



COVID-19 Plan for Elective Surgery

Last Updated 7.20.2020

The North Memorial Ambulatory Surgery Center (“ASC”) is governed by a Board of Directors comprised of:

- Dr. S. Kern, M.D. - SIGS
- Dr. P. Cammack, M.D. – TCO
- Dr. M. Fischer, M.D. - TCO
- Andy Cochrane, CEO of Maple Grove Hospital – Serves as Incident Command
- Carolyn Ogland, M.D., Chief Medical Officer of North Memorial Health – Serves as Incident Command
- Ryan Johnson, Controller of North Memorial Health

This Board of Directors is responsible for oversight and direction of COVID-19 planning and operations. In addition, the North Memorial Ambulatory Surgery Center also falls under the guidance and direction of the Incident Command Center through North Memorial Health. All protocols must be reviewed and approved by this group.

The ASC leadership, in partnership with the Medical Director, Dr. Steven Kern, keeps the board apprised of all activity and continually monitors state and local pandemic efforts to assure the ASC is in compliance with all standards.

The below outlined plan and protocols can be provided to MDH or another state licensing board upon request. This plan is continually updated as new information is learned and new protocols are adopted.

Community Considerations

- **Community Wide Approach:** The ASC works in partnership with North Memorial Health System to facilitate a community-wide approach and maintain capacity for a potential surge with COVID-19 patients. Specifically, the ASC has been designated as a possible alternate location in the event North Memorial Hospital and Maple Grove Hospital need additional capacity due to a surge.
- **Plan to Reduce or Stop Elective Procedures:** The North Memorial Incident Command structure will keep our ASC informed as COVID-19 cases increase within their hospitals and/or if the system is reaching PPE levels that require additional conservation efforts. As those COVID numbers increase or as PPE levels become depleted, the ASC will begin to reduce the number of scheduled elective surgeries per the direction of Incident Command. Medical staff will be notified of this reduction. In the event we must stop performing all elective surgery, we have individuals and communication plans in place to notify medical staff and patients. The ASC will also be available and ready to serve as an alternate location if the hospital(s) reach their surge capacity.

- **PPE Levels:** The ASC has adequate PPE levels to resume elective surgery. In addition, the ASC does not access publicly available reserves from state inventories. All PPE is sourced through our traditional supply procurement chain.
- **Safe Treatment of Patients:** The ASC has protocols and policies in place to provide safe care that does not compromise any standards of care. All of the protocols are reviewed by the ASC Medical Director and then reviewed by the Board of Directors. The Board has final authority on operations of the ASC.
- **Case Prioritization:** Our first priority will be to schedule those procedures that were cancelled due to the COVID-19 outbreak and the executive order to discontinue all elective surgeries. Our second priority will be any time-sensitive or essential procedures. Finally, all other cases.
 - **Additional TEMPORARY changes to scheduling:**
 - NO same day add-on's without a Negative PCR COVID-19 Test
 - NO next day add-on's after 12 noon the day prior without a Negative PCR COVID-19 Test
 - NO vendors/ reps unless deemed necessary by the surgeon.

Screening and Testing

- **Screening of Staff:** All employees and medical staff members **MUST** complete the screening protocol daily upon arrival. There are screening stations located at the PACU nurses station and the OR control desk. . All staff are asked to complete the following:
 - ✓ Take temperature. If temperature is > 100.4, staff must check-in with the supervisor and will be asked to go home.
 - ✓ Verify they do not have any of the following symptoms: cough, sore throat, fever, exposure to COVID-19, or loss of taste or smell, chills, or muscle aches/pain.
 - ✓ Once staff has validated all the screening mechanisms, they place a sticker with the days date on their scrubs. This sticker notifies anyone that they encounter they have completed the screening protocol for that day.
 - ✓ If there are concerns on the screening results, a supervisor or the Clinical Director is called.

Sample Screenshot of Employee & Medical Staff Screening Sheet.

