DISPATCH SCREENING ALGORITHM

Dispatch screening is designed to suggest the highest potential level of precautions that may be required. On-scene evaluation is required to adjust precautions according to history and exam. Transmission based precautions are always accompanied by standard precautions.
ON-SCENE ASSESSMENT ALGORITHM

Type of Precautions
(Transmission-based precautions are always accompanied by standard precautions.)
PPE RECOMMENDATIONS

- **Standard Precautions**
  - Disposable exam gloves
  - Goggles/Face Shield for any airway procedures or patient with active cough
  - Impermeable gown for any situation likely to generate splash/liquid exposures

- **Contact Precautions**
  - Disposable exam gloves
  - Goggles/Face Shield for any airway procedures or patient with active cough
  - Impermeable gown

- **Droplet Precautions**
  - 2 Sets of Disposable Exam Gloves
  - Disposable surgical mask
  - Goggles/Face Shield
  - Impermeable gown

- **Airborne Precautions**
  - 2 Sets of Disposable Exam Gloves
  - N95 Respirator
  - Goggles/Face Shield
  - Impermeable gown

- **Special Respiratory Precautions**
  - 2 Sets of Disposable Exam Gloves
  - N95 Respirator
  - Goggles/Face Shield
  - Surgical Hood
  - Impermeable gown
  - Boot/Shoe covers

- **EVD/VHF**
  - Gloves
  - PAPR
  - Coverall
TRANSERPT CONSIDERATIONS

**Standard Precautions**
- Place disposable surgical mask on any patient with active cough if tolerable
- If the patient compartment is equipped with an exhaust fan, ensure that it is turned on.

**Contact Precautions**
- Consider applying an impermeable barrier sheet to the patient to protect the HCW and environmental surfaces in the presence of excessive wound drainage, fecal incontinence, or other discharges.
- Patients on contact precautions should preferentially be transported to a private room.

**Droplet Precautions**
- Consider having the patient compartment exhaust vent on high and isolating the driver compartment if performing aerosol producing procedures (airway suctioning, intubation, aerosolized medication administration).
- Increase ventilation by having air or heat on non-recirculating cycle and/or opening windows.

**Airborne Precautions**
- Notify the receiving hospital of the need for an airborne infection isolation room (AIIR) for patient placement.
- Consider having the patient compartment exhaust vent on high and isolating the driver compartment from the patient compartment.
- Consider having the driver compartment ventilation fan set to high without recirculation.
- If driver compartment is not isolated from the patient compartment, vehicle operator to wear NIOSH-approved, fit-tested N95 respirator.
- Patients who are intubated should be ventilated with a bag-valve device or ventilator equipped with a HEPA filter on exhalation port.

**Special Respiratory Precautions**
- Notify the receiving hospital of the need for an AIIR room for patient placement.
- The patient compartment exhaust vent should be on high and the driver compartment should be isolated from the patient compartment if possible. The driver compartment ventilation fan should be set to high without recirculation.
- The vehicle operator should wear a NIOSH-approved, fit-tested N95 respirator if the patient compartment and cab cannot be isolated.
- For persons under investigation for smallpox or novel influenza, consider transport by portable isolation unit or ambulance preparation as described for EVD-VHF Precautions.
- EMS agencies should have a plan for family members wishing to accompany the patient that prevents crew exposures to highly infectious diseases and includes a procedure to contact the appropriate public health authority for further information or actions.

**EVD/VHF**
- IDRU Response
<table>
<thead>
<tr>
<th>Precaution Type</th>
<th>Decontamination Steps</th>
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| **Standard Precautions** | - Any visibly soiled surface must first be decontaminated using EPA approved disinfectant wipes and/or EPA approved disinfectant spray.  
- Disinfect all potentially contaminated / high touch surfaces including the stretcher using EPA approved disinfectant wipes and/or EPA approved disinfectant spray.  
- Medical equipment (stethoscope, blood pressure (BP) cuff, etc.) making patient contact should be disposable or cleaned and disinfected before use on another patient. |
| **Contact Precautions** | - Any visibly soiled surface must first be decontaminated using EPA approved disinfectant wipes and/or EPA approved disinfectant spray.  
- Medical equipment (stethoscope, BP cuff, etc.) making patient contact should be disposable or cleaned and disinfected before use on another patient.  
- Other visibly contaminated equipment should similarly be cleaned and disinfected.  
- Confirmed or suspected C. difficile infection decontamination should utilize hypochlorite solutions. EPA-registered disinfectants with sporocidal activity may be sufficient, but limited data is available. |
| **Droplet Precautions** | - Any visibly soiled surface must first be decontaminated using EPA approved disinfectant wipes and/or EPA approved disinfectant spray.  
- Disinfect all potentially contaminated / high touch surfaces including the stretcher using EPA approved disinfectant wipes and/or EPA approved disinfectant spray.  
- Medical equipment (stethoscope, BP cuff, etc.) making patient contact should be disposable or cleaned and disinfected before use on another patient. |
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| **Special Respiratory Precautions** | - Any visibly soiled surface must first be decontaminated using EPA approved disinfectant wipes and/or EPA approved disinfectant spray.  
- Disinfect all potentially contaminated surfaces including the stretcher using EPA approved disinfectant wipes and/or EPA approved disinfectant spray.  
- Medical equipment (stethoscope, BP cuff, etc.) making patient contact should be disposable or cleaned and disinfected using appropriate disinfectants before use on another patient. |
| **EVD/VHF** | - IDRU Response |
PPE DONNING CHECKLIST

