#### **COVID** risk stratification for Tech Suite workflow

Based on CALHN inpatient risk stratification / SA Health PPE matrix

Stratification	А	В
Risk	DSU, DOSA patients - asymptomatic Ward patients - asymptomatic & RAT negative  (See below for recent COVID-19) <sup>1</sup>	COVID-19 positive <sup>2</sup> (Positive RAT or PCR within last 10 days) OR Close contact within 7 days (ERP on ward) <sup>3</sup>
Clinical priority	Proceed as planned	Emergency or urgent Cat 1
Precautions	Standard Precautions	ERP (single use face shields)
Location	Standard TS	Standard TS
Anaesthesia	As appropriate	As appropriate  LMA removed in theatre
PACU	Standard PACU	Negative P room or designated area 1:1 nurse ERP
Waste disposal	Standard bin bags	Yellow disposal bins
Theatre Cleaning	Clinell wipes clean of all theatre equipment after case, standard Clinell clean at end of list	Clinell wipes clean of all theatre equipment after case  Downer (previously Spotless) TBP clean at end of list
CSSD	Normal transport case carts	Case carts COVID labelled

ERP - Enhanced respiratory precautions - gown, gloves, eye protection (goggles and/or face shield), N95

## 1 Recent COVID-19 (within last 11-35 days):

PCR & RAT can remain positive for 35 days (or longer!) post-COVID

Clearance from COVID-19 & lifting ERP is guided by the flow chart below (see QR code). In general terms, where patients are not immunocompromised & not in ICU, and where they have been afebrile for >72 hours, they can be cleared after day 10 if symptoms have fully resolved. In immunocompromised or ICU patients, 1x negative PCR test is needed for clearance if symptom free after 10 days.

If cleared of COVID proceed in column A, if not cleared proceed in column B

Positive RAT: place in ERP, perform respiratory pathogen PCR Day 1 & 2. If patient asymptomatic, only one negative COVID PCR is needed to clear patient

# 3 Close Contact Definition:

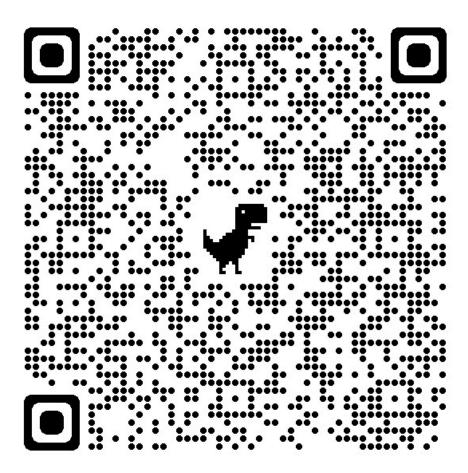
- a household member or intimate partner of a person with COVID-19 during their infectious period
- has had close personal interaction with a person with COVID-19 for a cumulative period of 4 hours or more during their infectious period:
  - where masks are not worn by the person and the COVID-19 case and
  - o in close physical proximity (within 1.5 metres) and
  - o in an indoor setting
- has been notified by SA Health that they are a close contact.
- Close contacts are managed in ERP. PCR days 0/1, 3 & 6. If Negative PCR & RAT on day 3 AND asymptomatic then lift precautions. RATs for 14 days

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#### Notes

- Responsibility for organising/ conducting admission PCR and/or RAT tests lies with home team inpatients will not be brought to Transfer Bay without admission RAT result as a minimum, except in absolute emergency situations.
- Decisions on proceeding with elective surgery should be based on current guidelines. Neither ANZCA nor RACS have published recent revised guidelines. American Society of Anaesthesiologists and Anaesthesia Patient Safety Foundation guidelines June 2023: no elective surgery within 2 weeks. Between 2-7 weeks- risk assessment considering patient age/ comorbidities, severity COVID illness and ongoing symptoms, complexity of surgery and consequences of delay.
- Ensure adequate signage outside theatres where ERP is being used to ensure anyone entering is wearing appropriate PPE.
- Monkeypox suspected or proven monkeypox should be managed in the same way as COVID-19 positive patients using column B. Delay suspected monkeypox cases until viral pathology results available if clinically safe to do so.

### **CALHN COVID-19 Testing & Clearance Flow Charts**



For any further advice, please contact the Duty Anaesthetist, SD 81175