

# ABCD's of Coronavirus

Interim Guidance for Field Clinicians on COVID-19

Note: This is a rapidly evolving situation and frequent updates to this information may be required  
**February 28, 2020**

## ASSESS

*Does the person have*

# A

**Fever or symptoms of lower respiratory illness**  
(e.g., cough or shortness of breath)

**AND if in the past 14 days since first onset of symptoms a history of either**

**Travel to:**  
China, Iran, Italy, Japan, or  
South Korea

← **OR** →

**Close contact with a**  
person known to have  
COVID-19\*

## BSI

- **Place facemask\*\*\*** (incorporate with O2 if required) **on patient**
- **Wrap patient in fluid impervious (yellow) blanket**
- **Limit number of clinicians involved in patient care**

# B

## PPE

Viral Respiratory Illness (low/no suspicion of COVID-19)	Suspected COVID-19 (by criteria above)		Known COVID-19 (Confirmed Case**)
<u>Droplet Precautions</u>	<u>Special Respiratory Precautions</u>		<u>Airborne Precautions</u>
<b>Infection Control Kit</b> <ul style="list-style-type: none"> <li>• Surgical Mask with face shield</li> <li>• Blue Gown, cap, and Shoe Covers</li> <li>• Gloves</li> </ul>	<b>Option 1</b> <ul style="list-style-type: none"> <li>• N95 with full face shield</li> <li>• Level C Suit (Yellow TyChem/ChemMax/etc.)</li> <li>• Boot Covers</li> <li>• Gloves</li> </ul>	<b>Option 2</b> <ul style="list-style-type: none"> <li>• Full face respirator (with P100 filter)</li> <li>• Level C Suit (Yellow TyChem/ChemMax/etc.)</li> <li>• Boot Covers</li> <li>• Gloves</li> </ul>	<ul style="list-style-type: none"> <li>• Transport <b>ONLY</b> with approval of MD-1 and Co500</li> <li>• HazMat Rescue or Sunstar (specially prepared/equipped transport unit)</li> <li>• Hazmat Level C or greater PPE</li> </ul>

A PAPR or SCBA may be substituted as appropriate respiratory protection in the event an N95 mask or P100 cartridge filters are unavailable.

## COMMUNICATE

# C

- **NOTIFY DISPATCH IMMEDIATELY** OF ANY SUSPECTED COVID-19 patient
- **CONSULT OLMC** for assistance with risk assessment & any care limitations
- **ENSURE EARLY HOSPITAL NOTIFICATION**

\* Close Contact is defined as being within 6 feet of a potentially infectious patient

\*\* As determined by FL Dept. of Health

\*\*\* Utilize surgical mask from "Infection Control Kit" – Remove splash shield prior to use on patient

## DOFFING AND DISPOSAL

- Refer to Target Solutions Training for:  
**SAFE PPE DONNING AND DOFFING PROCEDURES**

### **RED BIOWASTE BAG** (disposal)

- N95 masks
- P100 filters
- Gloves
- Gowns/Level “C” Suit
- Face shield/eyewear
- All other disposable equipment/supplies

### **YELLOW BAG**

(cleaning/disinfection)

- Full Face Respirator
- SCBA Mask
- PAPR

## DECONTAMINATE

### Hands

- Before and after every patient contact
- Contact with potentially infectious material
- Before donning and doffing PPE, including gloves
  - Soap and water – **MIN. 60 SECONDS**
  - Alcohol hand wipes - when soap and water unavailable

### Full Face Respirator

- Soak in a solution of 50 ppm bleach
- Rinse in fresh warm water
- Air dry in a non-contaminated atmosphere

### Transport Unit & Medical Equipment

- Use Hydrogen Peroxide Spray (or wipes if available)
  - Wipe the surface until completely wet
  - Ensure surface stays wet for one minute
  - Discard wipes in biohazardous waste bag

### PAPR/SCBA

- Clean and disinfect according to manufacturer’s guidelines

# D

#### References:

- <https://multimedia.3m.com/mws/media/5356010/3m-6000-series-full-face-mask-care-maintenance-guide.pdf>
- <https://www.ems.gov/pdf/ASPR-EMS-Infectious-Disease-Playbook-June-2017.pdf>
- <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- <https://www.cloroxpro.com/products/clorox-healthcare/hydrogen-peroxide-cleaner-disinfectants/>