

Primary Percutaneous Coronary Intervention (PPCI). Pathway for a suspected/confirmed Novel coronavirus (2019-nCoV) infection Primary Admission

CCU nurse receives a Primary Call from SECamb.
Ask if the patient is suspected or confirmed COVID?
Ask if the patient has a recent cough or fever?
Ask for patient's temperature, RR and O2 sats?
Any Recent contact with someone with COVID like symptoms?

In Suspected / confirmed COVID: CCU nurse discusses case with on call reg.
If for pPCI, CCU takes contact details for paramedic crew to confirm cath lab access and instructs crew to wait outside ED.
When further instructed to take the patient to the cath lab via Millennium entrance.
Advise crew to access medical help from ED whilst waiting (if needed urgently).

Nurse taking the Primary Call
Informs ED that a patient is on route with STEMI.
Informs ED of COVID risk
Informs the On Call team (as usual) and informs them OF COVID Risk

SECamb bring patient to ED car park and wait until CCU inform to proceed to Millennium wing entrance.
If patient unstable needing urgent clinical input, paramedic crew to liaise with ED team and follow ED procedures

Patient to remain in the ambulance until the on call team are ready.
Cath lab staff Full PPE-L3 with Donning and Doffing.
CCU team to inform SECamb when cath lab ready.
Surgical mask to be worn by the patient
CCU nurse puts on L2 PPE to escort the patient from Millennium Wing entrance to lift.
Presses lift button for floor 7 and holds lift door open from outside Lift.
Patient and crew only enter Lift.

Patient to be transferred to a side room on Albion Ward or 6a if low probability of COVID post procedure.
Covid Swabs and portable chest x-ray to be performed ASAP.
More detailed Covid Risk assessment done by medical staff.
Document if patient is COVID(Red)/Suspect COVID(Red/Amber)/ NonCOVID (Green)