

## **Resuscitation Guidelines for Adult & Paediatric inpatient areas excluding ED & EAU4**

At the beginning of the COVID pandemic CUH took the view that as the infection status of most of our patients was unknown we adopted a Trust wide approach and endorsed the use of the COVID ALS algorithms for Adults and Paediatrics recommended by the Resuscitation Council (UK).

However we now have much clearer picture and with quicker, more comprehensive testing we are seeing a return to elective surgery and increased inpatient volumes where the COVID status of the vast majority of our patients is known and confirmed.

Personal safety for Health Care Workers (HCW) and that of resuscitation team members is the first priority during any resuscitation attempt. Safety on approach is our first consideration - 'Is it safe to approach?'

With this background we have reviewed the Trust's resuscitation guidance in conjunction with the infection control team and are making the following recommendations:

In areas where a HCW is confident that they know the current COVID status of the patient who has collapsed is negative, the Trust would support them in their decision to perform resuscitation wearing scenario 0 PPE *plus* eye protection (appendix 1 & 2 & 3).

However if the patient's COVID status is unknown or uncertain or if the HCW does not feel confident in proceeding with resuscitation in a COVID negative patient without enhanced PPE (appendix 4) we would support their decision to use scenario 2 PPE or to proceed as per current COVID RC(UK) guidance (appendix 5 & 6) i.e. call for help and attach defibrillator and use if trained if do so and allow the resuscitation team to commence chest compressions and CPR on arrival.

In ED, EAU4 or outpatient settings scenario 2 PPE should continue to be used for all resuscitation attempts.

In line with updated Public Health England guidance for low risk patients (i.e. those whose COVID-19 status is confirmed as negative) resuscitation may be performed wearing scenario 0 PPE plus eye protection (appendix 1). It will still be necessary to wear scenario 2 (appendix 4) PPE for resuscitation of patients who are in medium and high risk groups (i.e. those whose COVID-19 status is either confirmed or unknown).

<b>High-Risk Pathway</b> SICPs and TBPs	<b>Medium-Risk Pathway</b> SICPs and TBPs	<b>Low-Risk Pathway</b> SICPs
<p>This pathway applies to any care facility where:</p> <p>untriaged individuals present for assessment or treatment (symptoms unknown)</p> <p><b>OR</b></p> <p>confirmed SARS-CoV-2 (COVID-19) positive individuals are cared for</p> <p><b>OR</b></p> <p>symptomatic or suspected COVID-19 individuals including those with a history of contact with a COVID-19 case, who have been triaged/clinically assessed and are waiting test results</p> <p><b>OR</b></p> <p>symptomatic individuals decline testing.</p>	<p>This pathway applies to any facility where triaged/clinically assessed individuals are asymptomatic and are:</p> <p>waiting a SARS-CoV-2 (COVID-19) test result and have no known recent COVID-19 contact</p> <p><b>OR</b></p> <p>where testing is not required or feasible on asymptomatic individuals and infectious status is unknown</p> <p><b>OR</b></p> <p>asymptomatic individuals who decline testing in any care facility.</p>	<p>This pathway applies to:</p> <p>individuals triaged/clinically assessed prior to treatment with no COVID-19 contacts or symptoms, who have isolated/shielded AND have a negative SARS-CoV-2 (COVID-19) test within 72 hours of care and, for planned admissions, have self-isolated since the test</p> <p><b>OR</b></p> <p>patients who have recovered from COVID-19 and have had at least three consecutive days without fever or respiratory symptoms and a negative COVID-19 test</p> <p><b>OR</b></p> <p>patients or individuals in any care facility where testing is undertaken regularly (remain negative).</p>

## Personal Protective Equipment

## SCENARIO 0

### Environment

All clinical areas without any known or suspected COVID-19 cases.



### Core PPE

- Fluid resistant face mask

### Patient contact PPE

- Apron
- Non-sterile gloves

PLUS- eye protection for resuscitation

## Donning

### Core PPE:

- Fluid resistant mask to be worn on entering the clinical area

### Patient contact PPE

To be changed for each patient contact

Order of donning as follows

- Apron
- Non-sterile gloves

## Doffing

### Core PPE

- Fluid resistant face mask to be changed if it becomes moist and / or before leaving the clinical area

