

Decision Making Guidance		
<u>Exposure Consideration</u> Community Cluster	Patient lives in a known community cluster and has <ul style="list-style-type: none"> no close contacts with COVID-19 AND no symptoms. 	<ul style="list-style-type: none"> Swab 36-48 hours prior to surgery. If possible, wait for negative swab result. If swab negative, patient may proceed according to ASYMPTOMATIC column (Green Zone). If a patient cannot be delayed for the COVID-19 swab result, the patient shall have surgery in a dedicated COVID-19 OR, as specified under SYMPTOMATIC OR EXPOSURE RISK column (Yellow Zone).
<u>Exposure Consideration</u> Facility Cluster	Patient lives in a known facility cluster	<ul style="list-style-type: none"> If possible, direct patient to self-isolate for 14 days (isolate from any close contact with COVID-19). Swab patient 36-48 hours prior to surgery. Proceed to surgery in a dedicated COVID-19 OR according to SYMPTOMATIC OR EXPOSURE RISK column (Yellow Zone), even if swab negative and within the 14 day period of self-isolation.
<u>Exposure Consideration</u> Close Contact	Patient is a CLOSE CONTACT (within 14 days) of a Known or Suspected Case	<ul style="list-style-type: none"> If possible, direct patient to self-isolate for 14 days (isolate from any close contact with COVID-19) Swab patient 36-48 hours prior to surgery. Proceed to surgery in a dedicated COVID-19 OR according to SYMPTOMATIC OR EXPOSURE RISK column (Yellow Zone), even if swab negative and within the 14 day period of self-isolation.
<u>Surgical Consideration</u> Surgery Entering Respiratory Tract	Patient is having surgery entering the respiratory tract (specific surgical procedures in cardiac, neuro, thoracic, plastic surgery, ENT & OMF, etc)	<ul style="list-style-type: none"> Review/reconfirm COVID-19 Risk Assessment (virtually, if patient not admitted) Patients should be self-isolating at home for at least 10 consecutive days before planned surgery date Swab 36-48 hours prior to surgery If swab negative, proceed according to ASYMPTOMATIC column (Green Zone). If swab positive, determine whether surgery can be deferred for as long as possible; swab may be repeated no sooner than 10 days after initial test if patient asymptomatic. If unable to delay or no initial swab for emergency resp tract procedures, proceed in a dedicated COVID-19 OR according to "SYMPTOMATIC OR EXPOSURE RISK" column (Yellow Zone).

Prior to assigning patient to pathway, clinicians should use clinical judgement supported by the above decision-making guidance and the QEII Pathways document.

	KNOWN or SUSPECT COVID-19 POSITIVE Blue Zone Patient <i>swabbed COVID-19 positive or designated high risk due to symptoms and exposure</i>	SYMPTOMATIC* OR EXPOSURE RISK (Influenza-like Illness [ILI]) Yellow Zone Patient <i>or if symptoms cannot be assessed or Asymptomatic with Exposure Risk</i> <small>*This presumes source of symptoms not attributable to another diagnosis</small>	ASYMPTOMATIC or Low Risk Probability for COVID-19 Green Zone Patient <i>swabbed COVID-19 negative OR on droplet/contact precautions pending swab results not meeting COVID Screening Criteria; Deemed low risk of COVID.</i>
Screening & Decision	<ul style="list-style-type: none"> Review/reconfirm COVID-19 Risk Assessment Determine surgical urgency 	<ul style="list-style-type: none"> Review/reconfirm COVID-19 Risk Assessment Determine surgical urgency Plan testing, if applicable, OR destination, and disposition. 	<ul style="list-style-type: none"> Review/reconfirm COVID-19 Risk Assessment (virtually, if patient not admitted)
Testing	<ul style="list-style-type: none"> Patient will likely have been swabbed already; confirm swab results if available. 	<ul style="list-style-type: none"> Swab for COVID-19 if not already sent. 	<ul style="list-style-type: none"> Not indicated If a swab is pending, confirm result, if available.
Room Preparation & Considerations	<ul style="list-style-type: none"> Airborne/Droplet/Contact Precautions in dedicated COVID-19 OR Can have minimal supplies in closed cupboard/drawers Cupboards/drawers must remain closed except to retrieve items Ensure always enter cupboards and drawers with clean hands followed by handwashing, and not during an AGMP 	<ul style="list-style-type: none"> Airborne/Droplet/Contact Precautions in dedicated COVID-19 OR Can have minimal supplies in closed cupboard/drawers Cupboards/drawers must remain closed except to retrieve items Ensure always enter cupboards and drawers with clean hands followed by handwashing, and not during an AGMP 	<ul style="list-style-type: none"> Routine Practices or Droplet/Contact (if patient was designated as such prior to the OR) Anesthesiologist RN/ AT/Resident/other assistant to don gown, mask, face shield, gloves (routine Practices). If patient has travelled outside of the Atlantic Provinces <14 days assume Droplet/Contact Precautions If Droplet/Contact ensure always enter cupboards and drawers with clean hands followed by hand hygiene; use clean assistant as possible

