

ASTHMA / COPD / BRONCHOSPASM IN THE COVID-19 ERA
EASTERN PA EMS COUNCIL ADAPTIVE RESPIRATORY PROTOCOL

PPE BEFORE ABC¹

See EMS Informational Bulletin 2020-02

See Protocol #931

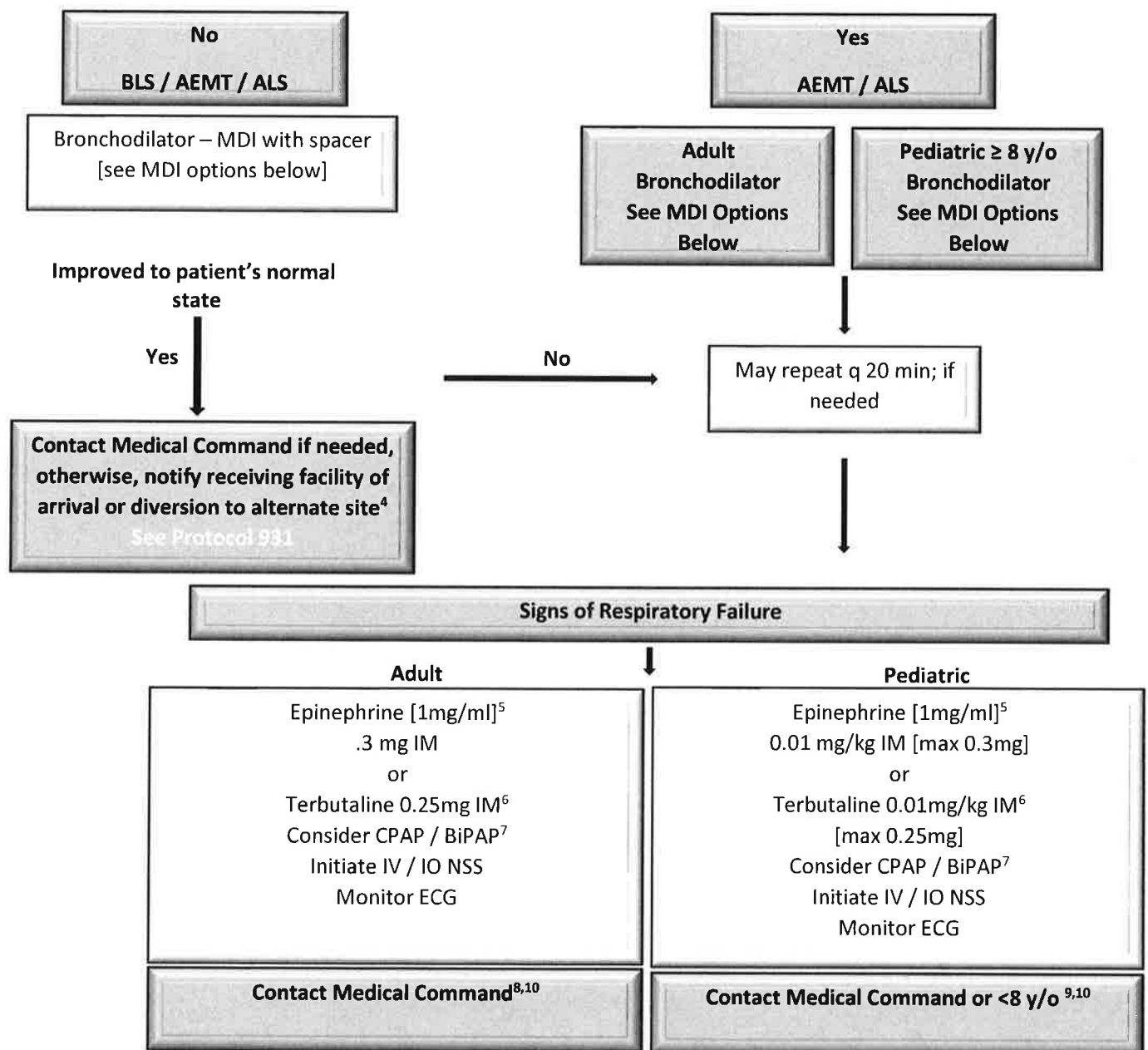


Initial Patient Contact – See Protocol #201

Manage Airway / Ventilate, if needed – modified² – See EMS Informational Bulletin 2020-18

Administer Oxygen – if indicated

Monitor Pulse Oximetry

-----Severe Respiratory Distress³-----

Bronchodilator MDI Options:

Albuterol MDI 90µg/spray

Combivent MDI

Adult: 6 sprays in spacer, Pediatric 2 sprays in spacer

Notes:

1. Per EMS Information Bulletin 2020-02: Eye Protection Goggles – Clear and Disposable. Facemasks are cleared by the FDA for use as medical devices. Regular prescription glasses and sunglasses do not provide adequate eye protection.
2. Per EMS Information Bulletin 2020-18: Place clear plastic drape over patient's face and head to reduce aerosolized secretion exposure. BVM with viral HEPA filter ventilation and advanced airway placement can occur under drape.
3. Patients may exhibit "Silent Hypoxemia" with room air oxygen saturations of 85% and appear clinically comfortable. Prone positioning of patient may help improve oxygenation.
4. For suspected cases, regional protocol may require contact with facility for possible integration or care with local pandemic plan.
5. Possible Medical Command Orders for repeat dosages. Precautions – CAD, CHF
6. Possible Medical Command Orders for repeat dosages. Precautions – Seizure disorder
7. Treatment precautions: Aerosol-generating procedures should not be deferred if needed to treat a life-threatening illness. They may be deferred in a relatively stable patient. If required, perform procedure in most well-ventilated area.
8. Possible Medical Command Orders for additional Epinephrine or Terbutaline, NSS bolus, Magnesium Sulfate.
9. Possible Medical Command Orders for Epinephrine or Terbutaline, NSS bolus.
10. Steroids should be avoided unless ordered by Medical Command Physician.