### Patient contact PPE

To be changed for each patient contact

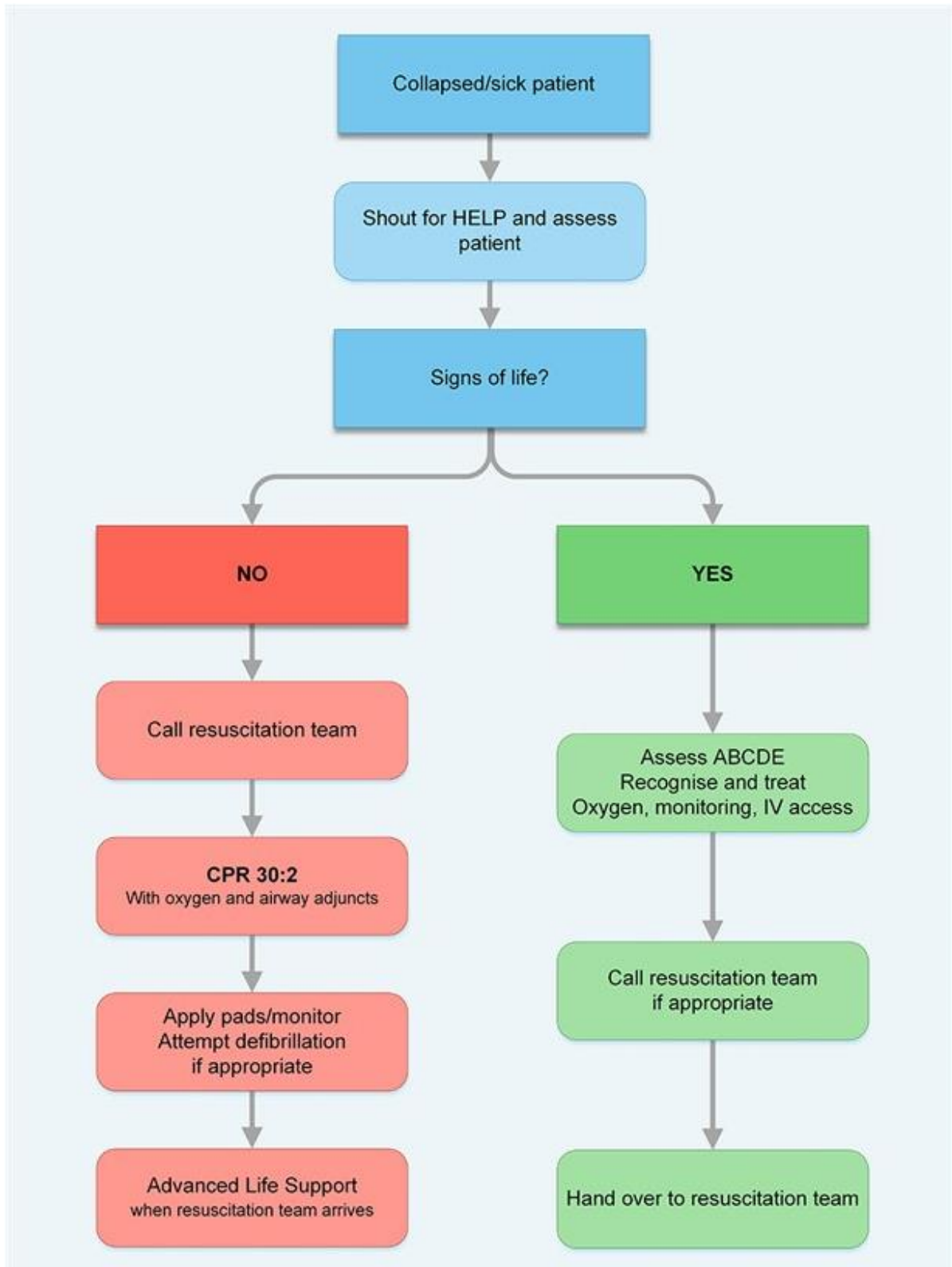
Order of doffing as follows

- Non-sterile gloves
- Apron
- Hand hygiene after removal of each item

## Hand Hygiene

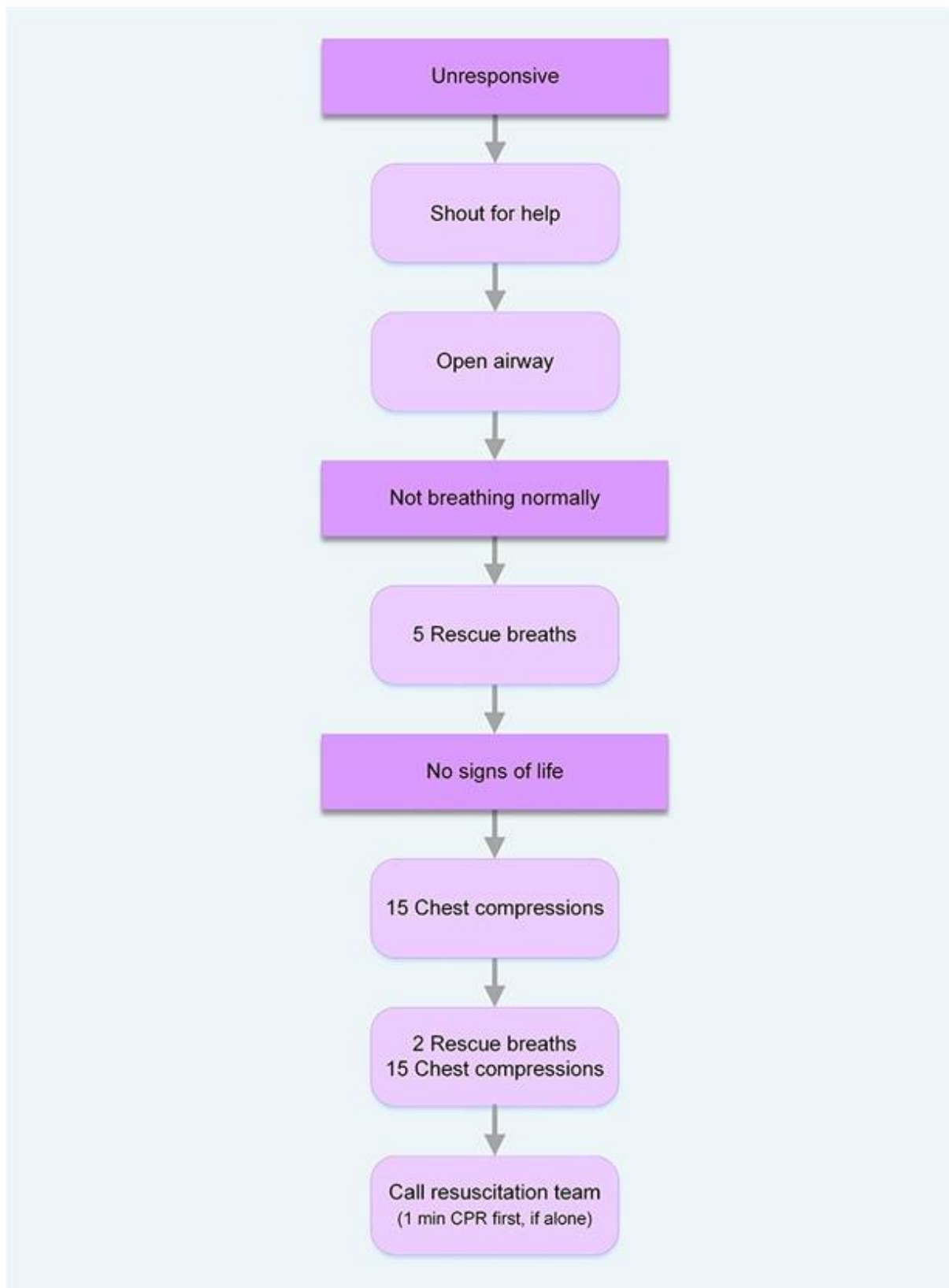
Hand hygiene (to include the forearms) will be conducted before and after patient contact, as per Trust policy.

# Guidelines: In-hospital resuscitation



\*known COVID negative patient

# Guidelines Paediatric basic life support



## Personal Protective Equipment

### Environment

Cohorted areas where aerosol generating procedures (AGP) are carried out frequently with suspected or confirmed COVID-19 patients, for example:

- Critical Care areas (according to surge plan)
- ED RAT rooms
- D10

(The identified areas may change or be added to as the incident develops)

### Core PPE

- Water repellent gown
- FFP3 Mask
- Eye protection
- Theatre cap
- Surgical gloves

## SCENARIO 2

### Patient contact PPE (within 2 metres)

- Apron
- Non-sterile gloves (to be worn over core PPE)

(Modify for sterile field procedures as standard protocols)



## Donning

### Core PPE

PPE to be worn for duration of shift. Changed every break (for an entire shift, break every 4hrs, this will result in the use of 3 core PPE sets)

### Order of donning as follows:

- Water repellent gown
- FFP3 mask
- Eye protection
- Theatre cap
- Surgical gloves