Prior to assigning patient to pathway, clinicians should use clinical judgement supported by the above decision-making guidance and the QEII Pathways document.

	KNOWN or SUSPECT COVID-19 POSITIVE Blue Zone Patient <i>swabbed COVID-19 positive or designated high risk due to symptoms and exposure</i>	SYMPTOMATIC* OR EXPOSURE RISK (Influenza-like Illness [ILI]) Yellow Zone Patient <i>or if symptoms cannot be assessed or Asymptomatic with Exposure Risk</i> <small>*This presumes source of symptoms not attributable to another diagnosis</small>	ASYMPTOMATIC or Low Risk Probability for COVID-19 Green Zone Patient swabbed COVID-19 negative OR on droplet/contact precautions pending swab results not meeting COVID Screening Criteria; Deemed low risk of COVID.
Intubation & Extubation	<ul style="list-style-type: none"> Airborne/droplet/contact precautions Limit personnel in the OR to anesthesiologist, RN or AT or Anes Resident All staff in the OR don appropriate PPE for airborne/droplet/contact 	<ul style="list-style-type: none"> Airborne/droplet/contact precautions Limit personnel in the OR to anesthesiologist, RN or AT or Anes Resident All staff in the OR don appropriate PPE for airborne/droplet/contact 	<ul style="list-style-type: none"> Routine Practices or Droplet/Contact (if patient was designated as such prior to the OR) Anesthesiologist RN/AT/Resident/other assistant don gown, mask, face shield, gloves; no N95 mask required Anesthesia tech in OR to assist If patient has travelled outside of the Atlantic Provinces <14 days assume Droplet/Contact Precautions (no N95 mask required)
Intra-operative	<ul style="list-style-type: none"> Airborne/droplet/contact precautions All staff in the OR don appropriate PPE for airborne/droplet/contact 	<ul style="list-style-type: none"> Airborne/droplet/contact precautions All staff in the OR don appropriate PPE for airborne/droplet/contact 	<ul style="list-style-type: none"> Routine Practices or Droplet/Contact (if patient was designated as such prior to the OR) If patient has travelled outside of the Atlantic Provinces <14 days assume Droplet/Contact Precautions
Phase 1 Recovery	<ul style="list-style-type: none"> Airborne/droplet/contact precautions; may be stepped down to droplet/contact after ventilation removes 99.9% of airborne particles post aerosol generating medical procedure (AGMP). Place surgical mask on patient as applicable. Recover in the OR until ready to move to designated unit 	<p>If patient is ASYMPTOMATIC and only has exposure risks, i.e., (a) comes from a Community Cluster (without a swab result yet available) or (b) comes from a Facility Cluster (regardless of swab negative or pending) or (c) Patient is a CLOSE CONTACT (within 14 days) of a Known or Suspected Case (regardless of swab result) or (d) Surgery Entering Respiratory Tract (without a swab)</p> <ul style="list-style-type: none"> Recover patient in the OR for the period of time until ventilation removes 99.9% of airborne particles (room specific) [If general anesthesia] Place a surgical mask on the patient as applicable Proceed to PACU once ventilation time completed, under droplet/contact precautions <p>If the patient is SYMPTOMATIC ('ILI Cohort') or if there is a high risk as determined by anesthesiology of an AGMP being required during the Phase 1 Recovery Period</p> <ul style="list-style-type: none"> Recover in the OR until ready to move to designated unit 	<ul style="list-style-type: none"> Routine Practices or recover in PACU using precautions that patient was on prior to OR
Disposition	<ul style="list-style-type: none"> Consult QEII Pathways to aid decision making Droplet/contact precautions If COVID-19 positive/suspected, to COVID-19 unit (ward or ICU) 	<ul style="list-style-type: none"> Consult QEII Pathways to aid decision making Droplet/contact precautions Transfer to appropriate Yellow Zone "cohort" area for symptomatic or <u>any floor</u> if asymptomatic with exposure risks For ASYMPTOMATIC patient who proceeded down this pathway only because of Surgery Entering Respiratory Tract (without a swab), transfer to any floor under Routine Practices. 	<ul style="list-style-type: none"> Consult QEII Pathways to aid decision making Routine Practices or Droplet/Contact (if patient was designated as such prior to the OR)

