

# **ElectroConvulsive Therapy (ECT) during COVID-19 pandemic**

Courtesy of: Dr. Karen Foley

ECT is deemed an essential service. Only those patients who are acutely psychotic or deemed high risk for deteriorating if treatment was to be suspended, are selected to receive treatment during the pandemic.

All patients are screened using standard screening form for symptoms and travel. Patients are screened twice –by phone call the day before they come to hospital and screened again face to face once they are in hospital. There should be a no visitor policy in place during the pandemic.

- For patients who screen negative and are symptom negative, the ECT treatment proceeds with anesthesia staff, assisted by an anesthesia assistant, performing general anesthesia and airway management wearing the following personal protective equipment (PPE):

- Gloves, 2 pairs
- Level II Gown
- Face protection either a mask with visor attached, safety goggles or a full face visor
- N95 mask

This PPE is recommended given that patients are provided oxygen via an Ambu bag and because patients often cough after waking from the treatment. Both of these place the anesthesia team at possible risk of exposure from droplets or aerosol.

The other team members wear the following PPE

- Gloves, 2 pairs
- Level II Gown
- Face protection either a mask with visor attached, safety goggles or a full face visor
- surgical facemask

The outer gloves should be changed after each patient. Gowns, mask, and face protection should be changed only if they become soiled or compromised in any way. Masks should also be changed if they become moist and therefore the integrity of their filter ability cannot be guaranteed.

Max 4 patients are treated per hour

Each Ambu bag has an attached HEPA filter.

Recommended good pre oxygenation and minimal bag mask ventilation throughout the procedure.

A single-use bite block is used and discarded in a biohazard refuse bag.

Patients are managed in the post anesthesia care unit (PACU) with a 6ft distance maintained between patients at any time. Recovering patients are placed at least 6 feet apart and only after their coughing post-procedure has ceased.

All equipment, including the O2 nozzle are cleaned and wiped with Caviwipes