Safe Transport of COVID-19 Positive Patients or PUIs

Updated April 29, 2020

Updates: updated process for patients on high flow nasal oxygenation.

Every effort should be made to avoid moving a COVID-positive patient from one location to another within the hospital. In general, any services should instead be brought to the patient location utilizing Standard, Contact and Droplet transmission isolation procedures. Examples of diagnostic and care requirements that may mandate Intra-hospital transfer might include:

- Emergency department to the medical/surgical unit;
- Medical-surgical unit to ICU;
- Nursing unit to the radiology department (use bedside scan whenever feasible)
- ED, ICU, or medical surgical unit to the operating room

Potential breaches of infection control can occur during episodes of patient transport outside of the isolation room. Additionally, provision of patient care may become complex should the patient condition begin to deteriorate during the transport process.

Colleagues who handle the transport of COVID-19 patients must consider the following principles:

- Early recognition of the deteriorating patient
- Contingency plans for medical emergencies during transport (qualified staff and appropriate equipment)
- Colleague safety from cross contamination
- Bystander safety (other colleagues) as the patient moves through common areas
- Post-transport decontamination of equipment utilized during transport

Steps to take when transport is required:

- Determine the route that will cause the least contact with other colleagues or visitors during transport
- Call ahead to ensure the receiving department is prepared to accept the patient to avoid having the patient wait in the hallway
- Assess the stability of the patient immediately prior to transport
- Ensure that appropriate supplies and equipment go with the patient (eg. inclusion of portable defibrillator, ambu bag) should the patient deteriorate enroute
- Ensure that the patient is masked
- If patient is unable to be masked (ventilated) ensure adequate infection prevention controls are implemented. If ventilated, the circuit should be closed. Hepa filtration should be added to endotracheal tubes.
• Use caution if patient is on high flow nasal oxygenation or NIV (non-invasive ventilation) during transport. The patient must be masked and colleagues are to follow PPE guidelines as stated below. Nursing staff will be approached by the transporter that they are here to take your patient to a specific location. Transporters cannot assist with getting patients ready to go or with transfer to the wheelchair or cart and cannot enter the patient room.
  o All nursing staff assisting with transfer of patient need to be in PPE. Clean hands and don required PPE.
  o Transport staff will wear a procedural/surgical mask, complete hand hygiene, put on clean gloves, and disinfect all surfaces to be used for transport and remove gloves. Do not wear gloves for transport due to risk of contamination to elevator buttons, hand rails etc.

• Nursing will get patient into their mode of transport and bring them directly outside of room to the transporter.

• The transporter brings the patient to their destination using service elevators. No one else should be in the elevator with the transporter and the patient. Receiving department (radiology etc.) will be in full PPE because patient may not have mask when they are doing their tests or procedures.

• After dropping off the patient, the transporter:
  o Obtains a disinfecting wipe(s) from the receiving department.
  o Cleans the wheelchair or cart with disinfecting wipe(s). Observe and adhere to minimum contact times.
  o Performs hand hygiene.

• After completion of the procedure:
  o The receiving department replaces the mask on the patient, if needed and calls for transport.
  o The receiving department transfers the patient to the wheelchair or cart.
  o The receiving department notifies the patient's unit that the patient is returning
  o Upon arrival in the department, the transporter:
    ▪ Dons a procedural/surgical mask
    ▪ Completes hand hygiene
    ▪ Puts on clean gloves
    ▪ Disinfects all surfaces to be used for transport
    ▪ Removes gloves. Do not wear gloves for transport due to risk of contamination to elevator buttons, hand rails etc.
    ▪ Transports the patient out of the department.
  o Once the patient has cleared the department with the transporter:
    ▪ Colleagues disinfect all surfaces using a disinfecting wipe. Observe and adhere to minimum contact times.
    ▪ If an aerosol-generating procedure was performed, observe and adhere to all minimum air change protocols.
    ▪ Colleagues doff PPE per protocol after the disinfection process is complete.
  o The transporter brings the patient to their destination using service elevators. No one else should be in the elevator with the transporter and the patient.
  o The transporter returns the patient inside the doorway to the patient room.
  o The transporter completes hand hygiene.
  o Nursing will don full PPE to meet the patient and transfer the patient back to bed. The nurse will doff PPE per guidelines.
Reference:
https://doi.org/10.1186/s13054-020-2828-4