Date	Employee Name	Temperature >100.4 must go home	Symptoms
			<input type="checkbox"/> cough <input type="checkbox"/> sore throat <input type="checkbox"/> fever <input type="checkbox"/> exposrue to COVID-19 <input type="checkbox"/> loss of taste or smell <input type="checkbox"/> Chills <input type="checkbox"/> Muscle Pain

- **Staff Not Working While Sick:** Staff is not allowed to work when sick and per the above screening protocol, will be asked to go home if showing symptoms of COVID-19.
- **Provider and Staff Travel:** Providers and staff of NMASCMG who have traveled to one of the high-risk countries (Level 2 or Level 3) designation by the CDC will be asked to disclose any travel to the Clinical Director and may be asked to self-quarantine for 14 days, based on exposure and current CDC guidance. *See policy: COVID-19 Provider and Staff Quarantine and Reporting # 10009*
- **Limiting visitors:**
 - ✓ Only persons attending to pediatric patients or those patients requiring a primary provider for pt. care will be allowed to attend the patient.
 - ✓ No one under age of 18, patients exempt will be allowed in the facility.
 - ✓ Patient family and visitors will be asked to provide a phone number for provider postop call and discharge teaching needs.

- **Patient Screening:** There are multiple layers of patient screening that occur prior to the patient's procedure. Prior to arriving at our facility, the patient receives information from our facility about what to expect when they arrive. See below information that is provided prior to surgery:

Patient Information Provided Prior to Procedure:

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. The disease causes respiratory illness (like the flu) with symptoms such as a cough, fever, and in more severe cases, difficulty breathing. COVID-19 is spread through close personal contact or airborne droplets – coughing or sneezing. People may also contract the illness if they touch a surface infected with COVID-19 and then touch their mouths, noses or eyes. There's currently no vaccine to prevent COVID-19.

I understand that my physician has determined that my planned elective procedure/surgery is medically necessary and permissible under Governor Walz in the State of Minnesota as well as the federal government and return to elective surgeries. Please know that the decision whether to proceed with the procedure/surgery now or to wait until after the COVID-19 is less prevalent is up to each patient and their family and given situation. During this time – your care giver or person accompanying you to the center will be limited in an effort to reduce the spread of COVID-19 infection. In the event that you would develop any surgical complications or post-surgical complications, we may have to transfer you to a hospital for care. If that would occur, you could potentially be exposed to patients with COVID-19.

We would ask that you would contact your Doctor if you have further questions related to having a procedure during this pandemic. With all the precautions, please know that there is always a risk when leaving your home regardless of the location.

The North Memorial Ambulatory Surgery Center has implemented several new actions, along with our existing infection control processes in response to the COVID-19.

COVID-19 PCR Testing – All patients must be tested for coronavirus prior to your procedure. You must self-quarantine between the time of testing and time of your procedure. If you test positive for coronavirus, your procedure will be cancelled. Additional information on the process for receiving the coronavirus test prior to your procedure is included on the attached checklist.

Limiting Visitors – Minors (under the age of 18) and adults requiring a caretaker can have one person in attendance while at the facility. No other exceptions are allowed. We ask that all other caregivers drop off patient at the front door. Patients will be asked for a phone number to contact your caregiver. We will utilize this phone number to contact your caregiver after your procedure and review discharge instructions. The physician may also contact your caregiver after the procedure.

When You Arrive

- All surfaces are decontaminated at the conclusion of each day's cases per national standards, as well as between each patient encounter. This includes pens and electronic keyboards/etc.
- Hand sanitizer is provided upon entering the building.
- If you do not wear a mask to our facility, you will be provided one at registration. You must always wear this mask while at our surgery center.
- After your registration, you may have a short wait in our waiting room. We highly recommend the six feet social distancing. You will notice some chairs are marked "Reserved" to allow for distancing. We have also removed magazines and extra items (i.e. items that would be high-touch and/or require additional cleaning).

