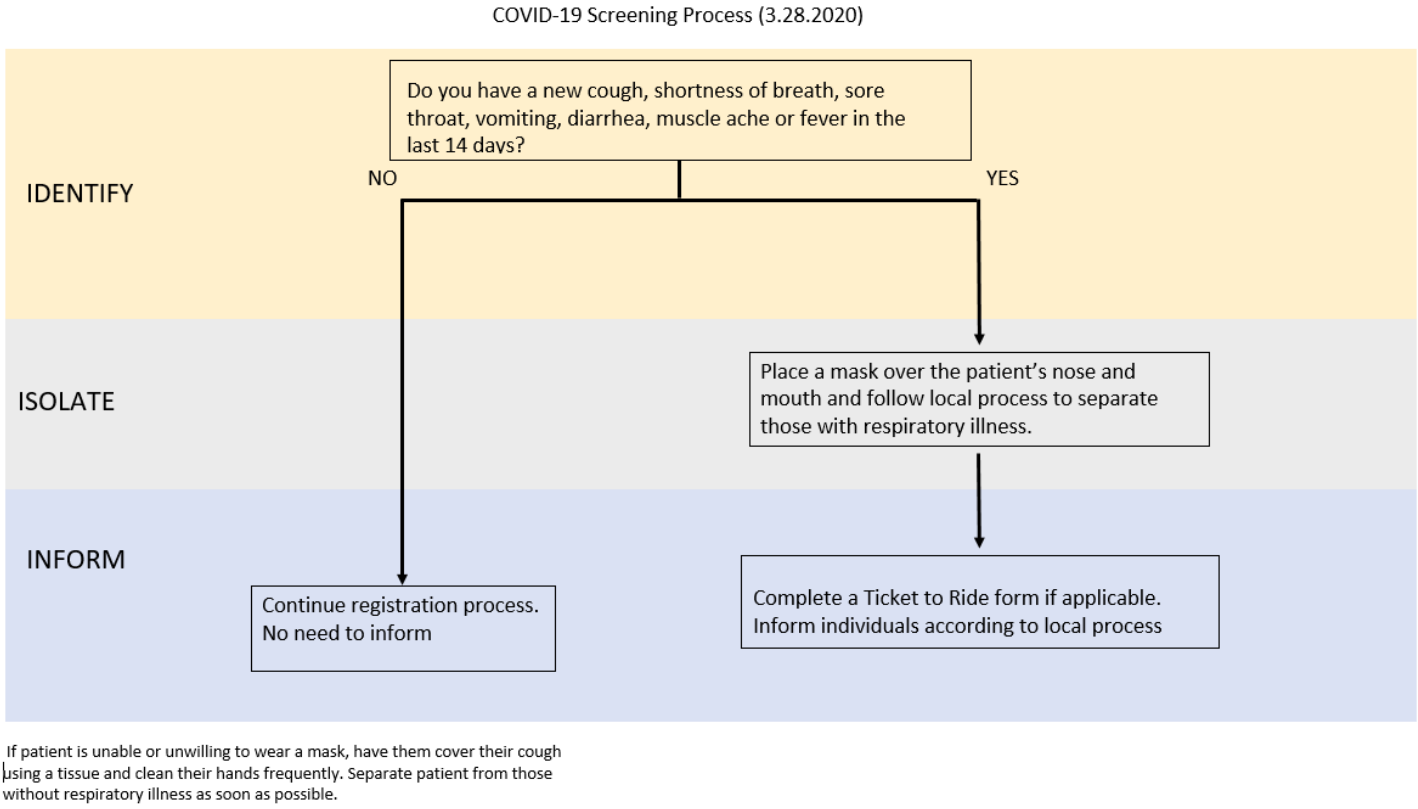
IU Health Inpatient Unit Checklist
For Suspected or confirmed for COVID-19
Updated 4/21/20

Upon ARRIVING to the Unit:

Screening – Should be performed at ED, Registration, or Triage. Use the following screening process if it has not already been done and documented.

