

# COVID19 Proned Transport Checklist Supplement

Note: This document is a supplement to the COVID-19 vehicle specific isolation protocol. It is intended to assist in the safe continuation of proning for the transport of COVID-19 patients.

## ACTIONS AT SENDING

### 1. As a team (Prior to making patient contact)

- DISCUSS** optimizing the ventilator strategy
- CONSULT** with sending provider **AND** BMF physician.

Specifically discuss:

Potentially fatal risks of transport

- Unlikely timely re-intubation
- Unlikely successful resuscitation

Weigh risks and benefits of prone transport v. return to supine position.

## 2. Packaging Role (Upon patient contact)

- ASSURE:**
  - All invasive lines are sutured.
  - ETT is well-secured
  - Optimal analgo-sedation then administer NMBA
  
- MONITORING:**
  - EKG (Figure 1), SpO2, BP applied
  - Monitoring cables towards feet*

Note: The purpose of laying the monitoring cables towards the feet, and the IV infusions towards the head is to position lines in the event of an emergency de-proning of the patient.

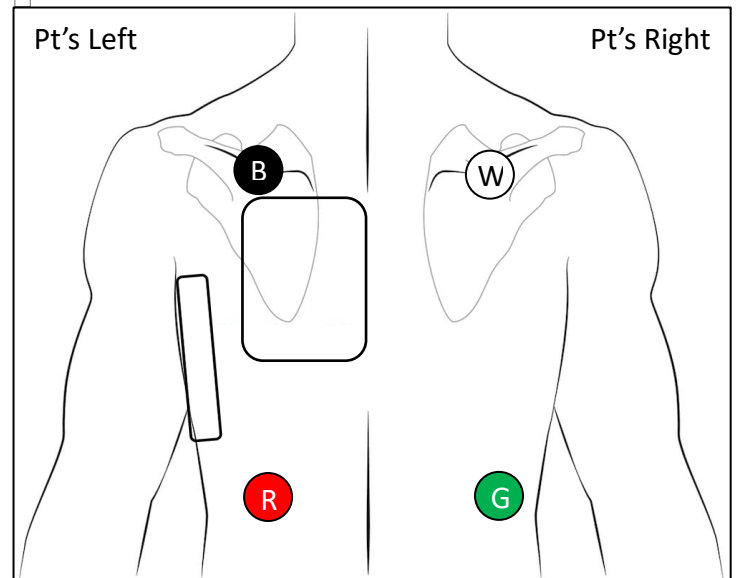


Figure 1: EKG Placement / Defib pad placement

- TRANSITION** IV infusions prn
  - Position IV lines towards the head*
  
- SUCTION**
  - Mouth
  - ETT
  - OGT/NGT
  
- DISCONNECT**
  - ETT in-line suction
  - OGT/NGT suction
  
- POSITION:** Foley and / or rectal drainage bag is at the end of the bed.

### If Intubated:

- EVALUATE** if vent should be transitioned now (Follow COVID19 protocol)

### 3. Report Taking Role (PRIOR to entering room)

- ASSEMBLE** a sufficient number of assistants, usually 5 people at a minimum

Note: This number of people is not just to move the patient, but also to allow enough people if emergency de-proning were to be required during the move.

- BRIEF** the team prior to entering the room
  - Plan to move patient over PRONED
  - We will maintain a full sheet under the patient to allow for de-proning
  - Lines will be moved to the head
  - Monitoring will be at the feet
  - Emergency De-Proning Plan

#### Emergency De-Proning Plan

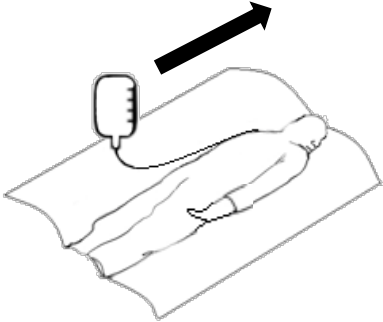
- In the event of extubation:**
  - Vent to standby
  - No BVM ventilations until turn is complete
  - Viral filter to BVM
- INFUSIONS MOVE TO HEAD**
- EDGES TOGETHER:** Edges of sheets will be brought together at the side the patient is facing.
- CHECK LINES AND TUBES**
- REMOVE SLACK:** With edges of the sheets, take out slack
- ROTATE PATIENT:** away from the side the patient is facing.
- EVACUATE:** Minimize people in the room
- MANAGE AIRWAY** if applicable

# Emergency De-Proning Plan

## Unplanned Extubation

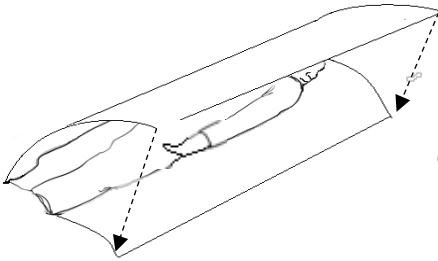
- Vent to standby
- No BVM ventilations until turn is complete
- Viral filter to BVM
- Evacuate room prior to re-intubation

