COVID-19 EMS Triage Procedure

Purpose:
To triage patients who need to be transported to an Emergency Department during high prevalence of COVID-19 when the regional health systems surge capacity is at crisis level.

Indication:
When the regional healthcare and/or EMS infrastructure is overwhelmed. This protocol is meant to align with Oregon Crisis Care Guidelines.

Procedure:

<table>
<thead>
<tr>
<th>SYMPTOMS</th>
<th>SIGNS</th>
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</thead>
<tbody>
<tr>
<td>1. Fever (observed or reported)**</td>
<td>1. Tachypnea (RR &lt; 10/min or &gt; 24/min)</td>
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<tr>
<td>2. Shortness of breath/dyspnea**</td>
<td>2. Tachycardia (HR &gt; 100/min)</td>
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<td>3. Cough**</td>
<td>3. Hypoxia (SpO2 &lt; 94%)</td>
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<td>4. Anosmia (inability to smell)**</td>
<td>4. Hypotension (BP &lt; 90 mmHg or MAP &lt; 65 mmHg)</td>
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<td>5. Chest pain</td>
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<td>6. Confusion</td>
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<td>7. Headache</td>
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<td>8. Fatigue/Weakness/Myalgia (muscle aches)</td>
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<td>9. Anorexia</td>
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<td>10. Nausea, vomiting, diarrhea</td>
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<td>11. URI symptoms with sore throat, rhinorrhea</td>
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<td></td>
<td>12. Unable to eat or drink fluids</td>
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</tbody>
</table>

** primary symptoms

B. If signs and/or symptoms are consistent with possible COVID-19, refer to Transport Decision-Making Matrix (see next page).

Documentation:
A. If the patient is not transported, ensure to document:
   1. Full patient assessment.
   2. Lack of exclusion criteria as outlined in the Transport Decision-Making Matrix (see next page).
B. Document that home care instructions were verbalized.
C. Do not have patient sign Discharge from Scene form.
TRANSPORT DECISION-MAKING MATRIX

Patient Assessment

YES:
- Respiratory Rate < 10/min or > 24/min
- Oxygen Saturation < 94%
- Heart Rate > 100/min
- BP < 90 mmHg or MAP < 65 mmHg
- Temperature ≥ 100.4°F (38°C)
- GCS <15 or less than baseline mental status
- Unable to eat and drink fluids

Transport "YES" TO ANY

Presence of any of Signs / Symptoms

YES:
- Cyanosis
- Altered Mental Status (from baseline)
- Shortness of breath at rest or with light activity
- Evidence of increased work of breathing
- Abnormal lung sounds
- Chest pain
- Severe diarrhea
- Severe weakness/fatigue new onset
- Syncope
- High-Risk medical history requiring more intensive hospital therapy: diabetes, liver or kidney disease, dialysis, cancer
  
Paramedic discretion to over triage

Transport "YES" TO ANY

Patient meets non-transport disposition criteria.

Vital Signs

BLOOD PRESSURE:__________
TEMP:______________________
HEART RATE:______________
RESP RATE:_______________
SPO2:_____________________
GCS:______________________
TIME:_____________________

Circle One: Transported Non-transport