PURPOSE

To describe the appropriate personnel, PPE (personal protective equipment), and steps necessary for safe and efficient emergent ED (Emergency Department) to OR (Operating Room) transport in the COVID-19 Era

SCOPE

A. Inclusion: All injured patients being transported to the OR for an emergent surgical procedure

B. Exclusion: Any patient being transported to the pre-op/PACU (Pre-operative area or Post-Anesthesia Care Unit) in preparation for an operative procedure

DEFINITIONS

COVID-19: Coronavirus-19, SARS-CoV-2, Severe Acute Respiratory Syndrome Coronavirus 2

Emergent Surgical Procedure: any life/limb sparing procedure being performed within one (1) hour of presentation to the ED requiring expedient transport from the ED to the OR

GUIDELINE/PROCEDURE

A. Emergency Department Transport Necessary Personnel

1. Primary ED (Emergency Department) Nurse
2. ED Technician
3. Respiratory Therapist
4. Chief Surgical Resident or designee
5. Trauma Surgery Attending

B. Personal Protective Equipment

1. Patient
   a. Intubated: in-line Hepa filter
   b. Bag-valve-mask: in-line Hepa filter
   c. Supplemental Oxygen (non-invasive): surgical mask to be placed over the non-invasive supplemental oxygen device
2. Necessary Personnel

a. N-95 mask
b. Face Shield
c. Surgical Cap
d. Protective Gown
e. Gloves

C. Notification

1. Operating Room Charge Nurse/Bridge (x21061)

   a. OR notification lights turned on upon determination of need for emergent OR transfer

   b. Call to be made by Trauma Surgeon or designee
      i. Brief summary of injuries
      ii. Necessary Operating Sets to open
          • Trauma set
          • Vascular set
          • Hand set
          • Specific Retractors
          • REBOA (Resuscitative Endovascular Balloon Occlusion of the Aorta)
          • ECMO (Extracorporeal Membrane Oxygenation) Team

     iii. Room to be assigned by the OR Charge Nurse/Anesthesiologist-in-charge

2. ECLS (Extracorporeal Life Support) Specialist for Hypothermic Cardiac Arrest Case (x27455)

   a. Specialist will transport the ECMO machine to the OR

D. Route

1. Elevators
   a. ED elevator to 2nd floor

   b. Right turn into the Operating Room

   c. Predetermined Room assigned

E. OR Necessary Personnel (in appropriate PPE as stated above)

1. Anesthesiologist
2. CRNA/Anesthesia Resident
3. Surgical Technician
4. Circulating Nurse
5. OR Charge Nurse
6. Trauma Surgeon
7. Surgical Resident(s)
8. ED Transport Personnel – please exit the Operating Room promptly following patient transfer to OR table – OR doors are to close and remain closed upon exit.

F. Patient being intubated in the Operating Room
   1. Follow standard intubation protocol as set out during the COVID-19 changes outlined in the operating room procedures listed in the DHHA Related Documents.
   2. OR doors are NOT to be opened and no one is to enter/exit for 10 minutes following intubation
      a. No need to pause the OR progression during this time

EXTERNAL REFERENCES

B. Tan X; et al. Response and Operating Room Preparation for the COVID-19 Outbreak: A Perspective from the National Heart Centre in Singapore. J Cardiothorac Vasc Anesth. 2020 Mar 29;S1053-0770 PMID: 32303395

DHHA RELATED DOCUMENTS

A) Operating Room Instructions for Non-suspected COVID-19 Patients
B) Operating Room Instructions for Confirmed or Suspected COVID-19 Patients

ATTACHMENTS

None