



Imaging Emergency Department patients during the COVID pandemic



CONFIRMED OR SUSPECTED COVID

Tested Positive or meets current suspected case definition of COVID

Avoid imaging unless it will make a significant change to management of patient

If in doubt discuss with ED consultant, senior registrar or respiratory COVID consultant

CXR / Plain X-rays

**ILI dedicated
Portable X-ray Machine**

If not appropriate transfer directly to
Radiology Room 3
Notify Nursing, HSAs and Radiology staff to coordinate transfer

Droplet or aerosol PPE depend on patient location and management

Consider Ultrasound by qualified personnel

CT / MRI / US scans

Must be requested by ED or Resp COVID consultant and approved by Radiology

Consider delay until COVID screen is back if not yet confirmed

Notify Nursing, HSAs and Radiology staff to coordinate transfer

TRANSFER PROTOCOL
Transfer team requires fresh PPE

Inform target destination prior to transfer; keep non PPE others > 2m from bed

If transferring with nasal prongs cover their face with a surgical mask or Hudson mask

NOT COVID

COVID not considered a realistic differential

Minimise Imaging where possible.

If COVID status changes contact Radiology immediately

Plain X-rays

Routine procedure

CT / MRI / US scans

Routine procedure

NOTES

Radiology Room 3
Will be available for patients in whom COVID is confirmed or suspected to ensure appropriate cleaning as well as flow through other rooms

Portable X-ray Machines ILI machine

One will be dedicated to higher risk patients in Observation ward and the AIR (airborne infection isolation room) and will require appropriate cleaning

Resus machine

The other will be dedicated to resuscitation and low risk patients in the remainder of the department

ILI – influenza like illness