

3/19/2020: Emergency Department Protocols

Staff:

Initiate Staff Preparations:

Fit test all essential staff in direct care of aerosolized virus patients

Watch the proper donning/doffing technique from the CDC

Wear protective mask while working day to day, placing a new mask on when in direct patient care of respiratory illness patients

Have back up plans for own home personal safety, including child care, stocking supplies in home when work gets busy so you can concentrate on work.

Daily Screening of staff for respiratory illness

Test and quarantine as needed

Communication

Communicate with Dr. Craig or Jillian Emmons, Operations Sections for ER/UC for central messaging to the Command staff daily by 0800

Messaging to the Community: We are no longer offering a testing site. The tests available are for essential healthcare personal and on a case to case basis. If you do not require medical attention please self-quarantine.

Space

Use negative pressure rooms appropriately for suspected COVID patients. Don/Doff in marked area around rooms.

Utilize the Hazmat room for triage/screening patients suspected of COVID

Utilize rooms 6-10 for respiratory illnesses, 1-5 for non-respiratory and save 11-12 for Trauma/Cardiac Critical Patients. This may change as the crisis changes.

Delta Surgical Associates (Nickel & McCrackin) have offered to take care of patients with surgical needs, lacerations, and minor repair issues in their office. This should be a call from the ED physician communicating to them the need.

The waiting room does have the capability to turn into a negative pressure room for patients coming in with mild symptoms that need to wait. This should only be utilized when we experiencing overcrowding. If there is one patient that needs to wait, utilize the Hazmat room.

The intercom system has been setup to speak to patients in isolation rooms. Highlight the room to a pink color and speak into the phone. They can hear you and respond to you.

Reduce trips into the room, collect all the necessary equipment prior to going into the room. Also take supplies or equipment out of the room that are not required to care for the patient.

Moving Patients:

Mask all patients coming into the ER to minimize exposure.

They will need to stay in the room unless CT scan is required. This will need to be arranged with CT staff. Radiology Department Manager is setting up a plan for this.

If they are admitted or transferred, they will remain masked. If they are intubated and need to be transported upstairs, it will need to be arranged to clear the hallways and elevators prior to transport. Please communicate with all parties involved.

Supplies

Inventory our daily needs. We need to be in communication with Purchasing. If we are running low we need to make sure we are in communication. We can no longer go into Purchasing. An email needs to be sent to request needs or a phone call.

Please keep supplies behind the desk to prevent them walking away.

Utilize MDI instead of Nebbs to reduce aerosolizing virus.

Staffing

Please let us know availability for back up staff in case we have staff that become sick.

Ready Op will be utilized to ask for help. Will set up a call list for each day.

This will protect us from feeling remorse about calling in sick. Do not come to work sick. All will be screened at the beginning of each shift.

*No more food at the nurses' station

*Do not bring personal items to the work. Minimalize jewelry/personal clothing.

*Try to get 100% compliance on all patients using sanitizer in and out of the department

*Utilize childcare through HR if needed

*We will track exposures/symptoms when exposure to COVID positive patients occurs

Intubation

Please see the planning intubation tool

Limit exposure to staff to aerosolization of COVID 19

Consider not using high flow nasal cannula or non-invasive positive pressure ventilation in the ED unless in a negative pressure room

Limit Use of Nebs

We are looking at using PAPR's for intubation

Intubation should occur only by those trained. Limit exposure to personal not needed in the room. Physician, Nurse, and RT.

Bundle Care

Plan ahead for blood draws, EKG's, meds to minimize trips in and out of the room.

Primary care by the nurse should be done to minimize exposure

Have EMS call ahead to alert for high risk in the field. As this crisis progresses, assume everyone has it no matter the chief complaint.

Utilize the new set for COVID panel under order sets, procalcitonin is now a send out so do not order unless it is needed.