- An RN will then escort you to a room where she or he will take your temperature and ask additional screening questions. **If your temperature is 100.4 or greater or you are showing symptoms of coronavirus, your procedure will be rescheduled to a later date.** After this has been completed, you will be taken to the pre-operative area to prepare for your procedure.

Protective Mask Guidance – You are required to wear a mask while at our facility. Please bring one from home, if you have one. If you do not have one, we will provide one for you upon arrival to our facility. For your safety, *avoid touching the outside of the mask*. When removing, only touch the strings and dispose in a nearby trash can. Wash or sanitize hands immediately after removal and any time you have touched your mask.

Healthcare Provider Masking Protocol - All surgery center staff will be wearing masks and potentially face shields when providing care for you.

Your Procedure – We follow all nationally recognized standards and practices related to anesthesia protocols, airway needs, air exchanges and cleaning our rooms. Safety has and always will remain our number one priority.

Your Recovery

- Discharge instructions will be provided to you during your preoperative phase and again with your family member or caregiver over the phone. Written information will be sent home with you for reference by you and your caregiver.
- Your caregiver will be notified when it is time to pick you up and will be given instructions related to discharge and home needs.

Safety Precautions At Home - Wash your hands or hand sanitize often and prior to touching your dressings and after eating, using the restroom, coughing, sneezing or touching high use items (door knobs, cell phones, TV remotes, computer mouse, sink bathroom knobs, etc.).

Post-Procedure Phone Call from North Memorial Ambulatory Surgery Center

- You will receive a call within 1- 2 days after your procedure.
- Within 14 days after your procedure please call us if you have experienced any signs or symptoms of the COVID-19 virus or if you are exposed to the COVID-19 virus within 14 days of your procedure. If you experience symptoms or test positive to COVID-19 prior to our 14-day call, we ask you to contact us immediately at 763-581-9000.

Safety Precautions At Home:

- Wear a protective cloth mask if venturing outside your home or yard. Keep mobile, but safe.
- Wash your hands or hand sanitize often.
 - Prior to touching your dressings
 - After eating, using the restroom, coughing, sneezing or touching high use items (door knobs, cell phones, TV remotes, computer mouse, sink and bathroom knobs etc.)
 - Cough or sneeze into a tissue and dispose of tissue after. OR cough into your elbow.

We offer our best wishes on your recovery. Please tell us about your visit, by completing our electronic patient survey that is sent within a week of your surgery. Thank you!

My Pre-Procedure Checklist

- I have scheduled my pre-procedure history and physical with my primary care provider.
- I have scheduled my COVID-19 PCR test prior to my procedure. *It must be within seven days (168 hours) of my scheduled procedure.*
 - If my procedure is scheduled for Thursday or Friday. I can call North Memorial Health Clinic urgent care or urgency center locations (Blaine, Elk River, Maple Grove or Minnetonka) for my COVID PCR test. My provider must submit a lab order or provide me with a signed lab order to receive the test.
 - If my procedure is scheduled for Monday, Tuesday, or Wednesday:
 - And I have my history and physical at a North Memorial Health Clinic, they can also complete by COVID PCR test. Appointments are available Mo-Fr by calling 763.581.CARE (763.581.2273).
 - And I do NOT have my history and physical done at North Memorial Health Clinic AND my primary care doctor's office does not have the COVID PCR test, North Memorial Health Clinic can still perform my PCR test. My physician performing the procedure will need to provide me with a signed lab order and then I can call and schedule by PCR test at 763.581.CARE (763.581.2273).
 - I can also go to the North Memorial Drive-Thru Testing Location at 3435 West Broadway Avenue in Robbinsdale or the Walk-Up Testing Location at 4414 Humboldt Avenue North in Minneapolis. The hours for both drive-thru and walk-up testing are 8am to 4pm Monday through Friday. If drive-thru testing is utilized, you should enter the testing site from France Avenue N and 35th Avenue N.

