



8/27/2020

MEMORANDUM

TO: Illinois EMS Medical Directors
Illinois EMS System Coordinators
Illinois EMS Providers
Illinois Hospitals

FROM: Ashley Thoele, MSN, MBA, RN
Division Chief, EMS and Highway Safety

RE: **Updated:** Notification to EMS Providers for Patients with Positive COVID Test after Transport

Effective immediately, hospitals shall notify an EMS provider if a patient transported to the hospital by that provider's EMS crew subsequently tests positive for the SARS-CoV-2 (COVID-19) virus. Notification must occur within **48 hours** of the positive test result. This is a change from the previous 12-hour notification requirement. **Notification of a positive test result is required regardless of whether CDC's recommended use of personal protective equipment (PPE) during transport of any individual with suspected or confirmed COVID-19 was observed. Notification shall not include the name of the patient who tested positive.**

The Hospital Licensing Act, 210 ILCS 85, sets forth the requirement to provide such notification:

- Section 6.08 (a) - *Every hospital shall provide notification as required in this Section to police officers, firefighters, emergency medical technicians, private emergency medical services providers, and ambulance personnel who have provided or are about to provide transport services, emergency care, or life support services to a patient who has been diagnosed as having a dangerous communicable or infectious disease. Such notification shall not include the name of the patient, and the emergency services provider agency and any person receiving such notification shall treat the information received as a confidential medical record.*
- Section 6.08(c) - *The hospital shall send the letter of notification no later than 48 hours after a confirmed diagnosis of any of the bloodborne communicable diseases listed by the Department pursuant to subsection (b). The hospital shall attempt to make verbal communication, followed by written notification only if the police officers, firefighters, emergency medical technicians, private emergency medical services providers, or ambulance personnel have indicated both verbally and on the ambulance run sheet that*

a reasonable possibility exists that they have had blood or body fluid contact with the patient, or if hospital personnel providing the notification have reason to know of a possible exposure.

- *Section 6.08(c-5) - The hospital shall send the letter of notification no later than 48 hours after a confirmed diagnosis of any of the airborne or droplet-transmitted communicable diseases listed by the Department pursuant to subsection (b) and the hospital shall attempt to make verbal communication, followed by written notification.*
- *Section 6.08(d) - Notification letters shall be sent to the designated officer at the municipal or private provider agencies listed on the ambulance run sheet. Except in municipalities with a population over 1,000,000, a list attached to the ambulance run sheet must contain all municipal and private provider agency personnel who have provided any pre-hospital care immediately prior to transport. In municipalities with a population over 1,000,000, the ambulance run sheet must contain the company number or unit designation number for any fire department personnel who have provided any pre-hospital care immediately prior to transport. The letter shall state the names of crew members listed on the attachment to the ambulance run sheet and the name of the communicable disease diagnosed but shall not contain the patient's name. Upon receipt of such notification letter, the applicable private provider agency or the designated infectious disease control officer of a municipal fire department or fire protection district shall contact all personnel involved in the pre-hospital or inter-hospital care and transport of the patient*

If the hospital does not know the name or identity of the EMS crew involved in the transport of a patient who subsequently tests positive, it shall notify the provider's Designated Infection Control Officer (DICO), Fire Chief, or private EMS Corporate Executive Officer.

Please share this memo with your emergency department nursing staff, emergency department physicians and infectious disease staff and other hospital administrators.