Trauma in COVID-19 or suspected COVID-19 (PUI)

1. EMS will provide early notification of patients with airway compromise or depressed GCS which may necessitate intubation. These patients are considered PUI (persons under investigation) and will be directed to Trauma Bay 2.

2. Trauma Bay 2 will be used to secure the airway and for the trauma resuscitation for these patients.

3. Some equipment will not be available in Trauma Bay 2 (central line, a line, CT). These will be available outside the room. A runner will obtain this equipment from outside the room and pass off to the trauma team, or will obtain from Trauma Bay 1 and pass to the team. There should be no traffic (personnel) moving from one room to the other.

4. Trauma resuscitation/workup will continue in Trauma Bay 2.

5. All personnel in Trauma Bay 2 will wear PPE and a tag designating their role. These tags and PPE are available outside the room. The tags are reusable and should be left in the room to be cleaned and reused. This will minimize the traffic in the room and identify roles clearly as we will have PPE on.

6. X-ray technicians may come in to the room for imaging and providers should use a portable xray shield if they are not wearing an x-ray apron.

7. Once the airway is secured COVID-19 test should be obtained and dispatched as soon as possible.

8. If the patient goes to CT scan, the patient should either return to trauma Bay 2 or go to their final/next destination (ICU, OR).

9. All personnel who leave the room must be observed for proper removal of PPE. The ED will train providers who are unsure of this process and all trauma providers will be trained.

10. PPE for PUI/COVID-19 continues until the test is negative (roughly 70 minutes).

11. All personnel should enter and gown up in PPE from the ED side (not from the hallway) to ensure proper gowing/identification.

Thank you all for your work and cooperation in this process. It is a work in progress and the goal is to ensure safety for our patients while minimizing exposure to our providers.