. If there are shortages of gowns, they should be prioritized for aerosol-generating procedures, care activities where splashes and sprays are anticipated, and high-contact patient care activities that provide opportunities for transfer of pathogens to the hands and clothing of HCP.
4. The EMS provider can continue to use his/her mask during the tour as long as it is not soiled.

### **Return to Work:**

Due to the widespread community transmission in NYC. Quarantine of asymptomatic providers is no longer recommended. Self-monitoring should be continued as recommended above.

Symptomatic providers who are not hospitalized but who have possible or confirmed COVID-19, should:

- Isolate themselves in a private residence until 7 days following onset of illness
- AND, 72 hours afebrile, without antipyretics
- AND, with resolving symptoms.
- **Whichever is longest.**

*Current and Updated Protocols can be accessed at the Regional EMS Council website: [www.nycremsco.org](http://www.nycremsco.org).*

*Owners/operators of Ambulance and ALS First Response Services providing prehospital medical treatment within the five boroughs of the City of New York are responsible to provide copies of the NYC REMAC Prehospital Treatment Protocols to their personnel, and to ensure that Service Medical Directors and EMS personnel are informed of all changes/updates to the NYC REMAC Prehospital Treatment Protocols.*



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