### Patient contact PPE

To be changed for each patient

### Order of donning as follows

- Apron
- Non-sterile blue gloves

## Doffing

### Core PPE

- PPE to be changed at every break

### Order of doffing - in room

- Non-sterile blue gloves
- Apron
- Hand hygiene

### Order of doffing - before leaving clinical area

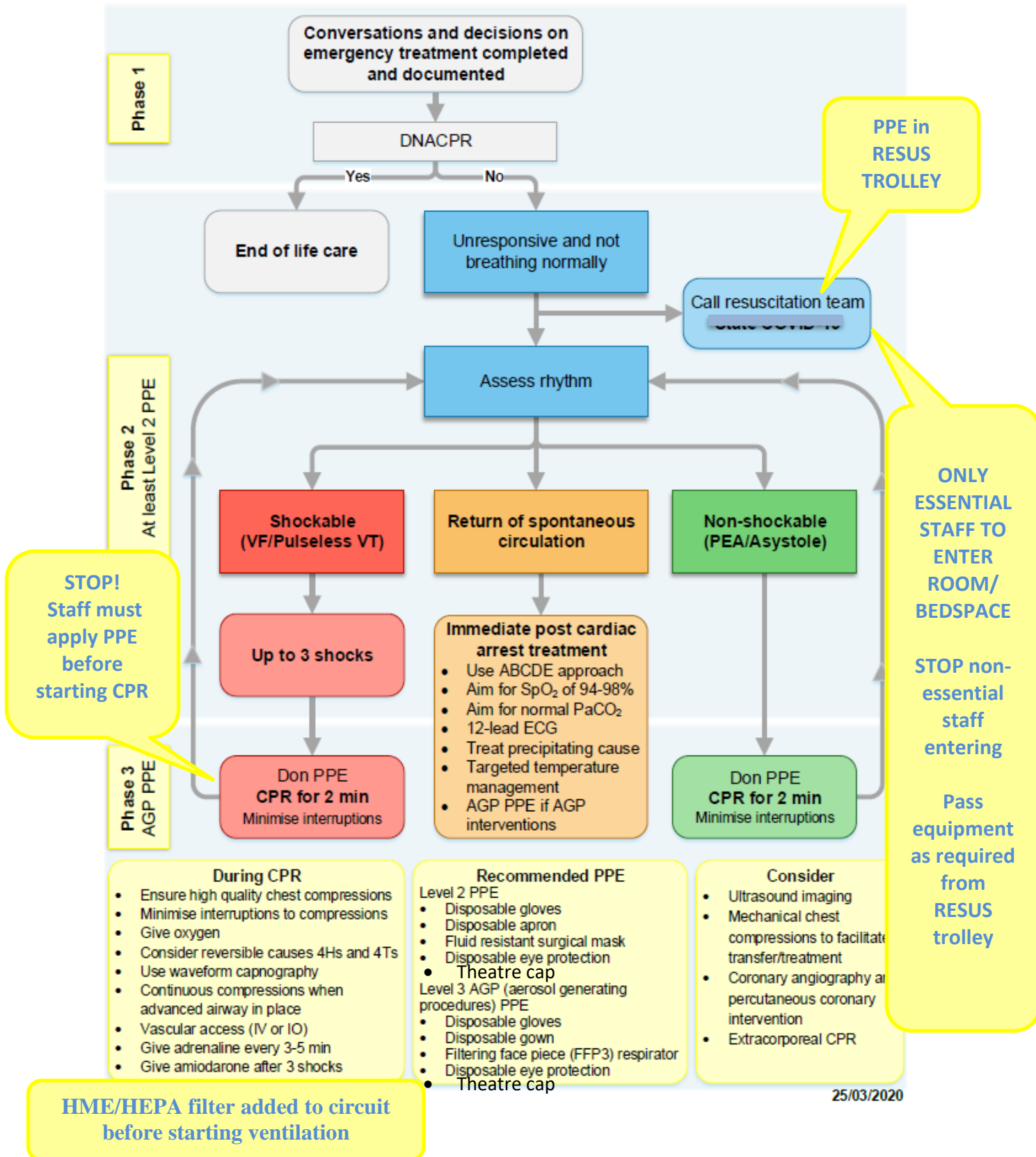
- Surgical gloves
- Water repellent gown
- Eye protection
- Theatre cap
- FFP3 mask

### Hand Hygiene

Hand hygiene will be conducted before and after patient contact, as per Trust policy. This will include conducting hand hygiene when wearing surgical gloves as part of the core PPE layer.



## Adult Advanced Life Support for COVID-19 patients



## Paediatric Advanced Life Support for Confirmed or Suspected COVID-19

