



Supplementary Material

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Table i. COVID 19 remobilization guidance.

	COVID 19 Remobilisation Guidance- Aide memoir		
	Low (Green) Risk Pathway Standard Infection Control Precautions and Extended Use of FRSM	Med (Amber) Risk Pathway Droplet and Airborne Precautions and Extended Use of FRSM	High (Red) Risk Pathway Droplet and Airborne Precautions
Pathway Definitions	Any care area where: a) triaged/clinically assessed individuals with- <ul style="list-style-type: none"> • no symptoms • no known recent contact with a COVID-19 case • who have limited social contacts, followed strict physical distancing and 	Any care area where: a) triaged/clinically assessed individuals with- <ul style="list-style-type: none"> • no symptoms and do not meet the criteria for GREEN or RED PATHWAYS OR b) testing is not required or feasible on asymptomatic	Any care area where: a) confirmed COVID-19 positive individuals OR b) symptomatic/ suspected COVID-19 individuals OR c) Those who have had contact with a confirmed

	<p>hand hygiene guidance for 14 days prior to surgery.</p> <p>AND</p> <ul style="list-style-type: none"> • have a negative COVID-19 test up to 72 hours* of treatment defined by speciality • and, for planned admissions, have self-isolated from the test date /or other date defined by speciality. <p>OR</p> <p>Recovered from COVID 19*See de-escalation advice on COVID HUB. Discuss with Cons Microbiologist</p>	<p>individuals and infectious status is unknown</p> <p>OR</p> <p>c) asymptomatic individuals who decline testing</p>	<p>COVID 19 case and still within 14-day isolation period and those who have been tested and result awaited.</p> <p>OR</p> <p>d) Individual who has returned from a country on the quarantine list in the last 14 days</p> <p>OR</p> <p>e) untriaged/non assessed individuals where symptoms are unknown</p> <p>OR</p> <p>f) Symptomatic individuals who decline testing</p>
	<p>Elective surgery Planned Endoscopy/Colonoscopy</p>	<p>Provided the patients have NO SYMPTOMS- Emergency/Urgent admits/Interhospital transfers/OPD clinics/ OPD Radiology/OPD Cardiac Services</p>	<p>Emergency admits (with symptoms or unable to assess) Any area with a confirmed /suspected patient</p>
Patient wears a FRSM	<p>Yes, when out with patient room or in a communal clinical area e.g. PACU. If oxygen mask worn this is not required.</p>	<p>Yes, when out with patient room or in a communal clinical area e.g. PACU. If oxygen mask worn this is not required.</p>	<p>Yes, if tolerated and it does not compromise their care. If oxygen mask worn this is not required.</p>
Pathway door notice	<p>YES</p>	<p>YES</p>	<p>YES</p>
Care Standard	<p>Not required</p>	<p>Not required</p>	<p>Required</p>

Patient Placement		Isolation not required unless the patient has another alert organism/condition. Waiting areas/Discharge lounges seating must comply with physical distancing	Inpatients-Isolate in a single room /Consult room Waiting areas/Discharge lounges seating must comply with physical distancing	Isolate in Single room/Consult room
PPE Direct Patient Care (Non-AGP)	Gloves	If contact with blood and body fluids (BBF) anticipated - wear single use gloves	If contact with blood and body fluids anticipated - wear single use gloves	During all direct contact wear single use gloves
	Apron	If contact with patient, their environment or BBF anticipated - wear single use apron. If extensive splashing is expected - wear single use gown	If contact with patient, their environment or BBF anticipated - wear single use apron. If extensive splashing is expected - wear single use gown	During all direct contact (within 2 metres)-wear a single use apron. If extensive splashing is anticipated -wear a single use gown.
	FRSM	Sessional use of Fluid Resistant Surgical Masks Type IIR to be worn in clinical areas	Sessional use of Fluid Resistant Surgical Masks Type IIR to be worn in clinical areas	Wear Type IIR FRSM for all direct contact. Single Use
	Eye Face Protection	If splashing or spraying with BBF anticipated - wear single use Eye/face protection	If splashing or spraying with BBF anticipated - wear single use Eye/face protection	During all direct contact (within 2 metres) wear eye/face protection
AGP PPE	Gloves	Wear single use gloves	Wear single use gloves	Wear single use gloves
	Apron/Gown	Wear single use apron. If extensive splashing is expected - wear single use gown	Wear single use gown	Wear single use gown
	FFP3	FFP3 not required. Sessional use of Fluid Resistant Surgical Masks Type IIR to be worn in clinical areas.	Wear single use FFP3	Wear single use FFP3