1

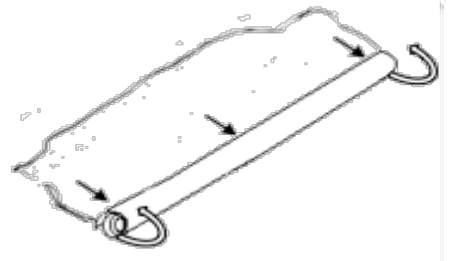
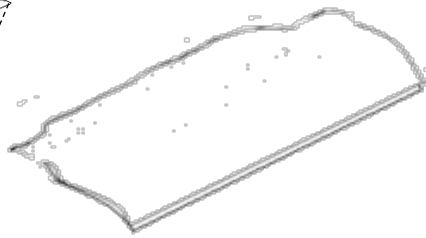


- INFUSIONS MOVE TO HEAD
- VISUALIZE LINES AND TUBES

2

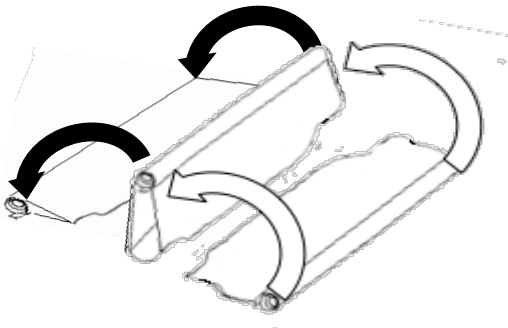


- EDGES TOGETHER:**  
Edges of sheets will be brought together at the side the patient is facing.



- REMOVE SLACK:**  
With edges of the sheets, roll to take out slack

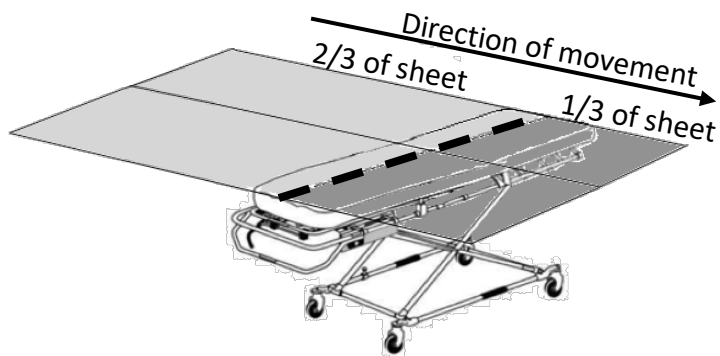
3



- ROTATE PATIENT** away from the side the patient is facing.

## 4. Patient Movement

- Use a slideboard if at all possible.
- PREPARE** sheet on BMF stretcher
  - Lay sheet (or sheets) open on the stretcher
  - 2/3 of the sheet should be on the side that will be touching the patients bed.
  - Roll and tuck the sheet beneath the stretcher mattress to hold it in place during the move.



Tuck sheet beside/under mattress

- DESIGNATE**
  - BMF provider as the movement team leader
  - BMF manages the ETT during movements.
  - Two people to each side of the bed for the patient movement.
- INCREASE** the FiO<sub>2</sub> to 1.0
- INFLATE** the bed
- SLIDE TO EDGE:** Using the slide board and the bedsheet, move the patient as a unit to the edge of the bed and **STOP**
- ASSURE** that there is no tension on any line, device, or monitor.
- COMPLETE** the move to the stretcher
- TRANSITION** to BMF T1 if not done so at this point (Follow COVID19 procedure with minimal staff present)

## 5. Post-Movement Care

- TURN** the patient's face towards the patient's right shoulder
- CONFIRM**
  - ETT position, and ventilator function
  - IV tubing, connections, and function
  - FiO2 to initial setting
- PADDING**
  - Place chux or towel under patient's face
  - Support the face**
    - Avoid any contact with the orbits or the eyes.
    - Place a rolled towel under the head to support the patient's orbit and eye and keep them free of the bed surface.
    - Avoid over extension of the neck with positioning
  - Support the shoulders**
  - Support the pelvis**
    - For male patients ensure genitalia are not being compressed between the patient's legs or by the pelvic pad/pillow
  - Support the shins**



- UNTUCK the emergency turning sheets from the mattress and make accessible from right side of patient.***
- SECURE** the patient to stretcher using traditional straps.

## ACTIONS IN TRANSPORT

### A. Prior to departure

- REVIEW**
  - Emergency de-proning procedure
  - REVIEW Unplanned extubation plan
  - Prone CPR hand placement
- CONFIRM**
  - Accessibility of the turning sheet
  - Accessibility of the push line

### B. Enroute

- CONFIRM**
  - BMF Communications Center will notify the receiving unit of patient's prone status
  - IF GOING TO ED: Notify that "Patient is in prone position" during CMED patch.

## ACTIONS AT RECEIVING

- Use a slideboard if at all possible.
- Roll the turning sheet on both sides of patient, and use for patient movement.*

Note: This will allow the sheet to be used for emergency de-proning on the receiving bed if it becomes necessary.

- DESIGNATE**
  - BMF provider as the movement team leader
  - BMF manages the ETT during movements.
  - Two people to each side of the bed for the patient movement.
- INCREASE** the FiO<sub>2</sub> to 1.0
- CONFIRM** that there is no tension on any line, device, or monitor.
- COMPLETE** the move to the bed
- TURN** the patient's face towards the patient's right shoulder
- CONFIRM**
  - ETT position, and ventilator function
  - Tubing, connections, and function
  - FiO<sub>2</sub> to initial setting