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## Emergency Medical Services

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## ~~~~~SBCEMSA MEDICAL DIRECTOR GUIDANCE~~~~~

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**RE:** Mitigating Healthcare System Demand

The COVID-19 pandemic is placing extraordinary demands on our healthcare systems. The surge we all feared is happening and we must take steps to mitigate its impact. This is a dynamic situation that requires us to be flexible and adaptable. Effective immediately, all pre-hospital EMS providers will observe the below guidelines:

1. **Oxygen Therapy Guidance:** it is essential that prehospital care follow clinical policies and protocols. Oxygen administration should be limited to those with an oxygen saturation less than 94%, as outlined in [SBCEMSA Policy 533](#). Providers should continue to limit the use of CPAP and nebulizer treatments as per the guidance issued on 03/19/2020.
2. **Hospice patients and “comfort care” patients:** comfort care patients should not be transported to the hospital unless their “comfort needs cannot be met in their current location.” Hospice patients should not be transported to the hospital unless there is a clear extenuating circumstance that prevents the patient from receiving compassionate care in their residence (e.g. uncontrollable hemorrhage, profuse/uncontrollable vomiting/diarrhea, uncontrolled severe pain, etc.). Prehospital providers who encounter a hospice or comfort care patient should provide the care outlined on the POLST form with the goal of maximizing comfort.
  - a. Hospice patients:
    - Confirm goals of care with durable power of attorney or facility staff and verify valid POLST
    - Call the hospice agency of record if not already on scene
    - Transport ONLY if comfort needs cannot be met in current location AND medical decision maker (power of attorney) requests transport
    - Prehospital providers should contact the base hospital physician prior to transporting
  - b. Comfort Care patients:

- Confirm goals of care with durable power of attorney or facility staff and verify valid POLST
- Provide care as outlined on POLST form
- Transport ONLY if comfort needs cannot be met in current location and medical decision maker (power of attorney) requests transport
- Prehospital providers should contact the base hospital physician prior to transporting



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