1. Obtain the following items:
   a. ☐ PPE Kit with the following:
      i. ☐ N95 Respirator Mask
      ii. ☐ Surgical Hood
      iii. ☐ Face Shield
      iv. ☐ Impervious Gown
      v. ☐ 2 Shoe Covers
   b. ☐ 2 Pair of Nitrile Gloves
      i. ☐ 1 Standard Size
      ii. ☐ 1 Larger than Standard Size
   c. ☐ PDI Sani-Hands (Blue Top Wipes)

2. Prepare to don PPE
   a. ☐ Trained observer present with checklist OUTSIDE of the patient’s room or residence
   b. ☐ Remove watches, jewelry and dangling items that could interfere with integrity of PPE
   c. ☐ Secure eyeglasses and hair with a tie
   d. ☐ Hydrate and attend to personal hygiene

3. Inspect PPE
   a. ☐ Inspect PPE for serviceability (e.g., not torn or ripped) and proper size

4. Perform hand hygiene
   a. ☐ Perform hand hygiene with alcohol-based hand sanitizer or PDI Sani-Hands

5. Don inner gloves
   a. ☐ Don gloves and extend cuffs up arms

6. Don impervious gown
   a. ☐ Ensure gown fully covers torso from neck to knees; arms to end of wrists
   b. ☐ Fasten gown by tying in a loop at waist
   c. ☐ Ensures no trip hazard exists

7. *For EVD/VHF, Special Respiratory Precautions or when provider anticipates additional lower extremity protection is necessary* Don impervious boot covers
   a. ☐ Sit down and pull on impervious high-top shoe covers

8. Don N95 respirator
   a. ☐ Don N95 mask and check for seal per fit testing standards

9. *For EVD/VHF and Special Respiratory Precautions* Don surgical hood
   a. ☐ Place hood over the head
   b. ☐ Ensure that the hood covers all the hair, ears and neck
   c. ☐ Recheck that eyeglasses are secured
   d. ☐ Adjust N95 mask if needed to ensure proper seal

10. Don face shield
    a. ☐ Positions shield above eyebrows and mid-forehead to cover eyes, nose and mouth
    b. ☐ Adjust N95 mask if needed to ensure proper seal

11. Don outer gloves
    a. ☐ Extend the cuff to cover the sleeves or cuffs of the impervious coverall or gown
    b. ☐ Tuck excess material of the sleeve into cuff

12. Inspection
a. ☐ Extends arms and verifies integrity of PPE with observer
b. ☐ Bends at waist
c. ☐ Squats and returns to standing position
d. ☐ Slowly turns in circle for final inspection
e. ☐ Observer to mark suit with wearer’s name and time doned

13. Reminder
   a. ☐ Hands are to be kept away from all mucous membranes (eyes, nose and mouth)

NAME OF PROVIDER

NAME OF TRAINED OBSERVER

DATE

TIME DONNING COMPLETED
PPE DOFFING CHECKLIST

1. Trained observer will collect necessary items for doffing procedure
   a. ☐ Bio hazard bag and trash can
   b. ☐ Stryker Sidekick Wipes (Yellow Top Wipes)
   c. ☐ PDI Sani-Hands (Blue Top Wipes)
   d. ☐ Clorox Healthcare Hydrogen Peroxide
   e. ☐ Box of gloves of appropriate size for Provider
   f. ☐ PPE for Trained Observer
      i. ☐ Gown
      ii. ☐ Box of Gloves of appropriate size for Trained Observer
      iii. ☐ Face Shield
   g. ☐ Identify a “Decontamination Area”

2. Trained Observer will perform Hand Hygiene
   a. ☐ Perform hand hygiene with alcohol-based hand sanitizer or PDI Sani-Hands

