

Resuscitation of COVID-19 Positive or Suspected Positive Patients

Critical Response and Resuscitation Committee
Respiratory Institute
Resuscitation Simulation Department
Simulation and Advanced Skills Center



Purpose

These recommendations pertain to patients diagnosed with or suspected of **COVID-19 infection experiencing cardiac arrest only**



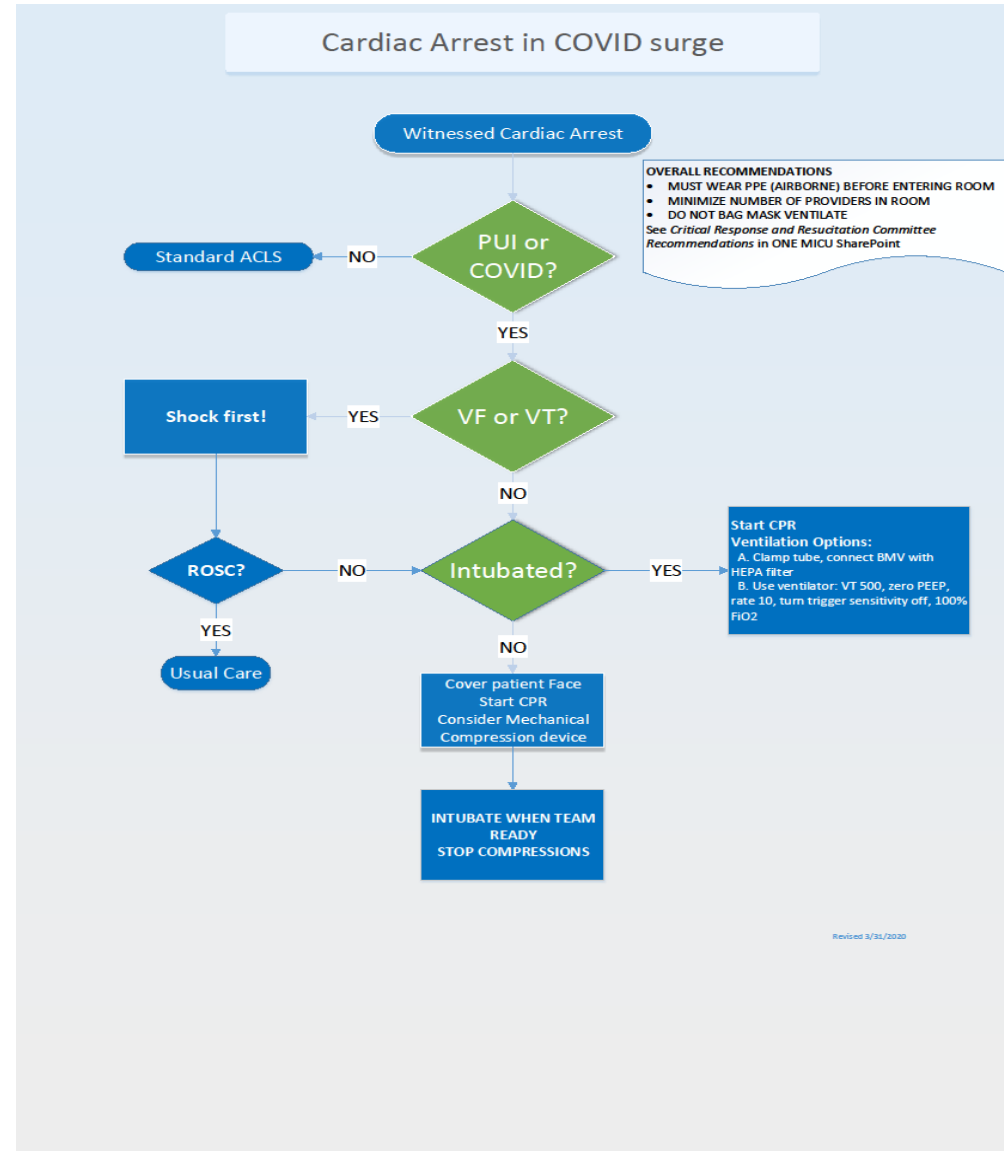


Purpose

- Provide recommendations for high quality **resuscitation** to patients diagnosed with or suspected of **COVID-19** infection
- Minimize **exposure risk** to caregivers and the environment



