



# *The Monitor*

The monthly electronic newsletter for the Southern Illinois Regional EMS System.

July-August 2020

**COMMAND:** Dr. Haake wanted to relay the importance of personal safety. When this pandemic started, Dr. Haake implemented a COVID-19 protocol that focused on reducing the transmission risk from our patients to us. As this pandemic has continued, our protocol has seemed to work in reducing transmission risk. However, community transmission has still effected our ambulance services and their ability to staff their rigs and respond to calls for service. Dr. Haake is asking everyone to also use caution and exercise personal safety during the times we are not dealing with patients, like in the community and in the ambulance base. Community spread is posing more of a risk to our health and maintaining continuity of operations in our ambulance services and fire departments. Please stay diligent with the use of face coverings and good hygiene practices to reduce the transmission of COVID-19.

**FINANCE:** Nothing new on the financial front at this time.

**LOGISTICS:** The EMS license extensions and the AHA credentials extensions are all lapsed. Please pay attention to your EMS license and AHA card expiration dates and keep them current.

The FDA has released an updated list of approved AED devices. A link to the list is posted on the newsfeed of our EMS System's website. Please check your department's AED to the list to make sure you have a FDA approved device. Not only will using an unapproved device create legal liability issues for your department but unapproved devices won't be selling pads or batteries in the future. Contact the EMS Office with any questions.

**OPERATIONS:** The CDC released updated COVID-19 safety guidelines for EMS that included the use of masks and social distancing in ambulance bases. The full recommendations are linked on [www.sirems.com](http://www.sirems.com), but the highlights are listed below.

EMS personnel should wear a facemask at all times while they are in service, **including in breakrooms or other spaces where they might encounter co-workers.**

- When available, facemasks are preferred over cloth face coverings for EMS personnel as facemasks offer both source control and protection for the wearer against exposure to splashes and sprays of infectious material from others.
  - Cloth face coverings should NOT be worn instead of a respirator or facemask if more than source control is needed.

- To reduce the number of times EMS personnel must touch their face and potential risk for self-contamination, EMS personnel should consider continuing to wear the same respirator or facemask ([extended use](#)) throughout their entire work shift, instead of intermittently switching back to their cloth face covering.
  - Respirators with an exhalation valve are not recommended for source control, as they allow unfiltered exhaled breath to escape.
- EMS personnel should remove their respirator or facemask, perform hand hygiene, and put on their cloth face covering when leaving at the end of their shift.
- Educate EMS personnel about the importance of performing hand hygiene immediately before and after any contact with their respirator or facemask.

For EMS personnel, the potential for exposure to SARS-CoV-2 is not limited to direct patient care interactions. Transmission can also occur through unprotected exposures to asymptomatic or pre-symptomatic co-workers in breakrooms, co-workers or visitors in other common areas, or other exposures in the community. Examples of how physical distancing can be implemented for EMS personnel include:

- Reminding EMS personnel that the potential for exposure to SARS-CoV-2 is not limited to direct patient care interactions.
- Emphasizing the importance of source control and physical distancing when engaged in non-patient care activities.
- Designating areas for EMS personnel to take breaks, eat, and drink that allow them to remain at least 6 feet apart from each other, especially when they must be unmasked.

**EMS personnel working in areas with moderate to substantial community transmission** are more likely to encounter asymptomatic or pre-symptomatic patients with SARS-CoV-2 infection. If SARS-CoV-2 infection is not suspected in a patient (based on symptom and exposure history), EMS personnel should follow [Standard Precautions](#) (and [Transmission-Based Precautions](#) if required based on the suspected diagnosis). They should also:

- Wear eye protection in addition to their facemask to ensure the eyes, nose, and mouth are all protected from splashes and sprays of infectious material from others.

**PLANNING:** Don't forget about our EMS Calendar at [www.sirems.com](http://www.sirems.com)

September 7: Labor Day

*TIP OF THE MONTH:* Remember to clean our high contact surfaces after each call...like our ink pen, cell phone, eyeglasses, etc.

If you have any questions or information for "The Monitor", please contact me at [Brad.Robinson@sih.net](mailto:Brad.Robinson@sih.net) or [SouthernIllinoisRegionalEMS@gmail.com](mailto:SouthernIllinoisRegionalEMS@gmail.com) (08-16-2020).