

COVID-19 COMBINED TEAM HUDDLE



People

- Anaesthetist 1 / anaesthetist 2 / anaesthetic nurses (inside + out)
- Surgical consultant (mandatory) / Surgeon 2
- Scrub / scout / runner
- Radiographer (are they needed the whole case?)
- Are OAs required?

Protection

- Confirm PPE standards for all OT staff
- Anaesthetic Aerosol Generating Procedures? (intubation, extubation)
- Surgical Aerosol Generating Procedures? (e.g. laparoscopy, reaming)
- Lead gowns needed underneath PPE?

Full aerosol PPE precautions for all remaining OT members until 30 mins after last AGP

Procedure

- Non-COVID related concerns + high risk moments?
- Set up / hardware / drains / sutures / specimens
- Local anaesthesia + special antibiotics?
- Other drugs (TXA, heparin, dyes)

Position

- Patient position
- Operating table (Jackson / Andrews etc)
- Equipment (slides, J-boards, angle bar, stirrups, etc)
- Managing breathing circuit disconnections (e.g. on proning)

Patient

- Concerns? / difficult airway? / ventilation / haemodynamics / other?
- Bleeding risk? Have a low threshold for G+H +/- X-match
- Resus status? Are we setting any limits?
- Disposition - ICU? Intubated or extubated?

Reinforce these practice points:

- All staff to ensure good hydration / food / toilet before case / personal possessions out.
- Use "Buddy System" for PPE checking at regular intervals. Speak up if any concerns.
- Limit entry / exit of team members throughout the case.
- Closed loop communication + limit unnecessary noise.
- At extubation, scrub team must be outside + surgeons contactable (number on whiteboard)
- Team leader to arrange debrief after every case

COVID-19 ANAESTHETIC BRIEF



Roles

- Do we need a 2nd anaesthetist?
- If so, what will be their role? (TL, drugs, adjusting flows etc)
- Role of anaesthetic RN inside (equipment, bagging, cricoid?)
- Role of anaesthetic runner outside (equipment, getting blood/ABGs)

Airway

- Airway plan? Rehearse steps: preox, induction, airway sequence
- Hyper-angulated scope / fiberoptic needed?
- Location of SGAs + CICO kit?
- How will we manage an aspiration?

Equipment

- Infusion pumps? How many?
- Fluid warmer (x2?)? Bair hugger?
- Ultrasound? Defibrillator?
- Art line? CVC? Entropy? Temp probe? Nerve stimulator? Gastric tube?
- Standing stool? Chairs?

Drugs

- Induction + extubation drugs?
- Antibiotics, adjuncts + analgesia?
- Infusions?
- Emergency drugs?

Extubation

- Remain intubated: In-line suction needed? / Doff-redon procedure?
- Extubate: Scrub team out, anaesthetist stays until fully awake

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Forms

- Pre-fill pathology / G+H / blood collection / PCA forms?
- Patient stickers on blood tubes?
- Photocopy forms: notes / results / check-in / consent?
- Single-use pen + paper for note-taking

Human Factors

- Glucose / hydration / toilet / personal possessions out
- *Cognitive aids + checklists* available
- Comms plan (set up phone / whiteboard etc)
- Agree to perform regular buddy checks.