You should wear a mask; have your insurance card, a valid ID and accurate contact information readily available. When you arrive, you will be instructed to call the pre-registration line at 763-581-3190. The testing center staff will answer the phone and pre-register you. The staff will ask if you are having any symptoms OR have an upcoming procedure. Once you are pre-registered, pull up to the testing site and open your window. The site is operated by clinical staff who will swab your nose. Once the sample is collected, you can drive away

Testing Guide by Day of Surgery/Procedure					
Day of Procedure	Monday	Tuesday	Wednesday	Thursday	Friday
When to get COVID test	Prior Monday By noon	Prior Tuesday By noon	Prior Wednesday By noon	Prior Thursday By noon	Prior Friday By noon

- Immediately after receiving my COVID PCR test, *I understand I have to self-quarantine until my procedure. If I do not self-quarantine, there is a chance I could be exposed or come into contact with someone who has the virus and my procedure will be cancelled.*
- I have received a phone call from the North Memorial Ambulatory Surgery Center staff to review my health history and screening questions for the coronavirus prior to my procedure.
- I have followed all NPO guidelines (if applicable) and/or any other directions from the surgery center staff prior to my procedure.
- I understand that I may not have a visitor accompany me for my procedure (unless I am a minor or an adult requiring a caregiver).
- If I develop a temperature or have any COVID-19 symptoms (cough, shortness of breath, fever, chills, sore throat, headache, muscle pain, or new loss of taste or smell) prior to my procedure, I will notify the surgery center immediately.
- I am prepared for my procedure and have the following items ready to take with me to the surgery center:
 - Any questions that I or my caregiver has will be noted on paper.
 - My caregiver's phone number to contact him/her while I am at the surgery center. I will give this to the surgery center staff.
 - My face mask to wear to the surgery center. If I do not have one, the surgery center staff will provide one for me upon arrival.

My Colonoscopy/EGD Pre-Procedure Checklist

- I have scheduled my COVID-19 PCR test prior to my procedure. *It must be within seven days (168 hours) of my scheduled procedure.*
 - If my procedure is scheduled for Thursday or Friday. I can call North Memorial Health Clinic urgent care or urgency center locations (Blaine, Elk River, Maple Grove or Minnetonka) for my COVID PCR test. My provider must submit a lab order or provide me with a signed lab order to receive the test.
 - If my procedure is scheduled for Monday, Tuesday, or Wednesday I can also go to the North Memorial Drive-Thru testing location at 3435 West Broadway Avenue in Robbinsdale or the Walk-Up testing location at 4414 Humboldt Avenue North in Minneapolis. The hours for both of these locations are 8am – 4 pm Monday through Friday. If the Drive-Thru testing is utilized you should drive in from France Avenue N and 35th Avenue N. You do NOT need a physician order at these locations. You should wear a mask; have your insurance card, a valid ID and accurate contact information readily available. When you arrive, you will be instructed to call the pre-registration line at 763-581-3190. The testing center staff will answer the phone and pre-register you. The staff will ask if you are having any symptoms OR have an upcoming procedure. Once you are pre-

registered, pull up to the testing site and open your window. The site is operated by clinical staff who will swab your nose. Once the sample is collected, you can drive away

Testing Guide by Day of Surgery/Procedure					
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- Immediately after receiving my COVID PCR test, I understand I have to self-quarantine until my procedure. If I do not self-quarantine, there is a chance I could be exposed or come into contact with someone who has the virus and my procedure will be cancelled.
- I have received a phone call from the North Memorial Ambulatory Surgery Center staff to review my health history and screening questions for the coronavirus prior to my procedure.
- I have followed all NPO guidelines (if applicable) and/or any other directions from the surgery center staff prior to my procedure.
- I understand that I may not have a visitor accompany me for my procedure (unless I am a minor or an adult requiring a caregiver).
- If I develop a temperature or have any COVID-19 symptoms (cough, shortness of breath, fever, chills, sore throat, headache, muscle pain, or new loss of taste or smell) prior to my procedure, I will notify the surgery center immediately.
- I am prepared for my procedure and have the following items ready to take with me to the surgery center:
 - Any questions that I or my caregiver have will be noted on paper.
 - My caregiver's phone number to contact him/her while I am at the surgery center. I will give this to the surgery center staff.
 - My face mask to wear to the surgery center. If I do not have one, the surgery center staff will provide one for me upon arrival.

