

POSSIBLE COVID-19 +ve PATIENT FOR MATERNITY THEATRE

Start of shift

- Obstetrician, Anaesthetist, shift leader and theatre staff perform COVID team brief (see separate sheet)
- Anaesthetist checks GA drugs
- ODP checks airway tray and trolley

Prepare

- Anaesthetic charts proactively prepared where possible
- Women should have working IV access
- At least one theatre covered and ready to go at all times (default theatre 2)

Decision for theatre

- Intra-uterine resuscitation if fetal compromise
- Obstetrician consents in room, checklist completed, premeds given
- Anaesthetist checks bloods and confirms history from shift leader then goes to theatre
- Full team brief on plan if time allows
- Anaesthetist and ODP prepare equipment for likely anaesthetic plan
- Theatre team don PPE

Transfer

- Woman and partner wear surgical masks
- Midwife doffs PPE from room and re-dons fresh set appropriate for theatre case (check with theatre team)
- 1 member of theatre team dons PPE and goes to patient room
- Shift lead or designated other announces CODE RED and clears corridor, opens and shuts necessary doors
- Together they transfer patient to theatre. Once in theatre bed goes back to room for cleaning.

In theatre

- Minimum staff in theatre
- 1 appropriately skilled runner outside door at all times
- Take in only essential equipment
- Complete anaesthetic history if necessary
- Attach CTG monitoring if indicated
- Perform regional anaesthesia if possible
- If GA team in theatre but stay as distant as possible
- Under regional, may have O₂ via NC \leq 5LPM under surgical FM
- Most experienced operator to perform procedure
- Use hand-held diathermy with built in smoke extraction

End of case

- WHO sign out
- Woman transferred onto new post natal bed
- If GA most staff to leave the room for extubation
- Remains in theatre for recovery approx 20 mins, ideally recovered by someone who has already been in theatre. Runner remains outside door
- All staff leaving theatre doff in amber zone as per guidance then perform hand hygiene outside theatre and wipe shoes
- Timings sheet may be passed out into clear bag

Transfer

- Transferring staff doff PPE then re-don clean barrier PPE for transfer
- Woman and partner wear surgical masks
- Shift leader or designated other to clear corridors, shut and open necessary doors
- Theatre may be cleaned 30 mins after last AGP (likely to be as soon as patient leaves)
- Theatre re-prepared for another case