

COVID-19: TRANSFERRING CONFIRMED OR POSSIBLE COVID-19 PATIENTS



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Transferring possible or confirmed COVID-19 patients who are intubated or have a tracheostomy or are on CPAP/NIV/HFNO2 or other aerosol generating interventions:

Full COVID PPE

Full Face Visor, FFP3 mask, Long-Sleeved Fluid Repellent Gown, Apron, Gloves, Hat (non-essential)

Transferring patients who are possible or confirmed COVID-19 patients who are not intubated, do not have a tracheostomy or are not on CPAP/NIV/HFNO2 or other aerosol generating interventions:

If already in Full COVID PPE or going to a ward where CPAP/NIV/HFNO2 is in use stay in Full COVID PPE

otherwise

Full Face Visor, Fluid Resistant Surgical Face Mask (Type IIR), Apron, Gloves

Transfer to CT, radiology or other investigation/intervention area

- Ensure staff at the destination are aware that the patient is possible or confirmed COVID-19
- The patient must be taken straight to the destination and returned without waiting in any communal area(s)
- Remain in FULL COVID PPE
- Change apron and outer set of gloves
- Clean shoes in doffing area on route out of Critical Care
- In CT suite maintain PPE and settle patient onto scanner
- On moving to the inner CT room, remove apron and outer set of gloves off, undertake hand hygiene (alcohol gel or hand washing), take care not to touch *anything* with your dirty PPE
- When CT completed put on clean apron and outer gloves
- Transfer patient back onto bed
- Return to Unit via B3 corridor. No need to change any PPE

Transfer to the ward

- Ensure staff at the destination are aware that the patient is COVID-19 possible or confirmed
- The patient must be taken straight to the destination without waiting in any communal area(s)
- **If able to tolerate, the patient should transfer with a surgical mask on**
- Remain in FULL COVID PPE
- Change apron and outer set of gloves
- Clean shoes in doffing area on route out of Critical Care
- On ward settle patient into designated bedspace
- Go to the ward's designated doffing area, doff and wash up to elbows
- Put on PPE in keeping with the ward/patient area's PPE protocol
- Handover patient to ward staff

Ensure that you have a 'clean' person with you to open doors, press buttons etc

Be absolutely meticulous to not touching anything when outside of Critical Care's Red Zones with your contaminated PPE including doors, walls, reception areas, ward monitors etc