COVID-19 Infection Prevention Precaution Principles for OR Cases

All staff **must** be in Airborne PPE to enter the room

Do NOT change PPE for duration of case

*Don & Doff with a partner*

![QR Code](image)

**Teams of 3-4 for ALL care**

1 Primary Anesthetist
1 Assistant

2 “CLEAN” Assistant(s) outside Operating Room
or 1 “Clean” Assistant during transport

**KEEP DOORS CLOSED**

*In OR keep the MINIMUM NECESSARY*

- Supplies
- Equipment
- Drugs
- Staff

Staff may enter the room 14 minutes after intubation
Remaining staff and patient must remain in room for 14 minutes after extubation

**HEPA room air purifier** should be turned ON prior to intubation and extubation.
It should be turned OFF:

- **14 minutes after intubation**
- **15 minutes after patient leaves the room**

**Reduce Risk of Aerosolization During Transport**

When feasible, intubate the patient in a negative pressure room prior to transport.
After surgery, if the patient will go to a negative pressure room, keep them anesthetized and paralyzed.
Extubate them after transport.

For all transports: Anesthesia Mask, HEPA Filter, BVM/JR on bed

<table>
<thead>
<tr>
<th>Intubated</th>
<th>Non-intubated</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEPA filter between ETT &amp; BMV/JR</td>
<td><strong>RA</strong></td>
</tr>
<tr>
<td>Surgical Ear-Loop Mask</td>
<td><strong>Mask &amp; NC</strong></td>
</tr>
<tr>
<td>Lowest possible flow + Cover with surgical ear-loop mask</td>
<td><strong>Non-Invasive Ventilation (BiPAP)</strong></td>
</tr>
<tr>
<td>Ensure tight seal</td>
<td></td>
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</tbody>
</table>

*Infographic by Harriet Hopf, MD*

*Designed by Beca Chacin*