

## Airway/OR Management in Patient with Confirmed or Suspected Covid-19

**General:** Providers and organizations should review donning and doffing PPE in Apollo.

<https://ssl.nebraskamed.com/Apollo/> Search: PPE

- ✓ **N95 masks** should be worn. Once placed on the face, do not touch as the outside is considered dirty.
  - The circulator will bring N95 masks to the OR prior on patient arrival, so they will be available.
- ✓ **Gowns:** Isolation gowns or non-sterile surgical gowns are on the linen carts in the core.
- ✓ **Eye protection/Face Shield:** In the sterile core, **MUST** be worn.

**Transportation:** Allowances for staff to wear respiratory protection via a clean procedure mask or extended use of an existing respirator/eye protection has been made for transporting patients as the COVID-19 virus is an emerging, novel pathogen.

### Considerations for OB Anesthesia Care:

Admit to isolation room, preferably one of the two negative pressure rooms on the OB ward (4422 and 4424)

Limit providers to absolute minimum

Don all PPE (see above) before entering the patient room.

COVID 19 is not considered a contraindication for neuraxial anesthesia/analgesia

Proactively communicate with Obstetricians and OB nursing to avoid emergent sections if possible

Intubate early for respiratory distress using appropriate PPE (see above)

### Intubated Patient

For patients intubated prior to delivery for respiratory distress requiring C-Section, follow transport policy to move to OR

OR Respiratory Therapist will assist with transportation, including all monitors to the OR.

Transport with the ICU ventilator (if applicable) or Bag Ventilate with Ambu Bag with viral filter between ET Tube and bag.

After the C-section – patient transported directly back to negative pressure room, in similar manner as transport down with all monitors, viral filter on Ambu bag, and OR RT, for emergence and possible extubation.

### Non Intubated Patient

Patient will be transported to OR for C-section (per transport policy) from negative pressure labor room.

Patient will wear a standard surgical mask in the operating room over any supplemental oxygen

Neuraxial anesthesia will be utilized as appropriate

If unable to use neuraxial anesthesia or if neuraxial technique is inadequate, the patient will be induced under general anesthesia in the operating room using appropriate PPE and technique as described below.

After the C-section – **If intubation was performed, remain in OR until 30 minutes has elapsed from intubation (for air turnover).** The patient will be transported back to negative pressure labor room in similar manner as transported to the OR. If patient required intubation and negative pressure labor room available, transport with all monitors, viral filter on Ambu bag, and OR RT back to negative pressure labor room for emergence and extubation (see below). **If negative pressure room not available, extubate in OR and recover for at least 30 minutes before opening OR doors and exiting. If unable to extubate, transport to available bed appropriate for COVID patients based on incident severity level.**

## Airway Manipulation:

**Airway:**

- ✓ N95 mask, goggles, gown and two pairs gloves
  - Double glove technique – after intubation, use the dirty set of gloved to re-sheath the laryngoscope.
  - Most experienced anesthesia professional perform the intubation.

- Video laryngoscope should be used to minimize proximity to patient, as well as increase first pass success of intubation.
- AVOID: Fiberoptic intubation

**Preparation:**

- ✓ All ASA monitors applied.
- ✓ Pre-oxygenate for 5 minutes with FiO<sub>2</sub> 1.0.
- ✓ Rapid Sequence Induction – avoid manual ventilation
- ✓ After intubation – double zip-lock all airway equipment and remove

**OR Management:**

- ✓ Anesthesia circuit filters are viral filters. Confirm these are on circuit.
- ✓ Remember – Avoid touching your hair and face before washing your hands.

**Extubation only in Negative Pressure Labor Room:**

- ✓ Utilizing Negative Pressure Labor Room for all emergence/extubations
- ✓ Utilize PPE as described above
- ✓ Keep PPE on until after extubation
- ✓ **If negative pressure room not available, extubate in OR and recover for at least 30 minutes before opening OR doors and exiting.**

Notify Infection Control 402.888.4646 of all procedures for known or suspected COVID-19 cases.