Critical Care Guidelines FOR CRITICAL CARE USE ONLY



COVID-19 RIE Admission Action Card

Pre Arrival:

- 1. Remember PPE is priority. Staff must all be in PPE with FFP3 for patient arrival
- 2. A staff member will meet the team at PCI entrance if appropriate
- 3. Gather information for infusions and kit required
- 4. Prepare cubicle; ensure adequate stock but removal of anything not required due to contamination risk.
- 5. Trolley outside for PPE and patient notes. Signage for door- airborne precautions.
- 6. Bin placed inside and outside for doffing.
- 7. Allocate 2 nurses to the cubicle and they will alternate throughout shift. 1 hourly rotation.
- 8. Allocate another staff member to 'Spotter' role for donning and doffing.
- 9. A member of staff must be in the room at all times no emergency donning to enter room quickly
- 10. Gather appropriate medical team and ensure enough staff to get patient on to bed.
- 11. Ensure bottle of Cleaning solution for blood spillages (4 xHaz tabs in 1000mls cold water =10000ppm) and bottle of Chlorclean for other body fluids & general decontamination (1x Chlorclean tab in 1000mls cold water = 1000ppm) plus dry wipes in room
- 12. Staff will be responsible for daily cleaning of the room. Floor cleaning mop and pole should be in the room. Domestic staff will deliver a daily chlorclean wet, disposable mop to the room via appropriate staff. This is then disposed of in bin. Floor cleaning required twice a day.
- 13. Ensure blue clamps in airway drawer

Arrival:

- 1. Safely transfer patient to bed.
- 2. Do not disconnect transfer ventilation without clamping ETT, Vent tubing and turning off transport ventilator.
- 3. Decontaminate trolley and all equipment with Chlorclean (detailed above) and send to cleaning room for further decontamination. This must be taken by a staff member wearing apron and gloves, surgical face mask and visor if splashing/splatter anticipated.
- 4. All staff will wear full PPE including FFP3 masks whilst in the room at all times.
- 5. Limit ABG sampling. Place ABG in to small specimen bag outside the room with a member of staff in apron, gloves, surgical mask with visor. Wipe down ABG machine as per policy and doff and wash hands in same room.
- 6. Bloods should be taken by hand to the Lab.

Exiting:

- 1. Plan your exit from the room and let outside 'spotter' know you are coming out.
- 2. Nurse 2 must enter prior to Nurse 1 leaving. When Nurse 1 is doffing, Nurse 2 must be 'spotter' for them inside.
- 3. Outside 'spotter' takes over for mask removal spotting and reminding staff where nearest sink is for hand washing. Must remind staff member not to touch their face at this point.

Title: Admission SOP COVID-19	
	Authors: Covid team
Status Final- 9/3/2030	Approved by: QIT editorial group
	Written:
Reviewed on:	Next review :