3. Trained observer will don the appropriate PPE
   a. ☐ Inner Gloves
   b. ☐ Gown
      i. ☐ Trained Observer will tie gown in the back by his/herself or have bystander tie gown in a bow in the back
   c. ☐ Face Shield
   d. ☐ Outer Gloves

4. Begin Doffing Process
   a. ☐ Engage the trained observer in the “Decontamination Area” with the checklist

5. Inspect PPE
   a. ☐ Inspect PPE for soiling or breaches
   b. ☐ If PPE is visibly contaminated, disinfect by using a Stryker Sidekick Wipe
      i. ☐ Wipe down and away from contaminated area with a single wipe per swipe until contamination is removed
   c. ☐ If the Trained Observer performs any disinfecting of the Provider’s gown the Trained Observer will perform hand hygiene using a Striker Sidekick wipe

6. Provider will perform Hand Hygiene
   a. ☐ Perform hand hygiene by using a Styker Sidekick wipe

7. Provider will Doff outer gloves
   a. ☐ Using proper aseptic de-gloving technique
   b. ☐ Discard both outer gloves in the biohazard waste container

8. Inspect Gloves
   a. ☐ Inspect the inner gloves’ outer surfaces for visible contamination, cuts, or tears

9. Provider will perform Hand Hygiene
   a. ☐ Perform hand hygiene by using a Styker Sidekick wipe

10. Provider will Doff face shield
    FACE SHIELD IS CONSIDERED CONTAMINATED
    a. ☐ Remove by tilting the head slightly forward, grasping the rear strap and pulling it gently over the head and allowing the face shield to fall forward
    b. ☐ Discard in the biohazard waste container

11. Provider will perform Hand Hygiene
    a. ☐ Perform hand hygiene by using a Styker Sidekick wipe
    IF SHOE COVERS WERE NOT USED CONTINUE TO STEP 16

12. Provider will Don gloves
13. Provider will remove shoe covers
   a. Sitting on a clean and stable surface at the border of the designated decontamination area, remove shoe covers, one leg at a time
   b. Place fingers inside shoe cover and begin rolling down towards the foot
   c. Remove shoe cover and discarded in the biohazard waste container
   d. As the shoe cover comes off each foot, place foot into the clean zone

14. Provider will perform Hand Hygiene
   a. Perform hand hygiene by using a Styker Sidekick wipe

15. Provider will Doff outer gloves
   a. Using proper aseptic de-gloving technique
   b. Discard both outer gloves in the biohazard waste container

16. Provider will perform Hand Hygiene
   a. Perform hand hygiene by using a Styker Sidekick wipe
   IF HOOD WAS NOT USED CONTINUE TO STEP 22

17. Provider will Don outer gloves
   a. Extends to cover the sleeves or cuffs of the impervious coverall or gown
   b. Tuck excess material at sleeve into cuff

18. Provider will Doff hood
   HOOD IS CONSIDERED CONTAMINATED
   a. Lean forward to avoid allowing the front of the hood from brushing over their exposed mucous membranes (i.e. eyes)
   b. Remove hood by gently pulling the hood from the rear of the head in a motion that is down and away from the neck and shoulders
   c. Discard in the biohazard waste container

19. Provider will perform Hand Hygiene
   a. Perform hand hygiene by using a Styker Sidekick wipe

20. Provider will Doff outer gloves
   a. Using proper aseptic de-gloving technique
   b. Discard both outer gloves in the biohazard waste container

21. Provider will perform Hand Hygiene
   a. Perform hand hygiene by using a Styker Sidekick wipe

22. Provider will Doff impervious gown
   GOWN IS CONSIDERED CONTAMINATED
   a. Trained Observer will untie back of gown
   b. Trained Observer will tie each section of the gown in a loop to prevent a trip or contamination hazard
   c. Trained Observer will pull the gown away from the body until the gown tears behind the neck
   d. Trained Observer will remove gown by pulling the gown away from the neck and shoulders, touching the inside only
      i. As the gown is rolled away from the body it is turned inside out, folded or rolled into a bundle and discarded in the biohazard waste container

23. Provider will perform Hand Hygiene
   a. Perform hand hygiene by using a Styker Sidekick wipe

24. Trained Observer will perform Hand Hygiene
   a. Perform hand hygiene by using a Styker Sidekick wipe

25. Provider will Doff inner gloves
   a. Using proper aseptic de-gloving technique
   b. Discard both outer gloves in the biohazard waste container