In addition, we continue with the following protocols for screening all patients and/or their accompanying visitor.

- During the pre-operative phone call, the pre-operative nurse will complete the patient screening questions built in Epic. *See below screenshots.* During the pre-operative phone call, the patient will also be notified that no visitors will be allowed with the patient during their visit, EXCEPT one parent is allowed with a minor or patients who require a caregiver or assistance can have one person. The patient will also be notified that we require a mask while at the center. If they have one, they can wear their own on that day. We will request the driver drop the patient off at the front door and wait in their vehicle. The ASC staff will obtain the driver's name and phone number. The provider will call the caregiver after the procedure and the ASC staff will call again when we go through discharge instructions.

Travel Screening

Question	Response
In the last month, have you been in contact with someone who was confirmed or suspected to have Coronavirus / COVID-19?	No / Unsure
Do you have any of the following symptoms?	None of these
Have you traveled internationally in the last month?	No

Travel History

No documented travel since 03/21/20

Communicable Disease Screening

In the last month, have you been in contact with someone who was confirmed or suspected to have Coronavirus / COVID-19?

Yes No / Unsure Unable to assess

Do you have any of the following symptoms?

<input type="checkbox"/> None of these	<input type="checkbox"/> Unable to assess	<input type="checkbox"/> Abdominal pain	<input type="checkbox"/> Bruising or bleeding
<input type="checkbox"/> Chills	<input type="checkbox"/> Cough	<input type="checkbox"/> Diarrhea	<input type="checkbox"/> Fever
<input type="checkbox"/> Joint pain	<input type="checkbox"/> Loss of smell	<input type="checkbox"/> Loss of taste	<input type="checkbox"/> Muscle pain
<input type="checkbox"/> Rash	<input type="checkbox"/> Red eye	<input type="checkbox"/> Severe headache	<input type="checkbox"/> Shortness of breath
<input type="checkbox"/> Sore throat	<input type="checkbox"/> Vomiting	<input type="checkbox"/> Weakness	

Travel History

Have you traveled internationally in the last month?

Yes No Unable to assess

Add Travel

No Documented Travel

You can use the box to the upper left to add a trip to the list

No more travel to load

Upon arrival to the ASC on the date of the procedure, a team member will conduct another screening for both the patient and visitor prior to entry into the lobby. See below for screen shots.

Patient Name: _____ DOB _____ DOS: _____

Patients Temperature (if > 100.4 notify pr-op supervisor or designee) _____

YES	NO	PATIENT INFORMATION (has the patient)
		Or anyone else who lives in the child's/patient's house, traveled to China, Italy, Japan, North Korea or any parts of Asia, New York City or "hot spots" in the USA within the last month?
		a fever in the past week or day?
		a cough in the past 5 days
		a Sore Throat in the Past 5 days
		any Shortness of Breath or difficulty breathing in past 5 days
		any Chills or repeated shaking with chills in past 5 days
		any Muscle Pain or overall achy feeling "pain" that is not normal
		any NEW loss of taste or smell

If YES, to any 2 of these things postpone procedure for 2 weeks and re-evaluate as well as send pt. to primary care provider for attention.

