



EMS Information Bulletin 2020-01

DATE: January 28, 2020

SUBJECT: Novel Coronavirus (2019-nCoV)

TO: PA Regional EMS Councils
PA EMS Agencies
PA EMS Provider

FROM: Bureau of Emergency Medical Services
PA Department of Health
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The outbreak of the 2019 novel coronavirus (2019-nCoV) in Wuhan City, Hubei Province, China, continues to develop and evolve. In a very short time, this outbreak has spread to several countries, including the United States, with five confirmed cases in the following states: Arizona; California; Illinois and Washington. As we continue to learn about this emerging virus, it is now apparent that human-to-human transmission is possible.

Although the transmission dynamics have yet to be fully determined, the Centers for Disease Control and Prevention (CDC) currently recommends a cautious approach to patients under investigation for 2019-nCoV. Such patients should be asked to wear a surgical mask as soon as they are identified. Health care providers should use standard precautions, contact precautions, airborne precautions, wear eye protection (e.g., goggles or a face shield) and should use ambulance engineering controls to prevent transmission (i.e., air exhaust system, closed driver/patient compartment door). Be sure to communicate your concerns to the hospital where you are transporting as soon as possible.

This outbreak emphasizes the importance of promptly identifying patients with fever and other signs and symptoms of infection, and routinely asking about history of travel outside of the country.

As this event unfolds, it's important that we look at our processes and procedures to ensure we do not drop our guard. Now is a good time to perform some quality control checks and to audit adherence to precautions that can prevent transmission of 2019-nCoV as well as seasonal influenza. Here are some areas to consider:

- Quantity and condition of personal protective equipment (PPE)
- Use caution with aerosol generating procedures
- Proper donning and doffing of PPE
- Prehospital screening procedures
- Ambulance decontamination / disinfection using EPA registered disinfectants with known effectiveness against human coronaviruses
- Waste management policy for medical waste (red bag).

Many more processes and considerations can be found in the EMS-Infectious-Disease-Playbook. A link to the playbook is provided below. Please take the time to download a copy of this valuable resource:

[EMS Infectious Disease Playbook](#)

It is paramount that every provider review and follow [***BLS Protocol 931— Suspected Influenza-Like Illness \(III\)***](#) for any persons suspected of or potentially being infected with 2019-nCoV.

IMPORTANT NOTE: EMS organizations and individual providers should make every effort to maintain Situational Awareness for this outbreak. Below are links to the Centers for Disease Control and Prevention (CDC) 2019 nCoV website and Pennsylvania Health Alert Network (PA-HAN; please register for e-mail alerts to stay up to date). These tools will assist with educating and maintaining situational awareness information surrounding the virus and protective measures to keep providers and care givers safe.

- <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>
- <https://www.health.pa.gov/topics/disease/Pages/Coronavirus.aspx>
- <https://han.pa.gov/>

PA Dept. of Health Knowledge Center - Healthcare Incident Management System (KC-HIMS) is a commercial, off-the-shelf system deployed throughout the Commonwealth of Pennsylvania. It's a web-based information management tool available wherever you have access to the Internet. It serves to build a Common Operating Picture across the Health Care Community and for maintaining situational awareness of any active incidents or events occurring across Pennsylvania. Contact your regional EMS Health Care Coalition Coordinator for access.

- <https://www.padoh-kc.org/>

Below is the current clinical definition for persons suspected of or potentially being infected with 2019-nCoV. Note that this case definition is subject to change as we learn more about 2019-nCoV.

Criteria to Guide Evaluation of Patients Under Investigation (PUI) for 2019-nCoV

Patients in the United States who meet the following criteria should be evaluated as a PUI in association with the outbreak of 2019-nCoV in Wuhan City, China.

Clinical Features	&	Epidemiologic Risk
Fever ¹ and symptoms of lower respiratory illness (e.g., cough, difficulty breathing)	and	In the last 14 days before symptom onset, a history of travel from Wuhan City, China. – <i>or</i> – In the last 14 days before symptom onset, close contact ² with a person who is under investigation for 2019-nCoV while that person was ill.
Fever ¹ or symptoms of lower respiratory illness (e.g., cough, difficulty breathing)	and	In the last 14 days, close contact ² with an ill laboratory-confirmed 2019-nCoV patient.

The criteria are intended to serve as guidance for evaluation. Patients should be evaluated and discussed with public health departments on a case-by-case basis if their clinical presentation or exposure history is equivocal (e.g., uncertain travel or exposure).

Footnotes

¹Fever may not be present in some patients, such as those who are very young, elderly, immunosuppressed, or taking certain fever-lowering medications. Clinical judgment should be used to guide testing of patients in such situations.

²Close contact is defined as—

a) being within approximately six feet (two meters), or within the room or care area, of a novel coronavirus case for a prolonged period of time while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection); close contact can include caring for, living with, visiting, or sharing a health care waiting area or room with a novel coronavirus case. – *or* –

b) having direct contact with infectious secretions of a novel coronavirus case (e.g., being coughed on) while not wearing recommended personal protective equipment.