COASTAL VALLEYS EMS AGENCY

EMS Special Memorandum - #20-004

Date: May 14th, 2020

To: Mendocino/ Sonoma County EMS Providers and System Stakeholders

From: Bryan Cleaver   Mark Luoto, MD
            Regional EMS Administrator   Regional EMS Medical Director

Re: Cardiac Arrest Management during COVID-19

This guidance document is released in cooperation with the Public Health authorities of both Mendocino and Sonoma Counties. The intent is to provide guidance for Cardiac Arrest Management (CAM) during COVID-19 within the Coastal Valleys EMS Region.

Coastal Valleys EMS Agency (CVEMSA) is implementing the following interim changes to *treatment protocol 7003 Cardiac Arrest Management (CAM):*
- Airway Management:
  - EMS personnel may administer high flow oxygen via non-rebreather mask (NRB) as an alternative to using a bag valve mask for patients with cardiac arrest. Cover the NRB with a surgical mask during resuscitation.
  - If return of spontaneous circulation (ROSC) and return of spontaneous respirations obtained, remove the surgical mask and continue high flow oxygen.
  - If ROSC is obtained and the patient requires additional airway management, ventilate the patient with a bag valve mask (BVM), I-Gel, or intubate.
  - Agencies using HEPA filters on BVMs should reserve use of the filters for patients with ROSC.
- Cardiopulmonary Resuscitation (CPR):
  - Agencies with mechanical CPR devices may place such devices only after at least two rounds of high quality CPR is performed and two defibrillations if indicated for dysrhythmias other than asystole.
  - If asystole is detected, mechanical CPR devices may be placed at any time.

The current COVID-19 response in Mendocino and Sonoma Counties is a rapidly evolving situation, EMS response shall continue to be patient-centric while focusing on the protection of our responders and the general public.

CVEMSA continues to work closely with Public Health partners and monitor CDPH and CDC guidance to ensure proper information is available for our EMS first responders.

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BRYAN CLEAVER
REGIONAL EMS ADMINISTRATOR

195 CONCOURSE BLVD., SUITE B
SANTA ROSA, CA 95403
707.565.6501
WWW.CVEMSA.ORG

MARK LUOTO MD
REGIONAL MEDICAL DIRECTOR