

Chapter: COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES
Key Words: Policy/Procedure/Protocol

SUBJECT: Assess and Refer Option for Patients
During the COVID-19 Pandemic

POLICY NO: S-415A
PAGE: 1 of 5
DATE: September 2, 2021

AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.94, 1797.153 and Division 1010, Section 101310 and [State of California Proclamation of State of Emergency, March 4, 2020](#)

I. PURPOSE

- A.** To guide paramedic evaluation and transport decisions for patients experiencing mild respiratory illness possibly related to COVID-19.
1. Based on the current science, most persons with COVID-19 experience mild illness and fully recover.
 2. Those at high risk for severe illness and/or complications include patients who are over 60 years of age, those of any age with compromised immune systems, and those with underlying medical conditions, including pregnancy.
 3. The [Centers for Disease Control and Prevention](#) recommend that low-risk patients potentially infected with COVID-19 experiencing mild disease self-isolate at home unless symptoms worsen. The County of San Diego Public Health Order remains in effect requiring isolation for COVID-19 positive individuals.

II. BACKGROUND

A. Definitions

Designated Decision Maker (DDM):

An individual to whom a person has legally given the authority to make medical decisions concerning the person's health care (i.e., a parent, legal guardian, an "attorney-in-fact" through a Durable Power of Attorney for Health Care (DPAHC), or an "agent" through an Advance Health Care Directive).

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POLICY NO: S-415A
PAGE: 2 of 5
DATE: September 2, 2021

Emergency Patient:

Any person for whom the 9-1-1/EMS system has been activated and who meets the following criteria:

1. Has a chief complaint or suspected illness/injury
2. Is not oriented to person, place, time, or event
3. Requires or requests field treatment or transport
4. Is a minor who is not accompanied by a parent or legal guardian and is ill or injured, or appears to be ill or injured

Low-Risk Patients* with Potential COVID-19 Infection:

1. Asymptomatic patients greater than 2 years of age and less than 60 years of age requesting transport solely for COVID-19 evaluation **OR**
2. Mildly symptomatic patients greater than 2 years of age and less than 60 years of age presenting with signs/symptoms consistent with COVID-19 infection (e.g., low grade fever, respiratory complaints, loss of smell or taste)

*Patients are NOT considered low-risk and are therefore ineligible for Assess and Refer if they have any of the following:

1. A complaint of shortness of breath, chest pain, or altered level of consciousness
2. Abnormal vital signs for age, including SpO2 <95%, elevated respiratory rate, or observed labored breathing
3. Suspicion the patient (or DDM) is impaired by alcohol or drugs

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Key Words: Policy/Procedure/Protocol

SUBJECT: Assess and Refer Option for Patients
During the COVID-19 Pandemic

POLICY NO: S-415A

PAGE: 3 of 5

DATE: September 2, 2021

4. The patient/DDM is unable to comprehend or demonstrate an understanding of his/her illness
5. History of significant comorbid disease including COPD, CHF, diabetes, cardiac disease, renal failure, immunocompromise, chemotherapy, or pregnancy
6. Residents of skilled nursing facilities
7. Emergency medical condition, per paramedic judgment

Patient-Centered Care:

Defined as:

1. A patient's health needs are the deciding factor behind all health decisions and quality measurements
2. Providing care that is respectful of, and responsive to, individual patient preferences, needs, and values, and ensuring that patient values guide all clinical decisions
3. Focusing care on the needs of the person rather than the needs of the service

III. POLICY

A. Considerations for Assess and Refer Option-eligible patients:

1. Paramedic assessment shall determine if the patient can be categorized as a low-risk patient
2. Base hospital contact should be considered as a resource
3. Low-risk patients should be advised that they should self-isolate at home
4. Paramedics shall adhere to the principles of patient-centered care
5. Paramedic judgment of the patient's ability to safely self-isolate and follow medical advice shall inform application of the Assess and Refer Option

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POLICY NO: S-415A
PAGE: 4 of 5
DATE: September 2, 2021

B. Patients not meeting low-risk criteria shall be treated and transported per San Diego County EMS Policies S-407 and S-415, and County EMS Medical Director memo [EMS Patient Destination Considerations During The COVID-19 Outbreak](#).

C. Assess and Refer Procedure

1. If in the low-risk category, a desire for COVID-19 testing does not, on its own, warrant transport via EMS.
2. For patients being referred to other resources, EMS personnel shall advise patients directly or via their DDM to:
 - a. Contact 2-1-1 and/or their medical home's COVID-19 telephone screening center.
 - b. Seek follow-up treatment with their physician, preferably by telephone or telehealth visit.
 - c. Locate a no-cost COVID-19 testing site, if not yet confirmed to have COVID-19, via the coronavirus-sd.com website.
 - d. Assess for eligibility for monoclonal antibody treatment if they are COVID-19 positive and have or develop mild- to moderate-symptoms. See the [MARC \(monoclonal antibody regional center\) website](#) for additional information.
 - e. Isolate at home, apply appropriate social/physical distancing, avoid contact with high-risk persons, and self-monitor their condition for worsening symptoms. For patients unable to isolate at home, EMS personnel can call the Care and Shelter hotline at 858-715-2350 or instruct the patient to call 2-1-1.
 - f. Isolate in accordance with County of San Diego, Health and Human Services Agency, Department of Public Health Services guidance, located at coronavirus-sd.com.
 - g. Paramedics shall document the advice given to patients not transported by EMS. The following statement is recommended:
 - i. **“It appears that you do not require emergency ambulance transportation to the hospital emergency department. You should seek care via your**

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POLICY NO: S-415A
PAGE: 5 of 5
DATE: September 2, 2021

- regular healthcare provider or a doctor’s office or clinic, particularly if symptoms worsen. Call 2-1-1 for advice if you do not have access to other healthcare. If you develop shortness of breath, confusion, dizziness, or other severe symptoms, recontact 9-1-1 immediately.”**
- h. EMS personnel shall deliver home care instructions and referral contact information (2-1-1 or other contact appropriate for patient-centered care). These instructions may include [County of San Diego Home Isolation Instructions for COVID-19](#) (also [available in multiple languages](#)), [the California EMSA home care guidance](#), [County of San Diego Home Quarantine Guidance](#) for household members (also [available in other languages](#)) or similar documents.
3. Assess and Refer represents a shared decision-making process to provide the best, most appropriate care for individual patients, including minimizing their risk of disease exposure. Patients are not required to sign an AMA form when exercising the Assess and Refer Option.
 4. If the patient/DDM requests that the patient be transported after assurance that the transport is not recommended, EMS personnel should honor the request and transport per County of San Diego EMS Policy S-407 “Triage to Appropriate Facility.”
 5. Paramedic Service Provider agencies shall review every Assess and Refer patient contact within 72 hours for criteria compliance. Inappropriate Assess and Refer patient contacts shall be forwarded to agency’s Base Hospital for immediate review.