	Eye & Face protection	Wear single use eye & face protection	Wear single use eye & face protection	Wear single use eye & face protection
	Post AGP fallow time	Not applicable	Post AGP fallow time required, this time is based on air changes. During this time airborne precautions are still required. Min droplet settling time before cleaning can commence is 10 mins	Post AGP fallow time required, this time is based on air changes. During this time airborne precautions are still required. Min droplet settling time before cleaning can commence is 10 mins
Critical Care		Don PPE as per Direct Care and AGP PPE for a green pathway.	Due to the risk of inadvertent circuit break during ventilation, staff performing "hands on care" will don AMBER AGP PPE prior to entering the patient's room while a patient is ventilated and during any other AGPs.	Staff will don RED AGP PPE prior to entering the patient's room.
Operating Theatres		Routine SICPS apply (unless other alert organism) No Post AGP fallow time required Patients can be recovered in a green recovery	Inform theatres of patients on amber pathway in advance. Admit straight to theatre Recover in theatre or designated amber recovery Cath Lab - Do not recover in recovery bay	Inform theatre of patients of red patients in advance. Admit straight to theatre Recover in theatre Cath Lab - do not recover in recovery bay
Care of Linen		Standard Infection Control Precautions	Manage as infectious linen	Manage as infectious linen
Care of Waste		Standard Infection Control Precautions	All waste generated is healthcare waste	All waste generated is healthcare waste

Care of The Environment	<p>Unless isolation required for another alert organism/condition-</p> <ul style="list-style-type: none"> - Detergent and water routine daily clean - Routine discharge clean with detergent and water -Spillages of blood and body fluids as per policy 	<ul style="list-style-type: none"> - Fans cannot be used in rooms - Twice daily cleaning and Terminal clean required using 1,000 ppm Actichlor Plus in inpatient rooms. - 4 hrs between twice daily cleans - OPD patients, clean horizontal surfaces and equipment with 1,000 ppm Actichlor plus when patient leaves. - Curtain change not required 	<ul style="list-style-type: none"> - Fans cannot be used in rooms - Twice daily cleaning of patient rooms required using 1,000 ppm Actichlor Plus - 4 hrs between twice daily cleans - Terminal clean with 1,000 ppm Actichlor Plus on resolution of symptoms/transfer or discharge - Curtain change <u>required</u>
Care of Equipment	<p>As per SICPs Detergent clean of patient equipment Spillages of blood/body fluids as per policy</p>	<p>Single use items where possible Reusable items should be dedicated to the room Where this isn't possible decontaminate between patients with 1,000 ppm Actichlor Plus</p>	<p>Single use items where possible Reusable items should be dedicated to the room Where this isn't possible decontaminate between patients with 1,000 ppm Actichlor Plus</p>
Visitors (where permitted)	<p>Named visitor/Visitor to wear face covering Visitors must not have symptoms or be self-isolating</p>	<p>Named visitor/Visitor to wear face covering Visitors must not have symptoms or be self-isolating</p>	<p>Essential Visitors/Visitor to wear FRSM or FFP3 (if visiting during/ following an AGP). Visitors must not have symptoms or be self-isolating.</p>
Transport to /from hospital	<p>GREEN AND AMBER PATHWAY</p> <p>Transport to hospital</p>		<p>RED PATHWAY</p>

- Use of a car from within the same household
- Use of a car from family / friends bubble
- Use of hospital provided transport
- Use of private transport

And only when all of the above have been exhausted the use of public transport is considered.

The link below gives further guidance for patients and families utilising public transport.

<https://www.gov.uk/guidance/coronavirus-covid-19-safer-travel-guidance-for-passengers>

NB Air travel will break social precautions and self-isolation.

The overall aim is that exposure to a potentially infectious patient is minimised during transport to and from hospital.

- Public transport and private commercial vehicles should not be used. The patient should not walk to hospital.
- The patient should be given clear instructions on what to do when they get to the hospital to minimise risk of exposure to staff, other patients and visitors.
- If the patient is driving their own car, they may drive to the hospital providing the hospital is aware and has arranged to meet them and ensure a secure route from the car to an isolation room (no waiting in communal areas).
- If the patient is accompanied by someone else with their own car, that person can transport the patient, provided and that person has already had significant exposure and is aware that the patient has possible/confirmed COVID-19 and is content to transport the patient. The patient should-
 1. Sit in the rear of the car, wear a face mask (and driver should)
 2. The car should be well ventilated with an open window.
 3. Ensure the patient has a supply of tissues and a waste bag for disposal for the duration of the journey.

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| | | <ol style="list-style-type: none">4. The waste bag should then be disposed of at the destination, either as clinical waste if going to hospital, or taken into their house and held for a period of 72 hours before disposal with general household waste if returning home.5. If none of the above are possible, the Scottish Ambulance Service (SAS) should be contacted to arrange transport. Inform the SAS that the patient meets the case definition for possible COVID-19 |
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