

Decision for STAT (CRASH) CS under GA

RN or TL/Charge RN – pull emergency cord & call for "PROTECTED CODE 33 and CODE AIRWAY" (ext 5555)

Primary RN

· Place mask on patient

Team Leader/Charge RN

- Lay out N95 Masks (Jones Cart in OR Corridor)
- Get Ancef 2-4g
- Call for 2nd RN to transfer
- Call for Surgical Assist

Scrub RN

- Don N95 + PPE in Sterile OR Corridor
- Opens instruments

OB (Resident)

· Call for Staff OB

OB (Staff + Resident)

- Don N95 + PPE in Sterile OR Corridor
- If resident helps with transfer, can Don N95 after prep

ANESTHESIA

- Call for 2nd Anesthesia (x7878) for back up if "Code Airway" not called
- Don N95 + PPE in Sterile OR Corridor
- Prepare OR-B

BURRT / NICU RESUS TEAM

- Don N95 + PPE in Sterile OR Corridor
- Prepare baby warmer
- If twins, arrange for 2nd warmer to be brought into OR-B
- See NICU COVID Algorithms

Transfer to OR by Primary RN + Second RN (Third RN to open doors)

Circulating RN

- Leave OR after patient transfer
- Doff PPE in anteroom
- Don N95 + PPE in sterile OR corridor
- Re-enter OR
- · Count with Scrub RN

Second RN

- · Leave OR when Circulating RN returns
- · Doff PPE in anteroom
- Don N95 + PPE in sterile OR corridor
- Enter OR, document / makes calls

Third RN

- Take bed back to room
- **IF <u>CORD PROLAPSE</u>, 2nd RN dons N95 + PPE and switches place to relieve pressure on cord**

OB (Staff or Resident)

- Prep & insert foley
- Leave OR
- Doff yellow gown + gloves

OB (Staff + Resident)

- Don N95 + Face Shield +
 Bouffant + Shoe Covers (no gown) in sterile OR corridor (if not already done)
- Scrub
- Enter OR
- Drape patient

ANESTHESIA

- Prepare for RSI with paralysis, glidescope.
- Preoxygenate for 5min using 2-Hand technique
- AVOID manual ventilation if possible

BURRT / NICU RESUS TEAM

- If no Code Airway Team or 2nd
 Anesthesia, BURRT will help
 Anesthesia
- NICU Resus Team in OR to receive baby
- NICU Transfer Team assemble outside of OR until delivery of baby

TIME OUT



ANESTHESIA

- · Induction & Intubation (See **Induction Airway Management** Protocol)
- Call out "Ok to Start CS"

CS STARTED & COMPLETED

Patient is cleaned, RN to call to TL/Charge RN to have Transfer Bed outside of OR-B

Documenting RN

- Leave OR-B
- Doff yellow gown + gloves in anteroom
- Don new yellow gown + gloves
- Receive baby from BURRT and transfer baby out

Scrub RN

- · Push dirty instruments into anteroom
- Doff surgical gown + gloves in anteroom
- Don yellow gown + gloves and push instruments into dirty utilities
- Doff yellow gown + gloves in dirty utilities

Circulating RN

· Remain in OR-B

OB (Staff)

- Leave OR
- · Doff everything in anteroom
- Change scrubs

OB (Resident)

· Remain in OR-B

ANESTHESIA

- · Extubation only with Anesthesia/RN/OB Resident
- Follow Extubation Protocol
- Call Rapid Response/ICU (x5555) if not able to extubate
- Monitor patient in OR-B (O2 Sat >92% with O2 support for 5-10min)

READY FOR TRANSFER

Scrub RN

- Don yellow gown + gloves
- Bring bed + oxygen tank + plastic transfer wrap into OR-B
- · Assist with transfer onto bed
- Leave OR, doff PPE in anteroom, change scrubs

Circulating RN

- · After transfer onto bed, leave OR-B
- Doff yellow gown + gloves
- · Don new yellow gown + gloves in OR corridor
- Re-enter OR

OB (Resident)

- Assist with transfer onto bed
- Leave OR-B
- · Doff PPE in anteroom
- · Change scrubs

- · Place mask on patient
- · Dispose syringes, soda lime, circuits etc... appropriately.
- Once Circulating RN returns, leave OR-B
- Doff gown + gloves in anteroom
- Don new gown + gloves

ANESTHESIA

- · Assist with transfer on to Bed

- · Re-enter OR

TRANSFER TO: LABOUR & DELIVERY ROOM OR ISOLATION PACU BED

Patient should wear NP (<4L/min) or Face Mask (<5L/min) with surgical mask on transport Team Leader / Charge RN to ensure that OR-B has 2-Stage Cleaning + call Housekeeping Supervisor (x4555)

Circulating RN

- · Doff PPE after transfer to postpartum RN
- Change scrubs

ANESTHESIA

- Doff gown + gloves in room; Doff N95 + upper body PPE in anteroom in OR-B
- Change scrubs

BURRT / NICU RESUS TEAM

- If no Code Airway Team or 2nd Anesthesia, BURRT will help Anesthesia
- After intubation, leave OR
- Doff yellow gown + gloves in anteroom
- If 2nd BURRT available, they will enter OR to assist with Resus Team.

NICU RESUS/TRANSFER TEAM

In OR to receive baby

NEONATAL RESUSCITATION DO NOT ENTER RESUS ROOM

- Initial steps & airway stabilization in OR -B
- If extensive resuscitation & stabilization required, go to M5-411; otherwise, complete transfer to NICU POD A-negative pressure room
- NICU Transfer Team to transfer baby
- · If no resus or transfer to NICU required, BURRT and NICU Resus Team leave OR-B once baby transferred
- · Doff PPE in anteroom