



Statement on Coronavirus Disease 2019 (COVID-19) and Emergency Medical Care Training March 9, 2020 • Health & Safety Institute

The Health & Safety Institute is providing the following information, [available from the U.S. Centers for Disease Control \(CDC\)](#), to help address questions about the potential effects of coronavirus disease 2019 (COVID-19) on emergency medical care training using the ASHI, EMS Safety, and MEDIC First Aid training programs. At this point, we are making no recommendations or modifications to training content or skills covered in class, including rescue breaths or chest compressions.

The CDC is still learning about how COVID-19 spreads, the severity of illness it causes, and to what extent it may spread in the United States. According to the CDC, COVID-19 symptoms are similar to those of seasonal influenza (e.g., fever, cough, myalgias, and shortness of breath). It estimates that so far this season there have been at least 34 million flu illnesses, 350,000 hospitalizations, and 20,000 deaths from the flu. So, while COVID-19 is an emerging, rapidly evolving situation, everyday adherence to standard infection control precautions in the classroom will also help minimize exposure to seasonal flu illness.

COVID-19 is thought to spread mainly from person to person through close contact of within 6 feet and through respiratory droplets produced when an infected person coughs or sneezes. People are thought to be most contagious when they are showing signs of sickness, but some spread might be possible before people show symptoms. It also may be possible to become infected through indirect contact with a surface or object that has the virus on it, and then touching their own mouth, nose, or possibly eyes. The virus that causes COVID-19 seems to be spreading easily and sustainably in affected communities.

Reported illnesses have ranged from mild symptoms seen in approximately 80% of patients to severe illness in approximately 5% for confirmed COVID-19 cases. Fever, cough, myalgias, and shortness of breath are symptoms that may appear 2-14 days after exposure.

There is no vaccine to prevent COVID-19. The best way to prevent illness is to avoid being exposed to the virus. Here are the everyday CDC recommendations for preventing the spread of respiratory diseases like COVID-19 along with additional information relating those guidelines to training classes:

- Stay home when you are sick and avoid close contact with people who are sick.
 - If a scheduled student has identified symptoms (fever, cough, shortness of breath), he or she should be advised to not attend a training class.
 - If a scheduled instructor has identified symptoms, he or she should not teach the class.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.



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- Training equipment should be thoroughly cleaned after every training class, following the manufacturer's guidelines for cleaning and disinfecting.
- Classroom surfaces should be thoroughly cleaned after every training class.
- Avoid contact with surfaces and objects that have been touched by others before being cleaned.
 - Consider using a student to equipment ratio of 1:1 in training classes or ensure equipment is thoroughly disinfected between student use.
 - Consider using blended learning, postponing the face-to-face portions of training for a later date for those students not expected or required to respond to an emergency or who require certification to work.
 - Schedule smaller class sizes or one-on-one training sessions, especially for hands-on skill practices.
 - Avoid the use of filtered shields when practicing rescue breaths. Use CPR masks with one-way valves using a 1:1 student to mask ratio. In BLS classes, have students use disposable gloves when using bag-mask devices. Clean and disinfect masks and bag mask devices between training classes.
 - Have students practice using PPE for real during hands-on practices, including how to put on and take off barriers properly.
- Encourage instructors and students to use appropriate, self-managed efforts to reduce the chance for exposure during training:
 - [Wash hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing the nose, coughing, or sneezing. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.](#)
 - Avoid touching the eyes, nose, and mouth.
 - Cover a cough or sneeze with a tissue, then throw the tissue in the trash.

Generally, the current recommendations on preventing exposure and spread are to avoid contact with those with symptoms, help prevent indirect contact with contaminated surfaces and objects, and take personal steps to reduce exposure to yourself. Keep this in mind when establishing the procedures and processes you will personally use during training.

Because of the gap in understanding about COVID-19, the situation is fluid and additional recommendations could follow, including the use of what the CDC describes as *social distancing* which means remaining out of congregate settings (such as stores, schools, church services, **and** training classes), avoiding mass gatherings, and maintaining distance (approximately 6 feet) from others when possible.

Everyone should keep a close eye on the [latest COVID-19 information from the CDC](#) and make personal and professional adjustments as more is known about the situation.