To: DDS Public Programs and Qualified Providers  
From: Valencia Bagby-Young, Director of Health and Clinical Services  
CC: Jordan Scheff, Commissioner; Peter Mason, Deputy Commissioner; Katie Rock-Burns, Chief of Staff; Regional Directors; Regional Health Services Directors  
Date: April 8, 2020  

Re: Hands Only CPR for Persons Under Investigation (PUI) and Positive for Coronavirus (COVID-19)  

This information is intended to provide instructions for any employee involved in providing direct care for someone who is a person under investigation (PUI - someone suspected by Physician, Nurse Practitioner, or Physician Assistant of having COVID-19 due to symptoms, however, has not yet tested positive for COVID-19) or someone who is diagnosed as COVID-19 positive, and the individual has experienced a loss of consciousness requiring cardiopulmonary resuscitation (CPR). The ensuing recommendations do not specifically address circumstances in which an asymptomatic individual may be quarantined due to a COVID-19 exposure; however, considering the widespread and potentially lethal impact of the Coronavirus it would be prudent for the employee to adhere to Hands Only/Compression Only CPR in this or similar circumstances.

Due to the serious nature of infection with COVID-19, in efforts to reduce the spread, DDS has established the following recommendations of the American Heart Association (AHA) for pediatrics and the Health and Safety Institute (HSI), and consistent with the Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO) guidelines for minimizing disease transmission. It is recommended that due to the increased risk of transmission during rescue breathing, **Hands Only or Compression Only CPR is acceptable for persons who have tested positive for COVID-19 or are PUI.** Hands Only CPR has been shown to be as effective as conventional CPR in many cases per AHA.

The HSI also endorses the use of CPR masks with a one-way valve as a method protecting the person of giving rescue breaths; however, the use of a one-way valve does not protect the unconscious individual from being infected with COVID-19 by the person administering rescue breaths. The one-way valve is also vulnerable to indirect exposure or contamination during and after performing CPR. Therefore, Hands Only CPR is the preferred method of performing CPR without direct exposure to respiratory secretions; this technique can circulate oxygen through the body while awaiting the use of an automated external defibrillator (AED) and arrival of emergency medical services (EMS).

If an individual who has tested positive for COVID-19 or is deemed a PUI by a Physician/Healthcare Provider (i.e., nurse practitioner/advanced practice registered nurse or physician’s assistant), has a loss of consciousness and requires CPR, direct care staff are to call 911 for emergency medical assistance and initiate Hands Only CPR. Staff
providing Hands Only CPR, shall don the appropriate PPE (gown, gloves, face mask, face shield/eye protection) if not already donned. Employees who are trained in Basic Life Support (BLS) may use bag valve mask (BVM) ventilation to deliver rescue breaths. The employees shall don an N95 respirator (as this procedure is aerosol producing) and proceed with CPR as trained. If the employees trained to perform BVM ventilation do not have access to N-95 respirator masks, then those employees shall utilize the Hands Only CPR method.

**Steps for Hands Only CPR**

1) Call or have someone else call 9-1-1 (*notify dispatch of the individual’s status as a PUI or positive for COVID-19, so that they can take necessary precautions when entering the home and assuming care*).

2) Initiate compressions: Push hard and fast in the center of the person’s chest at a rate of 100-120 compressions per minute until advanced help arrives.

Please see following link for a demonstration of Hands Only/Compression Only CPR:
https://www.youtube.com/watch?v=O_49wMpdews

Employees who have been trained and are currently CPR certified may still use an AED if available and follow the steps of CPR without administering rescue breaths. If more than one CPR-certified staff are present, the two staff may alternate performing chest compressions every 2-minutes to avoid ineffective compressions due to fatigue.

For more information related to Coronavirus please visit the AHA, HSI, CDC, and DDS websites referenced below:

https://www.hsi.com/hubfs/PDFs/HSI%20Statement%20on%20Coronavirus%20Disease_For%20Providers.pdf?h sCtaTracking=fae1f53a-1b0e-48f2-8350-9acb514830dc%7C1f2b1710-818c-4594-819d-9d6c5e9f4f00

https://professional.heart.org/idc/groups/ahamah-public/@wcm/@sop/@smd/documents/downloadable/ucm_505872.pdf

https://professional.heart.org/professional/General/UCM_505868_COVID-19-Professional-Resources.jsp


https://portal.ct.gov/DDS/General/COVID19/COVID-19-Updates-for-DDS-Providers