

Transportation of COVID-19 Patients: Confirmed or Under Investigation

Last updated: 06-04-2020

Patient transport/movement should be limited to essential medical treatment
(ie consider portable/bedside treatment).

Prior to transporting patient verify:

- * Room is ready.
- * Necessary equipment is available and in working order.
- * Complete handoff has been given to receiving department, including type of PPE needed.

Staff PPE:

- * Airborne/Contact – CAPR & procedure mask; gown; gloves
OR
- * Airborne/Contact/Eye Protection - N-95; gown; gloves
~ goggles – also wear procedure mask over N-95
~ face-shield – N-95 only

Notify Respiratory Therapy (RT)
Respiratory Staff Member will assess all patients on O2 or intubated prior to transport.

Is patient on O2 or intubated?

YES

NO

Patient PPE:

- * Place procedure mask on patient.

Patient PPE: (RT to place/verify)

Nasal Cannula (NC), High Flow NC, Venturi or Non-rebreather (NRB) Mask:

- * Procedure mask over the device to cover patient nose, mouth, and exhalation ports.
- * Ensure a good seal where indicated.

BiPAP or Non-Invasive Positive Pressure Ventilation (NIPPV) Mask:

- * Procedure Mask with face shield placed over the device, not tightly.
- * RT to assess all ports for blockage.

Intubated:

- * Transport ventilator must be used. Ambu bag is used only if vent not available.
- * Viral filter must be in place.

Hallways, elevator path should be cleared of any patients/staff.
House Supervisor/ designee assist.

Transport patient via bed/cart/wheel-chair via the facility pre-designated route.
Clean mode of transport with A3/MicroKill/Fusion prior to leaving the room.