

# Prehospital Emergency Medical Service Readiness Checklist for COVID-19

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Evaluation date:	Country:
Name of department/organization:	
Type: <input type="checkbox"/> Government <input type="checkbox"/> Private <input type="checkbox"/> Volunteer <input type="checkbox"/> Other:	
Level: <input type="checkbox"/> National <input type="checkbox"/> State/Regional/Provincial Indicate which: <input type="checkbox"/> Local Indicate which:	
Emergency telephone number:	Call management: <input type="checkbox"/> Dispatch <input type="checkbox"/> Triage/regulation
Mobile resources:	
<input type="checkbox"/> Non-urgent transport vehicles (number: )	
<input type="checkbox"/> Basic life-support ambulances (number: )	
<input type="checkbox"/> Advanced life-support ambulances (number: )	
<input type="checkbox"/> Medical helicopters (number: )	
<input type="checkbox"/> Medical boats (number: )	
<input type="checkbox"/> Rapid-intervention vehicles (number: )	
<input type="checkbox"/> First-response motorcycles (number: )	
Personnel:	
<input type="checkbox"/> Basic emergency medical technicians (number: )	
<input type="checkbox"/> Intermediate emergency medical technicians (number: )	
<input type="checkbox"/> Paramedics (number: )	
<input type="checkbox"/> Nurses (number: )	
<input type="checkbox"/> Physicians (number: )	
First-responder program:	
<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Police <input type="checkbox"/> Fire Department <input type="checkbox"/> University <input type="checkbox"/> Other (indicate which):	
Name of the person completing/participating in the survey:	
Name of the evaluators:	

<b>COMPLETE</b>	The EMS has developed, validated, and implemented the procedure/protocol. It has the recommended equipment.
<b>IN PROCESS</b>	The EMS has developed a procedure/protocol but has not yet implemented or validated it. The equipment is being purchased but has not yet been received.
<b>INCOMPLETE</b>	The EMS does not have the procedure/protocol and/or recommended equipment.

COMPONENTS	OBJECTIVE	ENROLMENT ACTIONS	COMPLETE	INCOMPLETE	IN PROCESS
CALL MANAGEMENT	Ensure that calls are properly routed to 911 or other emergency medical dispatch centers to activate EMS resources	Availability of a technological platform for correct classification of alerts, call management, and information management			
		Identified and established mechanisms for communication/coordination with authorities at health services and points of entry, for case reporting and transportation of patients			
		The call protocol has an up-to-date questionnaire that includes COVID-19 symptoms and risk factors for (e.g., history of travel to affected areas), based on case definition.			
		Pre-arrival instructions are in place so that family members or first responders wait for ambulance services (The survey or instructions must not delay immediate advice on life-threatening situations).			
		Existence of a COVID-19 pre-arrival protocol (Post-dispatch Information Protocol) for responding units to ensure the appropriate use of personal protective measures and equipment			
		Availability of a mechanism to regulate and coordinate interhospital transfers			
FIRST RESPONDERS	Facilitate system activation and initiation of treatment by first responders or the caller	Identified and established protocol/procedure for communication with 911 and emergency medical dispatch centers and/or EMS in order to inform emergency medical personnel of a possible case of COVID-19			
		Basic Life Support procedures for suspected cases, established in coordination with the corresponding EMS			
		Procedure for the disposal of biological/infectious waste after the response, established with the ambulance service or the integrated health services network			
MEDICAL TRANSPORTATION (INCLUDING PRIMARY AND INTERHOSPITAL)	Establish safe treatment (including basic and/or advanced life support) and ensure appropriate patient transport to the receiving health facility	Hospital Pre-arrival notification procedure established with the integrated health service network to confirm the reception and to facilitate the emergency department preparation for the arrival of the suspected or confirmed case.			
		Identified and established mechanisms for communication/coordination with health authorities in order to report ambulance in route and patient transfer			

COMPONENTS	OBJECTIVE	ENROLMENT ACTIONS	COMPLETE	INCOMPLETE	IN PROCESS
		Mechanism for interhospital transfer identified and established with 911 and/or emergency medical dispatch center centers and the integrated health services network			
		Identification and location of ambulances with compartmentalized separation between the driver's cabin and treatment area, and/or a HEPA filter in their ventilation circuits			
		Availability of adequate hand hygiene resources in the ambulance			
		Availability of an adequate, clearly indicated area for the disposal of biological/infectious waste in ambulances			
		Availability of a care protocol for the management and transportation of suspected and confirmed cases			
		Availability of a protocol for airway management and ventilation, including all techniques with risk of aerosol production			
		Availability of manual ventilation devices with HEPA filters in vents			
		Review and confirmation of filtration capacity of the ventilators used in ambulances and their effect on positive pressure ventilations			
		Review and updating of the forms used to report ambulance interventions in order to include all aspects relevant to suspected cases (type of care provided and information on contacts), to be delivered to the receiving hospital and health authorities			
		Established procedure for hygiene of ambulance workers and cleanliness treatment area in the ambulance			
		An identified, designated area in the ambulance station and/or referral hospital to decontaminate and disinfect materials and the ambulance			
		Established procedure for the final disposal of biological/infectious waste after the response or after the ambulance shift			
		Established procedure for management of deaths on the scene or in route			

COMPONENTS	OBJECTIVE	ENROLMENT ACTIONS	COMPLETE	INCOMPLETE	IN PROCESS
		Hospital Pre-arrival notification procedure established with the integrated health service network to confirm the reception and to facilitate the emergency department preparation for the arrival of the suspected or confirmed case.			
911/EMS ADMINISTRATION	Ensure proper operation of 911/emergency medical dispatch centers and ambulance services	Trained, sufficient, and available personnel to cover call management posts and ambulance staffing.			
		Protocol developed, implemented, and tested for risk exposure assessment and management of professionals exposed to COVID-19			
		Protocol developed and implemented for medical leave for quarantined emergency personnel			
		Periodic updating and maintenance of all EMS procedures for COVID-19 response			
		All EMS personnel trained in the Detect – Isolate – Report (D.I.R) conduct			
		Members of the first-responders program are trained in initial management of suspected cases			
		All ambulance staff are trained in assessment and initial medical care of suspected and confirmed cases of COVID-19			
		All ambulance staff are trained in the use of PPE and aware of COVID-19 transmission mechanisms			
		All ambulance staff are trained in decontamination and disinfection procedures of vehicles and equipment			
		The system for communication/coordination with 911, points of entry, the integrated health services network, and health authorities involved in case management remains operative			
Official spoke person designated and coordinated with health authorities					