

ICU VENTILATOR

Turn off ventilator
Disconnect DISTAL to HME
Attach C-circuit and waveform
capnography

THEATRE
VENTILATOR

Switch to MAN SPON

Manual
ventilation at
10-12/min

Assess Rhythm
Max 10 seconds

VF/pVT

DC Shock

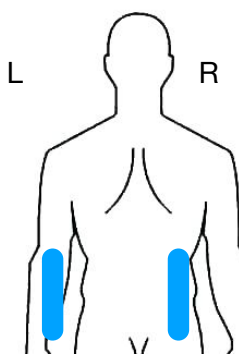
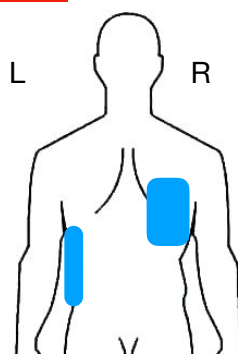
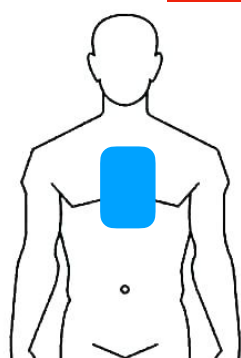
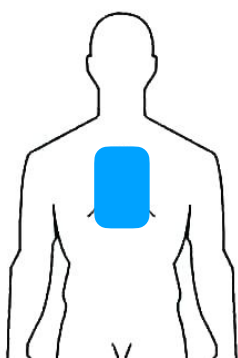
Resume CPR x 2mins
Minimise interruptions

Asystole/PEA

Resume CPR x 2mins
Minimise interruptions

HAND POSITION

DEFIB PADS



Inside the room

1. Senior anaesthetist
2. Physician for iv access and airway assistance (may be anaesthetics or other)
3. ICU Nurse to administer medications and energy
4. Staff nurse to do CPR (1)
5. Staff nurse to do CPR (2) – First responder(s)

In anteroom

1. Staff nurse in PPE

They should:

- provide support if someone has to leave the room
- be ready to get whatever the team inside needs
- facilitate communication
- observe for breaches in protection
- relieve personnel inside the room to minimize risk of safety breaches when fatigued

Outside the room

1. RUNNER (staff nurse) to assist with supply/ equipment

Donning should be carried out quickly but meticulously

If multiple individuals arrive at the same time, **priority for donning and entering the room should be given to senior anaesthetist and ICU nurse**

Members of the team initially staying outside the room (e.g., back-up staff nurse and runner), should **help with donning (e.g. tie gowns) and assessing for breaches**

1. Put personal items (stethoscope, jewellery, clipboard, watch, pagers) in specific bag available in COVID-19 tool bag
2. Don PPE as per guidelines for aerosolized procedures
3. Have member of the code blue team special to assess for breaches prior to entering room

INSIDE THE ROOM / DURING THE CODE

- First responder continues to provide CPR
- First two to enter the room: senior anaesthetist and the ICU nurse with arrest cart (unless already inside the room), unless others already present and properly protected
- ICU nurse immediately connects patient to defibrillator for rhythm analysis if not done already
- Defibrillate if indicated
- No equipment can leave the room until the end of the arrest and without appropriate handling

BEFORE LEAVING THE ROOM

- **Plan transport** if needed. Team members who will be in contact with the patient during transport must then put on new, clean PPEs prior to transport.
- All **non-disposable equipment must be wiped, placed into a clear biohazard bag** in the room and tied
- **Disposable equipment must be discarded**
- **Put arrest record** into sleeve sheet and wipe it

•DOFFING

-DO NOT RUSH.

-**Anyone who is** unwell, has had equipment failure, or likely self-contaminated is the first to doff and exit

-**Use doffing guidelines**