*If Visitor is required to stay with patient document visitors temp. (If > 100.4 they must leave facility and report this to pre-op supervisor or designee for review) Temp: _____

YES	NO	PATIENT FAMILY MEMBER OR PERSON ACCOMPANING PATIENT TO THE ASC has experienced
		Anyone else who lives in the child's/patient's house, traveled to China, Italy, Japan, North Korea or any parts of Asia, NYC or "hot spots in the USA" within the last month?
		a fever in the past week or day?
		a cough in the past 5 days
		a Sore Throat in the Past 5 days
		any Shortness of Breath or difficulty breathing in past 5 days
		any Chills or repeated shaking with chills in past 5 days
		any Muscle Pain or overall achy feeling "pain" that is not normal
		any NEW loss of taste or smell

If YES – to any 2 items, postpone procedure for 2 weeks and re-evaluate. If the person does not live with the patient in the same household – they patient may find another person to accompany them as long as they can confirm negative information to any listed questions.

YES	NO	
		Patient has been notified to wear mask to facility or will be given one during the visit

We will require everyone entering our suite have a mask. If the patient/visitor does not come with one, we can provide one for them.

If there are concerns on the screening results, a supervisor or the Clinical Director is called.

Patient Information

Patients are provided information prior to their procedure, both from the ASC and their provider. The ASC provides the information as noted above, which also highlights their decision to proceed with their procedure is part of a shared decision-making process with their provider. Providers also discuss the risks and benefits of having their procedure during a pandemic.

All protocols and processes identified in this document highlight the considerations that have been undertaken when planning for elective procedures.

Universal Masking

See Policy: Respiratory Program During Pandemic (COVID-19) # 2015

The health of our team members while caring for patients remains a top priority. All team members must always wear masks while at work. While universal masking is not mandatory currently, we are requiring it to protect our team members and patients.

Definitions:

Uninterrupted Use: Uninterrupted use is the practice of wearing the same face mask or N95 for an extended period and for repeated close contact encounters with several different patients, without removing the face mask or N95 between patients. The expectation is that team members will wear the same face mask or N95 for their full shift. If the face mask or N95 respirator needs to be removed, team members should follow the careful reuse steps. Once you put a mask on, keep it for the entire shift unless soiled, damaged or hard to breathe through.

- Do not wear your mask around your chin or neck. You may contaminate on the OUTSIDE of your mask.
- For patients in droplet/contact or full barrier isolation, uninterrupted use and careful reuse of facemasks and N95 respirators is only acceptable if a barrier is present to shield from droplets.
- Please refer to PPE conservation guide for details.

Careful Use: Careful reuse involves removing your face mask or N95 as needed, placing it in a paper bag or hanging it from a command hook, and then donning again. Examples of when you would practice careful reuse:

- Team member moving between 2 patients, 1 requiring droplet/contact isolation (standard procedural mask), and another requiring full barrier isolation (N95 mask).
- Team member break requiring access to the nose or mouth.

Examples when you don't reuse:

- When the mask becomes visibly soiled, wet, or damaged.
- The mask becomes hard to breathe through.
- At the end of a 12-hour shift.

Personal Protective Equipment (PPE)

How to Get Supplies

- PPE is stocked in normal storerooms.
- N95s must be obtained from your supervisor and/or designated charge individual.

- Procedural masks are allocated per department in the morning. Your supervisor will bring to department in the morning.
- All team members will be provided one surgical/procedural face mask for your entire shift (up to 12 hours). N95/KN95 will be assigned to staff. Staff will have several masks assigned in order to allow for “dry out” and cleaning protocols.
 - A seal test must be performed by each team member upon donning their N95 mask. In the link below is a video on proper donning instructions and seal testing methods.
https://www.youtube.com/watch?v=Rcl7vbTzPlk&feature=emb_logo

Guidelines by Role:

	Baseline Universal Mask	Duration of Use Baseline Mask	Additional Mask	Duration of Use Additional Mask
Pre & Post-Op Staff	Surgical/Procedural Mask Provided	Full shift unless soiled or damaged. Uninterrupted use with careful re-use during single shift.	N95 as needed	Careful re-use for more than one shift.
Operating Room Staff	Surgical/Procedural Mask Provided	Full shift unless soiled or damaged. Uninterrupted use with careful re-use during single shift.	N95 as needed.	Careful re-use for more than one shift.
Anesthesiologists and CRNAs	Can use full barrier precautions for all patients, including using N95 as universal mask if desired.			
Front Desk Staff	Surgical/Procedural Mask Provided	Full shift unless soiled or damaged.		

