

IPAC measures for anesthesia workflow – COVID 19 - June 4 2020 v.1

Written and authorized by: Anesthesia IPAC working group

A proposal to maintain adequate infection prevention and control while improving efficiency, limiting consumption of PPE and optimizing personnel use at every step

What this proposal will not cover – recommendations on choice of PPE use. This is covered by the Ontario CMOH (Chief Medical Officer of Health) directive #5 and TOH recommendations. (see attached documents and link to CMOH directive #5)

Step 1:

Before calling for patient, OR team to confirm COVID category status in Epic.

Calling for patients:

Category 1-2: Call for patient ahead of time and have SDA/SDCU patients placed outside of room. Patients coming from the ward or ER can be placed at the ACC desk. The patient will have their final assessment done outside the room or at the ACC desk.

Category 3-5: Call for the patient so they arrive once the room is ready for the patient to enter and patient will have final assessment done in the OR.

SSCL:

Continue to use the COVID SSCL (March 2020)

Category 1-2: Perform the Huddle after the patient has arrived, has been assessed by the OR team but prior to their entering the OR. Perform the Brief with the patient after they have entered the room with the entire OR team.

Category 3-5: Perform the Huddle prior to the patient being called for. The Huddle may be done by phone. Perform the Brief with the patient after they have entered the room with the entire OR team.

Anesthetic machine:

The anesthetic machine will continue to be draped as per previous policy

Anesthetic carts:

All rooms should have a Purell dispenser and a case of Virox wipes on the anesthetic cart

Category 1-2:

1. The carts will be placed at least 2m away from the patient to reduce the risk of contamination by droplets. The exact location will depend on the layout of the OR.
2. Limit accessing the cart throughout the case
3. Do not access the cart if you are wearing a contaminated gown and or gloves
4. Place a clean back table or large mayo stand as a clean surface for supplies that may be required. See below for a list of recommended supplies.

5. Place drugs that will be used during the case on the anesthesia machine or contaminated mayo stand (not the contaminated airway tray).
6. Place drugs that might be required on the clean table or mayo stand. These can be returned to the cart if not used. If they are contaminated during the case, they can be cleaned or discarded.
7. Place a mayo stand for airway, blood and bodily fluids contaminated equipment only.

Category 3-5:

1. Ensure you have a clean runner or help
2. The carts will be placed outside the room.
3. Do not access the cart if you are wearing a contaminated gown and or gloves
4. Place a clean back table or large mayo stand as a clean surface for supplies that may be required. See below for a list of recommended supplies.
5. Place drugs that will be used during the case on the anesthesia machine or contaminated mayo stand (not the contaminated airway tray).
6. Place drugs that might be required on the clean table or mayo stand. These can be returned to the cart if not used. If they are contaminated during the case, they can be cleaned or discarded.
7. Place a mayo stand for airway, blood and bodily fluids contaminated equipment only

ANESTHESIA SUPPLIES FOR BACK TABLES – DROPLET PRECAUTIONS

Preferences by C. Wherrett – May 28, 2020

Supplies to consider preparing for most cases and remainder for small-medium cases

Consider a medium table/cart for storing clean supplies in the clean “Ocean”

In the island: Mayo #1 for Airway, Anesthesia machine (or Mayo) for syringes, etc., Mayo #2 for other non-AW/Body Fluid supplies.

DRUGS:

Induction:	Emergency:
Propofol Fentanyl ± other opioids Midazolam Cefazolin ± Flagyl Rocuronium	Atropine (available but not drawn) Ephedrine Phenylephrine NS Flush (labelled)
Maintenance/Other:	End of Case:
Extra Rocuronium Opioids Ketamine TXA	Neostigmine/Glyco Dex/Ondan

SUPPLIES:

Vinyl gloves Virox wipes Purell Gowns ECG dots x 10 Gauze, nonsterile Chlorhexidine swabs x 5 Tape (dedicated to Pt, consider having multiple lengths of tape cut and hanging from side of mayo stand)	O2 mask ETT and syringe and stylet Lube packets Temp probe Oral airway LMA Empty 5mL and 10mL and 20mL syringes Microbore tubing Ringers Bags
IV Kit: Tegaderm, IV, swabs, tourniquet, SL, Flush	

OTHER TASKS:

Fill Vaporizer Change Soda Lyme	Lead Apron