**Algorithm for Transfer to OR-B for Code 33/STAT GA CS for Droplet/Aerosol Precautions**

**Decision for STAT (CRASH) CS under GA**
RN or TL/Charge RN – pull emergency cord & call for “PROTECTED CODE 33 and CODE AIRWAY” (ext 5555)

**Primary RN**
- Place mask on patient

**Team Leader/Charge RN**
- Lay out N95 Masks (Jones Cart in OR Corridor)
- Get Ancef 2-4g
- Call for 2nd RN to transfer
- Call for Surgical Assist

**Scrub RN**
- Don N95 + PPE in Sterile OR Corridor
- Opens instruments

**OB (Resident)**
- Call for Staff OB

**OB (Staff + Resident)**
- Don N95 + PPE in Sterile OR Corridor
- If resident helps with transfer, can Don N95 after prep

**ANESTHESIA**
- Call for 2nd Anesthesia (x7878) for back up if “Code Airway” not called
- Don N95 + PPE in Sterile OR Corridor
- Prepare OR-B

**ANESTHESIA**
- Prepare for RSI with paralysis, glidescope.
- Preoxygenate for 5min using 2-Hand technique
- AVOID manual ventilation if possible

**BURRT / NICU RESUS TEAM**
- Don N95 + PPE in Sterile OR Corridor
- Prepare baby warmer
- If twins, arrange for 2nd warmer to be brought into OR-B
- See NICU COVID Algorithms

**BURRT / NICU RESUS TEAM**
- If no Code Airway Team or 2nd Anesthesia, BURRT will help Anesthesia
- NICU Resus Team in OR to receive baby
- NICU Transfer Team assemble outside of OR until delivery of baby

**Transfer to OR by Primary RN + Second RN (Third RN to open doors)**

**Circulating RN**
- Leave OR after patient transfer
- Doff PPE in anteroom
- Don N95 + PPE in sterile OR corridor
- Re-enter OR
- Count with Scrub RN

**Second RN**
- Leave OR when Circulating RN returns
- Doff PPE in anteroom
- Don N95 + PPE in sterile OR corridor
- Enter OR, document / makes calls

**Third RN**
- Take bed back to room

**OB (Staff or Resident)**
- Prep & insert foley
- Leave OR
- Doff yellow gown + gloves

**OB (Staff + Resident)**
- Don N95 + Face Shield + Bouffant + Shoe Covers (no gown) in sterile OR corridor (if not already done)
- Scrub
- Enter OR
- Drape patient

**TIME OUT**
Confirm appropriate PPE for all persons in OR
All persons (except Anesthesia and RN/Assistant/BURRT) stand as far as possible (>2m) for intubation

**IF CORD PROLAPSE, 2nd RN dons N95 + PPE and switches place to relieve pressure on cord**
CS STARTED & COMPLETED
Patient is cleaned, RN to call to TL/Charge RN to have Transfer Bed outside of OR-B

Documenting RN
- Leave OR-B
- Doff yellow gown + gloves in anteroom
- Don new yellow gown + gloves
- Receive baby from BURRT and transfer baby out

Scrub RN
- Push dirty instruments into anteroom
- Doff surgical gown + gloves in anteroom
- Don yellow gown + gloves and push instruments into dirty utilities
- Doff yellow gown + gloves in dirty utilities

Circulating RN
- Remain in OR-B

OB (Staff)
- Leave OR
- Doff everything in anteroom
- Change scrubs

OB (Resident)
- Remain in OR-B

ANESTHESIA
- Induction & Intubation (See Induction Airway Management Protocol)
- Call out “Ok to Start CS”

ANESTHESIA
- Exubation only with Anesthesia/RN/OB Resident
- Follow Exubation Protocol
- Call Rapid Response/ICU (x5555) if not able to extubate
- Monitor patient in OR-B (O2 Sat >92% with O2 support for 5-10min)

OB (Resident)
- Assist with transfer onto bed
- Leave OR-B
- Doff PPE in anteroom
- Change scrubs

Circulating RN
- After transfer onto bed, leave OR-B
- Doff yellow gown + gloves
- Don new yellow gown + gloves in OR corridor
- Re-enter OR

ANESTHESIA
- Assist with transfer on to Bed
- Place mask on patient
- Dispose syringes, soda lime, circuits etc... appropriately.
- Once Circulating RN returns, leave OR-B
- Doff gown + gloves in anteroom
- Don new gown + gloves
- Re-enter OR

OB (Resident)
- Assist with transfer onto bed
- Leave OR-B
- Doff PPE in anteroom
- Change scrubs

ANESTHESIA
- Doff gown + gloves in room ; Doff N95 + upper body PPE in anteroom in OR-B
- Change scrubs

ANESTHESIA
- Doff gown + gloves in room ; Doff N95 + upper body PPE in anteroom in OR-B
- Change scrubs

BURRT / NICU RESUS TEAM
- If no Code Airway Team or 2nd Anesthesia, BURRT will help Anesthesia
- After intubation, leave OR
- Doff yellow gown + gloves in anteroom
- If 2nd BURRT available, they will enter OR to assist with Resus Team.

NICU RESUS/TRANSFER TEAM
- In OR to receive baby

NEONATAL RESUSCITATION
DO NOT ENTER RESUS ROOM
- Initial steps & airway stabilization in OR-B
- If extensive resuscitation & stabilization required, go to M5-411; otherwise, complete transfer to NICU POD A-negative pressure room
- NICU Transfer Team to transfer baby

- If no resus or transfer to NICU required, BURRT and NICU Resus Team leave OR-B once baby transferred
- Doff PPE in anteroom

TRANSFER TO: LABOUR & DELIVERY ROOM OR ISOLATION PACU BED
Patient should wear NP (<4L/min) or Face Mask (<5L/min) with surgical mask on transport
Team Leader / Charge RN to ensure that OR-B has 2-Stage Cleaning + call Housekeeping Supervisor (x4555)

Circulating RN
- Doff PPE after transfer to postpartum RN
- Change scrubs

ANESTHESIA
- Doff gown + gloves in room ; Doff N95 + upper body PPE in anteroom in OR-B
- Change scrubs

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