

2019 Novel Coronavirus (COVID-19) Quick Reference for Law Enforcement

This quick reference is intended as a guide for law enforcement personnel who may respond to, or come in contact with, individuals potentially exposed to and/or infected with the COVID-19 virus.

History

CDC is closely monitoring an outbreak of respiratory illness caused by a novel (new) coronavirus (named "COVID-19") that was first detected in Wuhan City, Hubei Province, China and which continues to expand.

Transmission

COVID-19 is a viral illness and can be spread from person-to-person among close contacts (about 6 feet). Person-to-person spread is thought to occur mainly via respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It's currently unclear if a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes.

Symptoms

Patients with COVID-19 have reportedly had mild to severe respiratory illness with symptoms of:

- Fever
- Cough
- Shortness of breath

Symptoms may appear 2-14 days after exposure.

Rules of Thumb

Officer safety is the most important consideration

- Be smart, be careful
- Respiratory droplets can infect you
- Fear and ignorance about COVID-19 is widespread
- Avoid close contact with people who are sick

Basic Personal Protective Equipment (PPE) Recommendations for Infection Control

- Contact: gloves
- Any NIOSH-approved particulate respirator. Facemasks are an acceptable alternative until the supply chain is restored.
- Eye protection (goggles or face shield)
- Disposable isolation gown or single use/disposable coveralls (If unable to wear a disposable gown or coveralls because it limits access to duty belt and gear, ensure duty belt and gear are disinfected after with contact individual)

When is PPE recommended

- For lifesaving medical treatment
- Direct contact with an individual experiencing symptoms
- Per department policy and protocol

For more information

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

CT DPH: ct.gov/coronavirus

CT 24/7 Infoline: 2-1-1

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Basic Personal Protective Equipment (PPE) Recommendations for Infection Control

- Contact: gloves
- Airborne: N-95 or higher level filtering face piece respirator
- Eye protection (goggles or face shield)
- Disposable isolation gown or single use/disposable coveralls (If unable to wear a disposable gown or coveralls because it limits access to duty belt and gear, ensure duty belt and gear are disinfected after with contact individual)

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Risk Evaluation Questions

If PSAP (911/Dispatch) has not made an initial COVID-19 assessment, responding law enforcement personnel should attempt to determine the following, if you suspect the individual displays any of the symptoms of COVID-19, while utilizing protective guidelines provided on the front of this quick reference.

- Have you traveled out of the country to a geographic area affected with COVID-19 in the last 14 days?
- Have you had contact with anyone who has traveled to an area that is experiencing an active COVID-19 outbreak?
- Have you had any contact with a COVID-19 patient?
- Are you feeling ill? What are your symptoms? How long have you been ill or had symptoms?

If the answer to any of these questions is YES, notify PSAP (911/Dispatch) secure the scene and minimize additional exposure pending EMS arrival.

Response Considerations (WHAT TO DO)

- Most response situations will warrant the usual level of precaution against respiratory pathogens. Follow department protocol/policy.
- If PSAP call takers advise that the individual is suspected of having COVID-19 law enforcement personnel should wear recommended PPE.
- Avoid direct contact with a symptomatic individual's body fluid and secretions.
 - To minimize potential exposure, it may be prudent to perform the initial screening from at least 6 feet away from the individual.
- If direct contact with a symptomatic individual or their respiratory secretions is necessary, follow the department's First Responder Blood-borne Pathogen policy/protocol.
- Wash hands vigorously with soap and water for at least 20 seconds (or hand sanitizer \geq 60% alcohol) after removing PPE or after close contact with an ill person and/or with body fluids or surfaces that may be contaminated.
- Report potential exposure following department policy/protocol.

Officer Safety is the Most Important Considerations

- Emergency medical treatment should be provided through local EMS/911 services.
- If an officer is confronted with a medical situation requiring immediate life saving attention (i.e., CPR, trauma, etc.) follow the department's medical policy/protocol.
- If an officer comes into direct contact with respiratory droplets from an individual with suspected COVID-19, the officer should wash the affected skin surfaces immediately with soap and water for at least 20 seconds and report potential exposure following department policy/protocol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Report exposure to on scene EMS personnel and follow department policy/protocol as appropriate.

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