

MODIFIED ALS ALGORITHM DURING COVID PANDEMIC RESPONSE (v2.3)

	RED	ORANGE		GREEN	
	ANY COMMUNITY RISK	MOD / HIGH COMMUNITY RISK	NO / LOW COMMUNITY RISK	MOD / HIGH COMMUNITY RISK	NO / LOW COMMUNITY RISK
PREFERED AREA	ISO/T1	T1 / ISO	T1 / ISO	T2 / (T1)	T2 / (T1)
AIRWAY TEAM	AIRBORNE PRECAUTIONS N95	AIRBORNE PRECAUTIONS N95	AIRBORNE PRECAUTIONS N95	AIRBORNE PRECAUTIONS N95	AIRBORNE PRECAUTIONS N95
OTHER TEAM (<1.5m)	AIRBORNE PRECAUTIONS N95	AIRBORNE PRECAUTIONS N95	DROPLET PRECAUTIONS SURGICAL MASK	DROPLET PRECAUTIONS SURGICAL MASK	DROPLET PRECAUTIONS SURGICAL MASK
OTHER TEAM (>1.5m)	AIRBORNE PRECAUTIONS N95	AIRBORNE PRECAUTIONS N95	DROPLET PRECAUTIONS SURGICAL MASK	DROPLET PRECAUTIONS SURGICAL MASK	DROPLET PRECAUTIONS SURGICAL MASK

MODIFIED ALS ALGORITHM

Passive Oxygenation: only use Hudson mask 8L/min until definitive airway

Compression-only CPR until definitive airway

During defibrillation switch off O₂at flowmeter instead of removing HM

Consider passive BVM with good seal (2 handed technique) and viral filter. Do not 'bag' the patient

Stop chest compressions airway placement until position confirmed and viral filter attached

One attempt at tracheal intubation only by most experienced intubator, then move to LMA

Bougie likely to be heavily contaminated, be careful

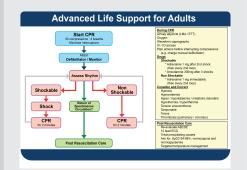
If LMA placed CPR:Vent 30:2. Do not do compressions during ventilation with LMA

Consider plastic sheet to cover patient's face post LMA insertion to reduce aerosolised particles

Otherwise follow usual ALS algorithm

Following ROSC, consider transition from LMA to ET tube in ICU

STANDARD ALS ALGORITHM



IMPORTANT

CHEST COMPRESSIONS AND DEFIBRILLATION ARE NOT AGPs Commence immediately in arrest whilst others don PPE

SCGH Consultant Group 31/01/21 v2.4