



VENTURA COUNTY HEALTH CARE AGENCY

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Last Approved: 4/6/2020
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Owner: Tracy Chapman: VCMC - Med Staff
Policy Area: COVID-19
References:

COVID-19 Trauma Activation Policy

COVID-19 Trauma Activation Considerations and Guidelines

Trauma patient evaluation should *not* be delayed to determine COVID-19 status, however appropriate precautions should be taken. Emergency Medical Services (EMS) personnel may have such screening information, already. If not, all trauma patients should be screened according to policy, and appropriate isolation measures must be taken. Documentation of screening should occur in emergency department (ED) physician and trauma history and physical notes.

Ensure strict use of personal protective equipment (PPE) for droplet contact precautions for ALL trauma patients (hat, gown, mask, gloves, and eye protection).

- If patient is **able** to be screened for Covid-19 and has a negative screen, patient can be **cleared** of empirical use of PPE.
- If patient is **unable** to be screened, **strict** use of PPE for droplet contact precautions should be maintained.
- If patient screens positive or is suspected of having Covid-19 before or during activation, N95 mask use / airborne precautions will be initiated by staff, and immediately place a face mask on the patient *if airway is clear*.
- If patient requires intubation, COVID-19 precautions will be followed, as directed by ED physician / anesthesia.

To minimize the number of personnel at the bedside to only those required for direct patient care, only essential members of the trauma team necessary to ensure proper delivery of timely care, will be needed in the trauma bay per code yellow case. All others will remain outside of room and available as needed.

Tier 1 team in room: ED physician, 2 Residents (Resident running code and Airway Resident; added residents can join if further help is needed), 1 RN, and 1 Trauma Attending (**5 staff**) [Note: Scribe will be close to door, and will not be considered part of main team. If intubation is required, Respiratory Therapist and other required staff would step in].

Tier 2 team in room: ED physician, 1 Resident (Resident running code; added resident(s) can join if further help is needed), 1 RN, and 1 Trauma Attending (**4 staff**). Same as above for extra staff, as needed.

Tier 3 consult: Emergency physician evaluates patient with / without RN; on call Trauma Resident is summoned to evaluate patient; on call Trauma Attending eventually evaluates patient.

**Additional staff may enter and treat patient when COVID-19 screening has been addressed.*

*** Modified PPE will be available – i.e. Garbage bag cut outs for head and arms, as well as surgical sleeves. While modified gowns will be eventually discarded, eye protection and shields can be cleansed with recommended Health Care Agency (HCA) policy wipes, and made available for the next case.*

****Defer to ED / anesthesia policy and procedures for airway management of potential COVID-19 patients requiring intubation.*

*****While emphasis has been placed on moving trauma patients quickly, strict adherence to this COVID-19 policy will ultimately add time to the overall initial evaluation of patients.*

All revision dates:

4/6/2020

Attachments

No Attachments

Approval Signatures

Step Description	Approver	Date
PolicyStat Administrator	Jason Arimura: Director-Pharmacy Services	4/6/2020
Policy Owner	Tracy Chapman: VCMC - Med Staff	4/6/2020

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