Appendix A

Consult [COVID-19 Hub](#) for latest version of [COVID-19 Risk Assessment](#).

Appendix B – Considerations for Neuraxial, Regional, or Local Anesthesia

Considerations for the Management of Patients Proceeding under Neuraxial, Regional or Local Anesthesia

- Patients shall proceed to the OR using the same considerations noted above. For greater certainty, while local or regional anesthesia may be planned, the remote possibility of converting to general anesthesia cannot be reasonably guaranteed. Therefore, all cases with planned regional, neuraxial or local anesthesia in the OR (involving anesthesiology staff) should proceed according to the *Decision & Management Protocol for Surgical Procedures Requiring General Anesthesia during COVID-19 Pandemic*.

Appendix C – Cleaning and Disinfection

	KNOWN or SUSPECT COVID-19 POSITIVE Blue Zone Patient <i>swabbed COVID-19 positive or designated high risk due to symptoms and exposure</i>	SYMPTOMATIC or EXPOSURE RISK Yellow Zone Patient <i>or if symptoms cannot be assessed or Asymptomatic with Exposure Risk</i>	ASYMPTOMATIC Green Zone Patient swabbed COVID-19 negative OR on droplet/contact precautions pending swab results not meeting COVID Screening Criteria Deemed low risk of COVID.
Cleaning & Disinfection	<ul style="list-style-type: none"> • Contact precautions after time elapsed for 99.9% of airborne particles to be removed • Cleaning staff to clean & disinfect OR wearing universal mask, gown, heavy duty gloves, & face shield or goggles if sprays or splashes from cleaning materials anticipated • Cleaning to include touched surfaces including exterior of cupboards • AT cleans anesthesia cart including drawers. • Requires terminal cleaning after initial clean by patient attendant/AT 	<ul style="list-style-type: none"> • Contact precautions after time elapsed for 99.9% of airborne particles to be removed • Cleaning staff to clean & disinfect OR wearing universal mask, gown, heavy duty gloves, & face shield or goggles if splashes or sprays from cleaning materials anticipated • Cleaning to include touched surfaces including exterior of cupboards • AT cleans anesthesia cart including drawers. • Requires terminal cleaning after initial clean by patient attendant/AT 	<ul style="list-style-type: none"> • Routine Practices or Contact (if patient was designated as such prior to the OR)