Donning & Doffing

CONTACT/DROPET	FULL BARRIER
<ul style="list-style-type: none"> ✓ Procedure mask ✓ Eye protection (visor shield or goggles) ✓ Gowns ✓ Gloves ✓ Standard airflow room 	<ul style="list-style-type: none"> ✓ N95 ✓ Eye protection (visor shield or goggles) ✓ Gown ✓ Gloves ✓ Negative airflow room when possible

See attached Donning and Doffing Guidelines per CDC.

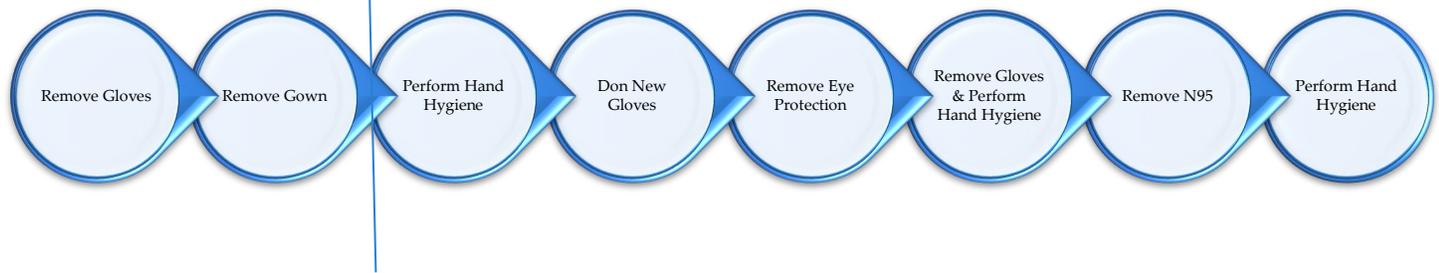
- ✓ Prior to donning, pull long hair back, remove jewelry and watches, keep cell phones and pagers in pockets.
- ✓ Donning PPE should be done in a clean space, outside of patient’s care environment.
- ✓ Doffing PPE should be done at or near point-of-use. **DO NOT WEAR CONTAMINATED GOWNS IN HALLWAY/IN SHARED WORKSPACES.** General sequence should be as follows:

In Room

Out

of

Room



PPE Conservation

Key Points for Conservation

- ✓ For patients in droplet/contact or full barrier, uninterrupted use and careful reuse of face masks and N95 respirators is only acceptable if a barrier is present to shield from droplets. You can use the following as a barrier:
 - Full face shield, or
 - Eye protection with a mask cover (standard procedural/surgical face mask can be used as a mask cover over N95), or
 - Droplet mask (combo visor/mask).
- ✓ Team members using uninterrupted and careful reuse of face masks and N95 respirators should make every effort to not touch their masks. If team members **MUST** touch their face mask or N95 respirator, hand hygiene must be performed before and after touching the mask.
- ✓ N95 respirators and masks should be discarded when any of the following criteria are met:
 - Becomes visibly soiled, wet, or damaged (straps, nose piece broken, crushed)
 - Becomes hard to breathe through
- ✓ **CRITICAL STEP: COVER THE N95 EXTERNALLY TO KEEP THE RESPIRATOR FREE FROM CONTAMINATION.**
- ✓ During this time, we will require all staff to remain in the operating room for a case without a break from another team member unless absolutely necessary.

