April 7, 2020

Oregon PSAP Directors and Medical Directors

The following guidance is intended to be used by PSAP call centers if wide-spread community transmission of COVID-19 has occurred, to identify calls that may pose a risk to first responders.

1. PSAPs should implement an emerging infectious disease surveillance screening tool (EIDS), or screen for fever, cough, or difficulty breathing for ALL calls when feasible. The query process should never supersede the provision of pre-arrival instructions to the caller when immediate lifesaving interventions (e.g., CPR) are indicated.

   a. For ALL calls Police, Fire, and EMS ask the following questions:
      i. Does the person have fever or symptoms of lower respiratory infection, such as fever, cough or shortness of breath? OR
      ii. Local Public health authority has informed PSAP of long-term care facilities with COVID-19 cases.

2. If the patient meets the above criteria, then PSAPs should:

   a. Provide medical care per protocol.
      Alert responding agencies of the possibility of a respiratory pathogen as soon as possible.
   b. Follow local public health authority policies for reporting and follow up of health care workers with contact to suspected cases.

3. If they do not meet criteria discontinue questioning and follow appropriate case entry instructions.

4. If call volumes increase to the point that contingent and crisis standards of care are being applied, consider suspending infectious disease screening.

Please contact us with any questions or visit: healthoregon.org/coronavirus

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