

## COVID-19 ACLS CHECKLIST

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### REVIEW of PPEs

- Review appropriate PPEs available

### DONNING

- Review donning steps (consider reviewing video and posters available)
- Providers directly participating in intubation must wear 1) goggles AND full face shield; 2) double gloves
- Personal items (e.g., stethoscope, jewellery, watch, pagers) should be left outside room
- Priority for donning and entering the room: senior anaesthetist and ICU Nurse
- Discuss “donning buddy” strategy
- Do not enter patient’s room without another member of the team having assessed for PPE breaches

### DOFFING

- DO NOT RUSH
- Review doffing steps (consider reviewing video and posters available)
- Discuss “doffing buddy” strategy

### EQUIPMENT

- Check COVID-19 ACLS tool bag (C-circuit with HME filter, selection of Guedel airways, laminated copy of guidelines, disposable stethoscope, arrest record, pen, stop watch, clear bag for personal belongings to be left outside room)
- Travelling arrest cart not to be brought inside patient’s room (will stay outside available if other equipment needed – e.g., IO supplies)
- Discuss need for videolaryngoscope and who will be responsible of bringing it to the room
- Review ETT/inline suction/filter/ETCO2/BMV correct set-up
- Review importance of using appropriate mechanical HEPA filters

### ACLS MODIFICATIONS

- Review code blue special ACLS modifications (see back of this document and ACLS COVID-19 Card)

### INTUBATION/MECHANICAL VENTILATION

- If you need to disconnect ETT (e.g., air trapping):
  - 1) clear, loud announcement
  - 2) leave filter connected to ETT
- If possible, don’t perform manual bag-mask ventilation (BMV) before intubation.
- Consider videolaryngoscopy as first intubation technique

### TRANSPORT

- You need to doff and re-don before transport of patient
- Review checklist for transportation of airborne droplet contact patient