
Pandemic Protocol **UPDATED July 2020**

In the event of a pandemic, Emergency Medical Responders (EMRs) and Paramedics will play an important role in the education, prevention, and treatment of patients. Immunization of the public is the primary means to decrease morbidity and mortality in the event of an epidemic and pandemic. Dependent on the Saskatchewan Health Authority (SHA) and the Athabasca Health Authority's (AHA) pandemic plans and the availability of resources, EMRs and Paramedics may be a part of the interdisciplinary health care team in mitigating a pandemic crisis.

Based on specific needs during a pandemic, the health authorities will have the responsibility of educating and informing EMS and staff on the overall response plan and the role that EMRs and Paramedics will play in it. The SHA and AHA will work with the Saskatchewan College of Paramedics to ensure their immunization training is an approved method and that it meets the regulatory bylaws of the College. Please note that this protocol may be amended periodically dependent on the pandemic and SHA and AHA plan(s).

Assessment

1. When possible, paramedics should stay 2 meters away from patients and bystanders with symptoms until appropriate routine respiratory droplet precautions can be instituted and ensure all appropriate personal protective equipment (PPE) is donned while assessing all patients for suspected influenza-like- illnesses.

2. Assess all patients for symptoms of influenza-like illness (ILI).
 - a. Adults: Sudden onset of new cough, or change in existing cough plus one or more of the following:
 - i. fever (≥ 38 °C on arrival or by history)
 - ii. sore throat
 - iii. joint pain
 - iv. muscle aches
 - v. severe exhaustion/weakness

 - b. Pediatric: Sudden onset of any of the following symptoms:
 - i. runny nose
 - ii. cough, sneezing
 - iii. +/- fever
 - iv. < 5years gastrointestinal symptoms may be present.

****Over age 65 and under age 5, fever may not be prominent****

Personal Protective Equipment (PPE)

When treating a patient with a high suspicion of a pandemic illness, the following PPE should be worn:

1. While performing a potential aerosol-producing procedure (e.g. endotracheal intubation, administering nebulized medications, resuscitation, etc.) disposable N95 use fit-tested respirator and eye protection (e.g., goggles; eye shield), disposable non-sterile gloves, and gown. When possible, and in accordance with the SHA or AHA's pandemic response plan, the use of metered-dose inhaler (MDI) may be warranted by the PCP/ACP practitioner to reduce the risk of transmission.
2. Place a standard surgical mask or oxygen mask on the patient, if tolerated.
3. Use good respiratory hygiene, using non-sterile gloves for contact with patient, patient secretions, or surfaces that may have been contaminated. Follow hand hygiene including hand washing or cleansing with alcohol-based hand disinfectant after contact.
4. Encourage good patient compartment vehicle airflow/ ventilation to reduce the concentration of aerosol accumulation when possible.

Refer to the Ministry of Health website, SHA and/or AHA's pandemic plan and other resources for further information on PPE, immunizations and provincial occupational health and safety standards (OHS).

Nasopharyngeal / Oropharyngeal Swabs During Pandemic

The Saskatchewan College of Paramedics and the College of Physicians and Surgeons of Saskatchewan have approved the addition of Nasopharyngeal (NP) and Oropharyngeal (OP) specimen collection to the current Primary Care Paramedic (PCP), Intermediate Care Paramedic (ICP), Advanced Care Paramedic (ACP) and Critical Care Paramedic (CCP) scope of practice for pandemic purposes only. Only those trained in NP/OP swabbing are permitted to perform this skill.

All paramedics performing NP/OP swabbing would be required to follow the AHA and SHA guidelines on Personal Protective Equipment (PPE). Current practice standards require that all paramedics be trained in the use of PPE and complete a refresher on a regular basis.