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# MODEL PROTOCOLS FOR COVID-19 FIREFIGHTER/EMS RESPONSE AND EXPOSURES

Connecticut Fire Service

**COVID-19 is the latest threat to the public and our firefighters of Connecticut. The Connecticut Fire Academy has worked closely with a team of State Fire Service Leaders, State Department of Public Health Professionals and the Department of Emergency Management and Homeland Security to ensure we have best practices to distribute to those fire departments with Emergency Responders on the front lines, in order to minimize exposure and transmission of this virus as the pandemic develops.**

## **PREPARATION / RESPONSE**

- First responder personnel required to use PPE must be trained. This training includes when to use PPE; what PPE is necessary; how to properly don (put on), use, and doff (take off) PPE; how to properly dispose of or disinfect, inspect for damage, and maintain PPE; and the limitations of PPE.
- Should Public Safety Answering Points (PSAP) call takers advise first responder personnel that the patient is suspected of having COVID-19, first responder personnel should don appropriate PPE before entering the scene. First responder personnel should consider the signs, symptoms, and risk factors of COVID-19 which include fever, cough, and shortness of breath.
- First responder personnel recognizing a potentially infectious patient should notify the PSAP to ensure the en-route ambulance responders are prepared to implement appropriate infection prevention and control measures.

## ON SCENE / TRANSPORT

- First responder personnel that initiate or are part of patient care should be limited to the absolute minimum number of personnel to provide proper care and transport of the patient.
- First responder personnel transporting a potentially infectious patient should notify the receiving hospital or medical center to assure they are prepared to implement appropriate infection prevention and control measures.
- First responder personnel who wear proper personal protective equipment (PPE) while managing and/or transporting a symptomatic individual are considered to have a low-risk exposure according to the CDC and continue to work without interruption. This includes proper removal, disposal and decontamination. Proper PPE: Surgical gloves, Goggles or disposable full-face shield, surgical gowns, and N-95 or greater masks (for those directly engaged in patient care).
- First responder personnel who have **NOT** worn appropriate personal protective equipment while managing and/or transporting a symptomatic individual, may have been exposed. A local Director of Health or designated public health official would directly communicate with such persons to make an appropriate decision and would require follow-up through local exposure reporting policies and First Report of Injury/Illness (FRI) documentation when appropriate.
- With guidance from the local Director of Health or designated public health official, if a determination is made to self-isolate a Fire Department member/members as the result of an exposure to a confirmed positive COVID-19 patient, a member/members shall enter a 14-day period of self-isolation to monitor for signs and symptoms of the virus. Center for Disease Control (CDC) recommends exposed individuals await the onset of signs and symptoms (e.g., fever, cough, respiratory difficulty, etc.) prior to being tested. If the member shows signs or symptoms during this self-isolation period, then a test should be considered. If the test results are negative, the member must still remain at home for the full 14 days.

- Members will be provided updated CDC information on personal and family protective measures to observe during the quarantine process.
- Fire Departments should remain in contact with employees who are self-isolated and monitoring themselves for symptoms daily and identify any possible required family support for the member or their family.
- Clean and disinfect reusable patient-care equipment according to manufacturer's instructions before use on another patient.
- Follow standard operating procedures for the containment and disposal of used PPE and regulated medical waste.
- Make sure your department has a defined policy on self-isolation procedures. Review and update your infection control procedures.
- Incident documentation should include a listing of EMS and firefighters involved in the response and level of contact with the patient (e.g., no contact with patient, provided direct patient care). Always consider exposure reporting and First Report of Injury/Illness (FRI) documentation when appropriate.

**This link from the CDC provides additional detailed information:**

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

**This link from the CDC provide information on donning and doffing PPE:**

<https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf>

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