Specific Guidance for N95

Using New N95 When Reuse is Planned:

- ✓ Perform hand hygiene.
- ✓ Open new N95 and write name on it. Don N95 and perform fit check.
- ✓ Cover/protect N95 with face shield or droplet visor.

Removal of shield and N95:

- ✓ In room, remove soiled gloves and gown. Perform hand hygiene.
- ✓ Step outside of room, don clean gloves. Prepare to remove reusable protective cover:
 - Don't touch outer shield, remove by strap(s).
 - Inspect for damage, gross soiling.
 - Disinfect reusable shield with Sani-wipes, hang on command hook to dry.
- ✓ If a non-reusable droplet visor shield mask was used: **DISCARD.**
- ✓ Take off gloves, do hand hygiene.

- ✓ Remove N95 by straps without touching the inside of the N95.
- ✓ Hang your N95 for ongoing use during your assignment.
- ✓ Perform hand hygiene.

Storage of protective shield cover and N95:

- ✓ PLACE shield in a paper bag with **your name/date**. Place N95 IN A SEPARATE LABELED CLEAN BAG.
- ✓ Storage of your paper bags will occur as directed based on available physical space.
- ✓ Your reused N95 and face shield may be saved until compromised (dirty, damaged, damp).

Retrieving a Reused Shield and N95

- ✓ Perform hand hygiene and remove your PPE out of your labeled bag.
- ✓ Inspect shield and N95, do not use if compromised.
- ✓ Don the N95 and perform fit check.
- ✓ Place reused shield cover or use a new droplet mask with visor shield based on availability of product.
- ✓ Store as above for ongoing reuse.

Other Considerations

- **North Memorial Incident Command** will provide continuous direction and guidance based on local and federal recommendations for operating room protocol. The Clinical Director, along with Anesthesia, will continuously monitor these recommendations and implement those in the ASC.
- **Post-Operative Screening:** Patients are instructed on the discharge instructions to contact the ASC within 14 days if they experience and signs, symptoms, or exposure to COVID. The ASC will follow MDH guidance should a patient note a positive test result and/or symptom. A supervisor and/or the Clinical Director must be notified immediately should the post-operative nurse become aware of any symptoms from patients.
- **Social Distancing at Work:** In an attempt to reduce team member's exposure, we ask that everyone adhere to distancing, hand, and respiratory hygiene while on break. We encourage team members to find other spaces during break time allowing for adequate distancing.
- **Environmental Cleaning:** Strict adherence to routine environmental cleaning will be followed. Close attention to cleaning items that are used for multiple patients typically classified as non-critical items, should be adhered to (BP cuffs, pulse oximeter cords and probes, EKG cables, chairs, carts, bedside tables, etc.). Cleaning should take place in the O.R. **AFTER** the patient has left and all trash, including anesthesia trash, has been removed. See Policy: Infection Prevention: Cleaning of Patient Equipment and Environment in Response to COVID-19 Outbreak.

See Policy: Infection Prevention Cleaning of Patient Equipment and Environment in Response to the COVID-19 Outbreak #9013

Attachments

Workflow

- Essential Surgery Workflow
- Management of COVID-19 results for essential surgeries
- Personal Protective Equipment and Room Turnover Guidelines for Surgical Care – COVID-19 pandemic

Policies

- Policy 2015: *Respiratory Plan During COVID-19 Pandemic*
- Policy 9013: *Cleaning of Patient Equipment and Environment in Response to COVID-19*
- Disinfectant Images and Kill Time
- Policy 10009: *COVID-19 Provider and Staff Quarantine and Reporting*

Misc. Items

- PPE – Donning and Doffing
- N95 Respiratory: How to Don and Doff and How to Conduct a Seal Check
- MDH COVID-19 Recommendations for Health Care Workers
- MDH What to do if you have had close contact with a person with COVID-19
- CDC Hand Hygiene in Healthcare Settings

Resources

- MDH
- CDC
- WHO
- NM Incident Command Center