

COVID-19 Fluoroscopy HVN (ET) Radiology Protocol

PURPOSE: To establish a safe process for performing procedures in Radiology Fluoroscopy for COVID+/PUI/Pathway patients.

I. Pre-Procedure

- A. Decision will be made between Neuro and the primary service on whether a procedure is urgent/emergent on a COVID+/PUI/pathway patient.
- B. Radiology supervisor/fluoro tech/coordinator will call
 1. Command Center 5-9000 if additional PPE is needed
 2. Floor/unit nurse-verify respiratory needs, O2, bipap, vent, etc.
 3. Alert other modalities to be aware of upcoming case so they are cognizant of travel in hallways with outpatients
 4. Heads up call to EVS about upcoming case. ET 352-256-7435 (techs cannot put in a work order in EPIC)
- C. Consent will be obtained as applicable.
- D. All team members should remember to use the restroom as they will not be able to leave the procedure room until the end of the case without increasing the risk of contamination.
- E. Team members should remove and store any unnecessary items (cell phone, badge, wallet, etc-be sure to keep rad badge on apron)
- F. Move a trash can next to the bathroom door inside of the fluoro suite to designate the location for doffing of PPE with the exception of the N-95 mask.
- G. Doors will be shut in adjacent hallways when possible and signage will be placed on hallways and doors as designated for the fluoro procedure room and connecting bathroom. Control room will be blocked during the case with signage.
- H. Ensure enough lead shielding will be brought into changing room as the procedure team will not leave the room during the case.
- I. Designated room will have all non-essential items removed, can store in x-ray room. Keep the suction on the wall and other essential items covered with plastic so they are available if needed but protected. Any remaining equipment will be cleaned at the conclusion of the case to include trash cans, hampers, etc.
- J. Neuro attending to discuss procedure with team and decide on what equipment/supplies are required for the case. Only that equipment will be brought into the room and supplies should be out and ready so there is not a need to open cabinets or drawers. Have grey wipes available on counter in FL room.
- K. All team members will don PPE in clean area. The patient changing room is the designated clean room to dress. Supplies will be placed in changing room prior to case.
- L. Lead rack will be moved into changing room.
- M. All x-ray patients will change in the exam rooms once the process has been initiated.
- N. Radiology supervisor or RUNNER TECH will assist team members in donning PPE.
- O. Ensure all staff who need to stay in the room during the case put on lead prior to donning PPE. If a floor nurse is going to have to stay in the room, best option would be to deliver lead in advance of bringing the patient so they do not have to doff and don prior to procedure. Staff will not be allowed to hang out in control rooms as has been past practice.
- P. Tech should forward room phone to QC3 extension.

II. Peri-Procedure

- A. Once the patient arrives in the room, the briefing will be performed while the patient is still on the stretcher (as required).
- B. Transport and Procedure teams will move patient on to the procedure table.
- C. If transport team is not required to stay in the room, transport team will doff their gown and gloves in the room and their mask and face shield in the doffing area outside the room. The connecting bathroom is the designated clean/doffing area. Staff can wait in the changing room during the procedure.

III. Intra-Procedure

- A. The procedure team should not leave the room until the end of the case.
- B. Staff should not rotate out of the procedure as this would increase the risk of contamination.
- C. No physical contact made between Procedure staff and Support staff.
- D. Runner Tech may have assisted with moving the patient and should take off dirty gloves, perform hand hygiene and put on new gloves before procedure begins. Double gowning/gloving is preferred for Runner tech.
- E. The MODALITY TECH will take items from the RUNNER TECH. Modality tech will be the one to assist the radiologist where Runner tech (or designated staff) will hand over supplies if needed.
- F. If an item needs to be removed from the procedure room (i.e.: CSF), the item should be placed in a biohazard bag that is being held by the MODALITY TECH, who will then close the bag and placed inside another biohazard bag being held by the supervisor or designated tech outside the room at the conclusion of the case.
- G. Prior to the patient leaving the room, Runner tech will call supervisor/desk to alert case has concluded and patient will be leaving room using the "Beep" alert phone.
- H. Transport team re-enters room with PPE to assist with moving the patient using bathroom entrance.
- I. Supervisor or designee will walk the hallway path to hold outpatients from walking in hallway during patient exit to elevators.
- J. Once patient is removed from the room and all doors are closed again, staff begin doffing process one at a time.
- K. Non-physician procedure team members will remain in the room after the procedure, with PPE remaining on, to wipe down the equipment and ready the room for EVS terminal clean.

IV. Post-Procedure

- A. In clean bathroom, supplies will be available for glove changes and N-95 removal.
- B. One team member at a time will doff their PPE at the bathroom entrance, removing one item at a time and place in the trash keeping mask, bonnet, gloves and N-95 on.
- C. Gloves are removed and Purell is used before entering the clean bathroom. Once in the bathroom, team member puts on new gloves to remove N-95 mask and place mask in paper bag.
- D. Gloves are disposed of and staff will wash hands with soap and water prior to leaving bathroom.
- E. Team member will exit the clean bathroom to the hallway, cross to the dressing room to remove and hang their lead apron. N-95 should be kept for decontamination or placed in bin for UV processing.
- F. Supervisor will place signs on both bathroom and fluoro room door to indicate time room can be entered for terminal clean.
- G. EVS to be called by supervisor or fluoro tech for a terminal clean to commence after closed period.
- H. No one should enter the room until air exchange reaches 99% (see chart). If the room needs to be entered a N95 mask should be worn.