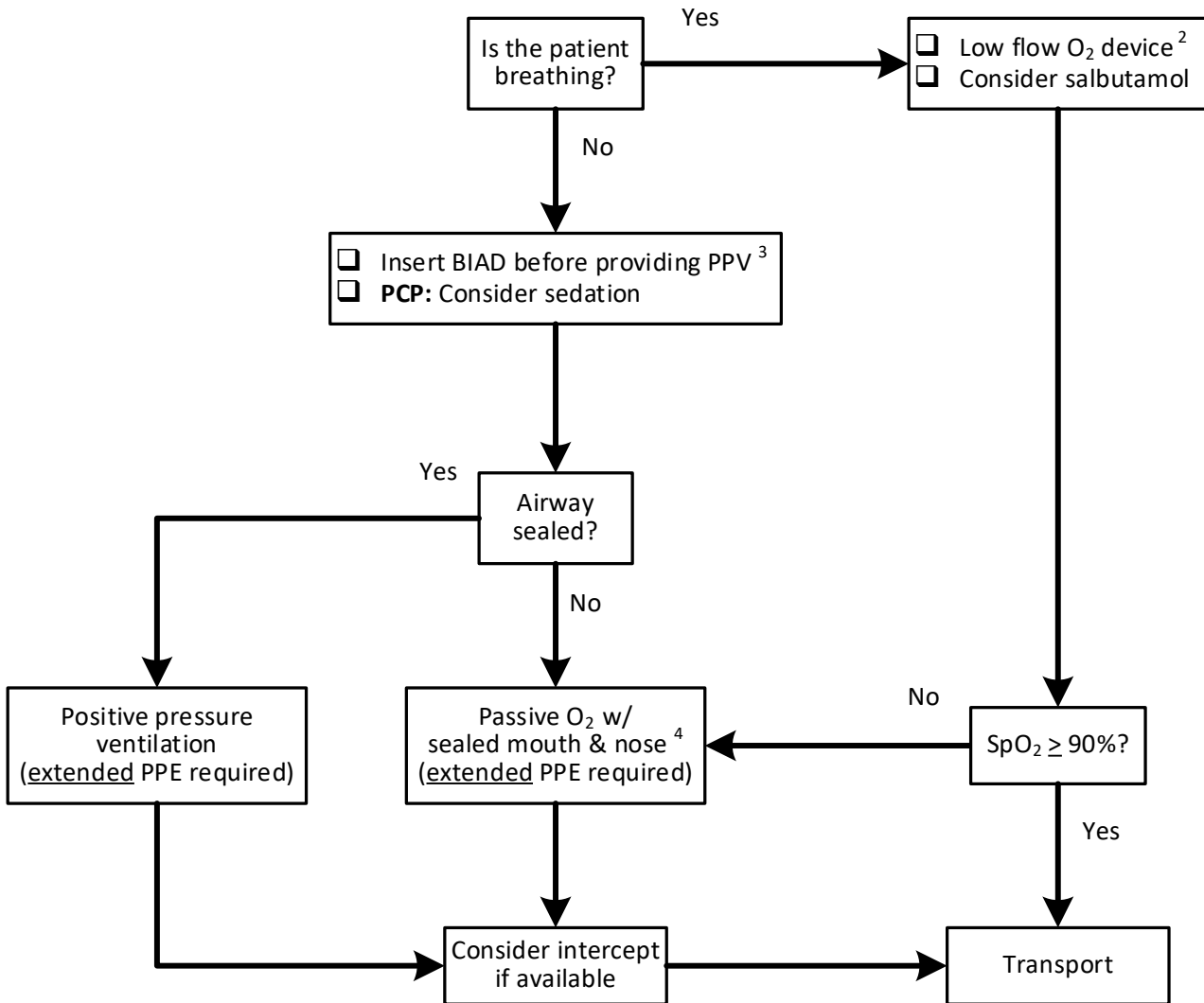
	C12 - MANAGING HYPOXEMIA DURING THE COVID PANDEMIC	
	All ages	RESUSCITATION
ALL - Paramedics with all work scopes will follow this protocol except where indicated by PCP (primary & intermediate only).		
Version date: 2022-07-16	Effective date: 2022-09-27 (0700 hrs)	



INDICATION

- Dyspnea respiratory distress, or respiratory failure (SpO₂ < 90%) during the COVID pandemic

CONTRAINDICATION

- Newborns do not require a sealed airway for positive pressure ventilation (PPV) during neonatal resuscitation ³

NOTES

1. Assume every patient may be COVID positive.
 - a. Appendix A lists the symptoms and signs suspicious for COVID infection, which includes shortness of breath or difficulty breathing. A patient may be infected but asymptomatic.
 - b. All paramedics should wear contact & droplet personal protective equipment (PPE) if the patient is known or suspected to have COVID, regardless of the chief complaint.
 - c. If there is any possibility of aerosol generating medical procedure (AGMP) being required (refer to A09 - MEDICAL PROCEDURES DURING COVID PANDEMIC), paramedics should don extended PPE in advance.
 - d. Keep a distance of two meters (six feet) between the patient and family / friends / bystanders. All individuals not directly involved with the patient should be instructed to step well back. All individuals who cannot leave the immediate area should don procedure mask.
2. Low flow oxygen (O₂) devices that are not considered AGMP include the following:
 - a. Nasal prongs (maximum flow 6 lpm)
 - b. Simple face mask (maximum flow 10 lpm)
 - c. Non-rebreather mask (maximum flow 15 lpm)
 - d. Oxymask (maximum flow 15 lpm)
3. **This does not include positive pressure ventilation (PPV) during newborn resuscitation.**
4. Passive oxygenation is provided using a self-inflating ventilation bag and mask (VBM) with oxygen delivered at a flow rate of 15 lpm (figure 1). The system is kept closed by using a two-hand mask seal, or by attaching the bag-valve device to a well-fitted CPAP facemask (figure A). DO NOT SQUEEZE THE BAG.

FIGURE A: PASSIVE OXYGENATION WITH VBM & MOUTH / NOSE SEALED



LINKS

A09 - MEDICAL PROCEDURES DURING COVID PANDEMIC
 SHARED HEALTH - PROVINCIAL PPE REQUIREMENTS FOR EMERGENCY RESPONSE SERVICES (October 6, 2021)
 M15 - SALBUTAMOL

APPROVED BY

Medical Director - Provincial EMS/PT

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VERSION CHANGES (refer to X03 for change tracking)

- Compliance statement moved out of header to become policy & procedure A03
- Work scope statement added to header

APPENDIX A: SYMPTOMS & SIGNS SUSPICIOUS FOR COVID INFECTION

- Fever / chills
- Cough (or increased severity of chronic cough)
- Shortness of breath / difficulty breathing
- Hypoxemia / hypoxemia (not due to trauma)
- Sore throat / hoarse voice (not due to trauma)
- Runny nose
- Headache
- Muscle aches (not due to trauma or exercise)
- Loss of smell / taste
- Conjunctivitis
- Nausea / Loss of appetite
- Poor feeding in infants
- Diarrhea / vomiting for more than 24 hours
- Fatigue
- Skin rash of unknown cause