

## Practice Update – First Responders April 2<sup>nd</sup>, 2020

Adapted from BCEHS Practice Update March 31<sup>st</sup>, 2020 <https://handbook.bcehs.ca/covid-19/covid-19-update-march-31st/pandemic-airway-practice-update-v7/>

**Audience:** All Fire Departments

**Subject:** Airway management in the setting of the COVID-19 pandemic

### What's new:

The BCEHS Clinical and Medical Programs has evaluated the current evidence and the national and international best practice for out-of-hospital airway management during COVID-19. Based on this review CMP continues to recommend that airway management and involves a staged approach that reduces risk to First Responders and others to stop the spread of infection.

### Patients in Cardiac Arrest

1. Wear full PPE and exercise extreme caution
2. Place a mask (surgical) on the patient, perform compression only CPR and defibrillation as necessary with **NO** oxygenation or airway management until paramedics arrive

### Patients in Respiratory Distress

1. Wear full PPE and exercise extreme caution
2. **Use the lowest oxygen flow possible to reduce the signs (rapid heart rate and respirations, cyanosis, confusion) and symptoms (shortness of breath) of low blood oxygen (hypoxia)**
3. Begin with oxygen at 6 liter per minute flow with a standard oxygen mask and assess for improvement in patient signs and symptoms
4. If no improvement after 1 minute, increase flow rate to 8 liters per minute
5. If no improvement after 1 minute, increase flow rate to 10 liters per minute
6. If no improvement after 1 minute switch to a non-breather mask and increase flow rate to 12 liters per minute
7. If no patient improvement after 1 minute increase flow rate to 15 liters per minute
8. If patient's respirations become ineffective or respiratory rate less than 10 at any time, increase oxygen flow to 15 liters and assist ventilations
9. When ventilating a patient with a BVM and in-line filter ensure a tight-fitting seal (2 person)
10. ALWAYS USE AN INLINE FILTER when ventilating any patient
11. Suction only when necessary,



## **Why?**

BCEHS is committed to protecting First Responders and others from harm. During the COVID-19 pandemic, their first priority is protecting First Responders and reducing the spread of the virus. Transmission of COVID-19 is primarily through droplet spread and aerosolization. As such, it is crucial to limit the practice of certain procedures. Airway management is deemed a high-risk procedure and includes the application of high flow oxygen, CPR and the use of a BVM.

Minimize oxygen flow with all devices to achieve improvement of patient's symptoms, ideally less than 6 litres per minute. However, in some patients, higher flow rates with face masks or bag-valve masks are necessary, in these cases, oxygen flow rates should not exceed 15 L/min.