Cardiac Arrest in COVID Surge v.4.7.2020



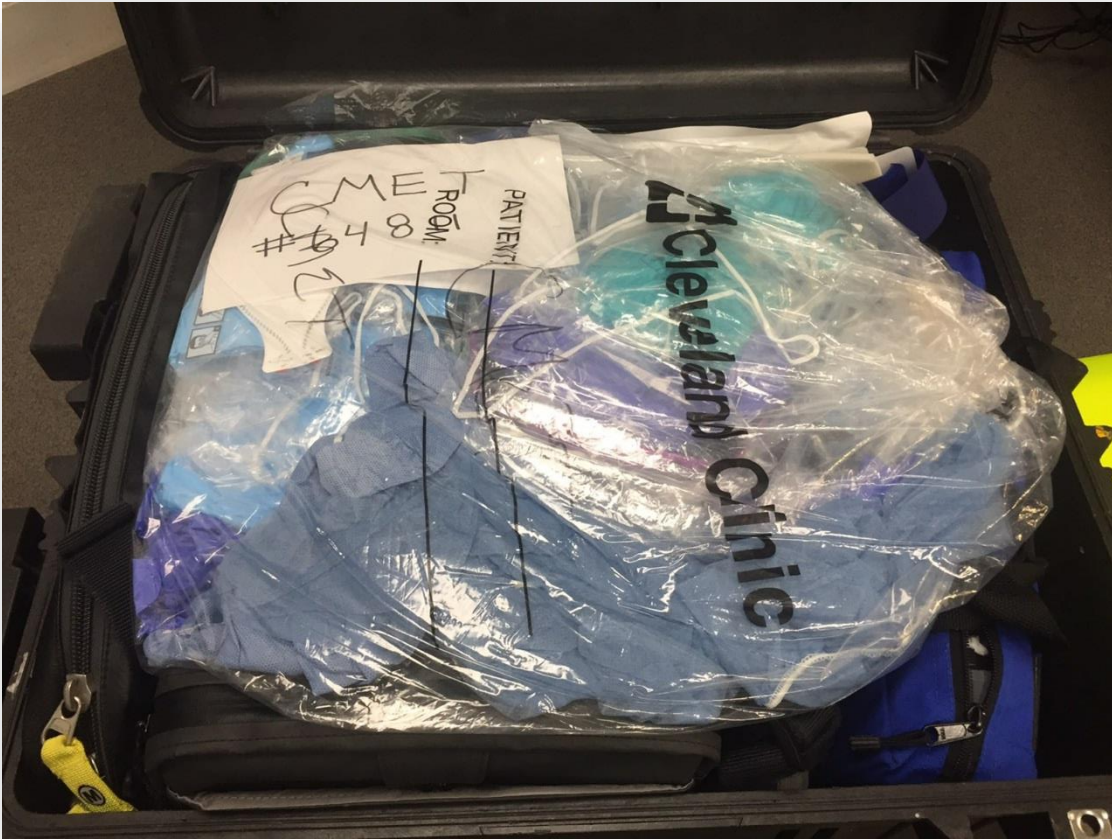
Caregiver Safety

Do Not Bag **Mask**
COVID-19 Positive
or PUI.



**Airway will be
secured as soon
as possible by
most experienced
provider**

Caregiver Safety



Caregivers assigned to **code teams** should have a bag with PPE immediately available and verify availability at the start of a shift.



Caregiver Safety



Responding caregivers **must** have properly applied personal protective equipment (PPE)

- PPE must be on **before** participating in the code **even if this delays care**
- PPE includes: N95 mask, eye protection, gown and gloves

PPE is Required Prior to Responding



Crowd Control: Only those with Direct Responsibilities are Involved in Code



- Inside the room:
 - Medication RN
 - Two Compressors (Until Automated compressor in Use)
 - RT
 - Airway leader
- Outside the room:
 - Provider/Leader (if Possible)
 - Documentation RN
 - **Runners for RT and RN**



Shockable Rhythm (VF/VT)



Place defibrillator and defibrillate if indicated **prior** to compressions



Anterior Placement of Zoll Pads

Zoll ProPadz



Zoll One-Step Pads



Shockable Rhythm (VF/VT)



- Brings Defibrillator and Pads
- Covers Patient's Face
- Places Pads in Sternal/Apex Position (not A/P)
 - **Cannot Roll Patient Alone**
 - **Autocompressor Requires Sternal/Apex**
- Defibrillates (if Indicated)

Defibrillating in Manual Mode



Defibrillating in Analyze/AED Mode



Non-Shockable Rhythm (Asystole/PEA)



- Checks Responsiveness, Breathing and Pulse
- Activates Code Response
- **Places Cloth, Towel, Plastic Barrier or Mask over Patient's Face**
- Begins Chest Compressions Only
- **No BMV at this Time**



Non-Shockable Rhythm (Asystole/PEA)



LUCAS Device: Limiting Caregivers in Room



AutoPulse: Limiting Caregivers in Room



LUCAS 3 Operation

- Manual Compressions in Progress
- Power on LUCAS 3
- Pause CPR Briefly
- Place Yellow Back Plate Under Patient Using Diagram
- Restart Manual Compressions
- Pull Release Rings to Open Claw Hooks, Then Release Rings
- Stop Manual Compressions
- Attach Device to Back Plate
- Push Suction Cup Down to Chest (Immediately Above Distal Sternum).
Adjust if Necessary
- Push Pause to Lock Start Position
- Push Active (Continuous) or Active (30:2) to Start Compressions



Applying the LUCAS Device



LUCAS Buttonology



Vascular Access



Intraosseous (IO) access should be established early if no central line is present or peripheral IVs are inadequate



Termination Of Resuscitation

- Physicians are NOT ethically obligated to deliver care that, in their best professional judgment, will not have a reasonable chance of benefiting patients
- Prolonged or heroic efforts are not recommended



The Pause

“Let us take a moment to pause and honor those lost in the COVID-19 pandemic. They loved and were loved; were someone’s family member and friend. In our own way and in silence let us take a moment to **honor** them.

Let us also **honor and recognize the extraordinary and heroic care** provided by our team.”





Cleveland Clinic

Every life deserves world class care.