26. Provider will perform Hand Hygiene
a. □ Perform hand hygiene by using a PDI Sani-Hands wipe

27. Provider will Don gloves
   a. □ Don gloves and extend cuffs up arms

28. Provider will remove N95 Respirator
   a. □ Remove N95 respirator from the back to front and discard in the infectious waste container

29. Provider will perform Hand Hygiene
   a. □ Perform hand hygiene by using a Styker Sidekick wipe

30. Provider will Doff gloves
   a. □ Using proper aseptic de-gloving technique
   b. □ Discard both outer gloves in the biohazard waste container

31. Provider will perform Hand Hygiene
   a. □ Perform hand hygiene by using a PDI Sani-Hands wipe

32. Inspect Provider’s Uniform or Garment
   a. □ Perform a final inspection for contamination of the uniform or disposable garments
   b. □ If contamination is identified, carefully remove the garments and shower immediately

33. Trained Observer will decontaminate boots
   a. □ Trained Observer will spray boots (including soles) and bottom of pants with Clorox Healthcare Hydrogen Peroxide

34. Trained Observer will now Doff PPE
   a. □ The provider will now use checklist to assist with PPE doffing of the Trained Observer

35. Provider will now Don gloves
   a. □ Provider will Don clean gloves to assist with the removal of PPE

36. Provider will Inspect PPE
   a. □ Inspect PPE for soiling or breaches
   b. □ If PPE is visibly contaminated, disinfect by using a Stryker Sidekick Wipe
      i. □ Wipe down and away from contaminated area with a single wipe per swipe until contamination is removed
   c. □ If gown required decontamination by the Provider the provider will perform hand hygiene using Stryker Sidekick wipe

37. Trained Observer will perform Hand Hygiene
   a. □ Perform hand hygiene by using a Styker Sidekick wipe

38. Trained Observer will Doff outer gloves
   a. □ Using proper aseptic de-gloving technique
   b. □ Discard both outer gloves in the biohazard waste container

39. Trained Observer will perform Hand Hygiene
   a. □ Perform hand hygiene by using a Styker Sidekick wipe

40. Trained Observer Doff face shield
   a. □ Face shield is considered contaminated
      a. □ Remove by tilting the head slightly forward, grasping the rear strap and pulling it gently over the head and allowing the face shield to fall forward
      b. □ Discard in the biohazard waste container

41. Trained Observer will perform Hand Hygiene
   a. □ Perform hand hygiene by using a Styker Sidekick wipe

42. Trained Observer will Doff impervious gown
   a. □ Gown is considered contaminated
      a. □ Provider will untie back of gown
b. □ Provider will tie each section of the gown in a loop to prevent a trip or contamination hazard
c. □ Provider will pull the gown away from the body until the gown tears behind the neck
d. □ Provider will remove gown by pulling the gown away from the neck and shoulders, touching the inside only
   i. □ As the gown is rolled away from the body it is turned inside out, folded or rolled into a bundle and discarded in the biohazard waste container

43. Provider will perform Hand Hygiene
   a. □ Perform hand hygiene by using a Styker Sidekick wipe

44. Trained Observer will perform Hand Hygiene
   a. □ Perform hand hygiene by using a Styker Sidekick wipe

45. Trained Observer will Doff Inner gloves
   a. □ Using proper aseptic de-gloving technique
   b. □ Discard both outer gloves in the biohazard waste container

46. Trained Observer will perform Hand Hygiene
   a. □ Perform hand hygiene by using a PDI Sani-Hands wipe

47. Provider will Doff gloves
   a. □ Using proper aseptic de-gloving technique
   b. □ Discard both outer gloves in the biohazard waste container

48. Provider will perform Hand Hygiene
   a. □ Perform hand hygiene by using a PDI Sani-Hands wipe

49. Trained Observer will dispose of waste
   a. □ Trained Observer will Don clean pair of gloves
   b. □ Trained Observer will gather any loose PPE and place in the biohazard waste container
   c. □ Trained Observer will tie the infectious waste container closed
   d. □ Trained Observer will dispose of the infectious waste container in the proper receptacle

50. Trained Observer will perform Hand Hygiene
   a. □ Perform hand hygiene by using a Styker Sidekick wipe

51. Trained Observer will Doff gloves
   a. □ Using proper aseptic de-gloving technique
   b. □ Discard both outer gloves in the biohazard waste container

52. Trained Observer will perform Hand Hygiene
   a. □ Perform hand hygiene by using a PDI Sani-Hands wipe

53. Follow Up
   a. □ Perform staff rehab, medical monitoring, documentation, and behavioral wellness check as indicated

__________________________  __________________________
NAME OF PROVIDER            NAME OF TRAINED OBSERVER

__________________________  __________________________
DATE                      TIME DOFFING COMPLETED