

Protocol for PAC of Patients in COVID Pandemic

Department of Onco-Anaesthesia and Palliative Medicine Dr. B.R.A.I.R.C.H, A.I.I.M.S, New Delhi

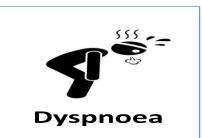






























Symptoms



Risk assessment





AGPs

(Aerosol Generating Procedure)



Elective Urgency **Emergency**

Tracheal Intubation and Extubation, Suctioning, Nebulization, NIV Or High-flow Nasal Oxygen Therapy, Bronchoscopy, Endoscopy, Laparoscopy, Electrocautery, Chest compressions.

Testing for COVID-



Proceed for surgery in RT-PCR negative cases with all precautions.

ELECTIVE

If RT-PCR not done or results not available Proceed for surgery with all precautions as with a COVID case.

EMERGENCY

Screen for symptoms of

COVID, send RT-PCR if

feasible, consider case as

suspected COVID

Ideally the RT-PCR test should be done with in 24 hours before surgery.

URGENCY High risk: AGP

Screen for symptoms

RT-PCR Testing

Consider surgical delay if feasible. Proceed with COVID care protocol

Proceed for surgery

Low risk

Screen for symptoms

Proceed for

surgery

Consent



- Abide by all preventive measures.
- Risk of cross infection.
- Risk of complications from COVID: Unexpected progression to acute respiratory distress syndrome, Cardiac injury, Kidney failure and Death.

Proceed for surgery with precautions



- PPE
- Hand hygiene
- Workflow guidelines
- Training and education
- Safe transfer
- Minimal staff in OT during AGPs