- ☐ Screen each person **immediately**, using the following process:



Patients screened suspect or confirmed COVID-19:

- ☐ Ensure mask on patient and family/visitors immediately and instruct on hand hygiene
- ☐ IMMEDIATELY escort to private room.
- ☐ Visitors are not permitted with a suspected or confirmed COVID-19 patient (unless end of life). Visitors should be escorted out of the building.
- ☐ Perform hand hygiene!

- ☐ Patient should be placed in enhanced contact/droplet isolation, place isolation sign on door
- ☐ If aerosolizing procedures are suspected, place patient in negative airflow room (if available), place enhanced contact/airborne isolation sign outside door

- ☐ Place isolation cart outside the room, ensure all PPE supplies are available (masks, N95 respirator, isolation gowns, gloves, and eye protection)

- ☐ Review testing criteria for COVID-19 on team portal.
- ☐ If testing through ISDH, call Indiana Provider Hotline at 317-233-4672 for approval.

PPE Requirements (ALL team members entering room)

- ○ Mask, gown, gloves, eye protection

- For aerosol-producing procedures: N95 respirator or PAPR, gown, gloves, eye protection
- Aerosol generating procedures: N95 respirator or PAPR, gown, gloves, eye protection.
  - Intubation
  - Extubation
  - Bronchoscopy
  - Thoracic Surgery
  - Sputum Induction
  - Cardiopulmonary resuscitation (CPR)
  - Open suctioning of airways
  - Tracheostomy Care in non-intubated patients
  - Noninvasive ventilation (BiPAP, CPAP)
  - High Frequency Oscillatory Ventillation
  - Laser Plume
  - Autopsy
  - Manual ventilation BEFORE intubation
  - Nebulizer treatment (Continuous and Breath Actuated Nebulizer)
  - Cesarean section (Since emergent intubation may be required and is not always anticipated)

*Nasopharyngeal and Oropharyngeal swabs are NOT considered aerosol-generating and therefore will not be done in negative pressure and will not need N95 respirator use.

Room Management

- □ Sign-in Log - place log outside of room.
- □ Ensure all individuals entering the room sign in/out on the log
- □ Keep door closed.
- □ Limit healthcare workers going inside room.
- □ Nurse/PCA to routinely clean/disinfect high touch surfaces and clean/disinfect items after use.
- □ Dedicate equipment in room where possible; if not, disinfect after use
- □ Dedicate bathroom or commode in room

Patient Transportation

- □ Patient should not travel within facility if possible.
- □ Dedicate bathroom, if commode is utilized line with disposable Carebag liner.
- □ Procedures should be done in room when possible to avoid travel to procedural areas.
- □ If travel is necessary, call unit or location to notify in advance with safe handoff and safely transport with appropriate PPE.



Upon LEAVING the Unit: Patient Discharged Home or Transferred

- □ Place mask on patient prior to leaving room and have them wear the mask until they return to their vehicle. Instruct them to stay home until test results are known.

Patient is Admitted

- □ Place a mask on the patient and family/visitors prior to leaving the airflow room and have them wear the masks until they are instructed to remove once they arrive to an inpatient room.
- □ Call unit in advance of travel to new unit to alert them.

After Patient Leaves the Room

- □ Notify EVS of COVID-19 suspected patient room
- □ If patient is in airborne isolation, the negative air flow room must be left empty with the door closed for 45 minutes after the patient leaves the room to allow for adequate air changes prior to EVS performing a terminal clean on the room. For a non-negative room, the room can be cleaned right after discharge.



Equipment coming out of the room must be thoroughly cleaned with an approved low level disinfectant, ensuring equipment stays wet for manufacturer recommended “contact time”

Important Phone Numbers	
Facility –based Infection Prevention 24/7 phone	
Indiana Coronavirus Hotline	317-233-7125 (after hours: 317-233-1325)
Indiana Provider Hotline (to obtain authorization for testing at ISDH laboratory)	317-233-4672 (24/7)
Indiana State Department of Health after hours epidemiologist on call	317-233-1325
IUH Pathology Lab	317-491-6000