**Cardiac arrest – Procedure (cath labs)**

**Staff protection - \*\*Blue scrubs only in labs\*\***

**Number 1 and 2 Operator** - FFP3 mask / reusable full PPE mask, visor, thumb loop gown, sterile gloves

**Running nurse, radiographer and physiologist** - Surgical face mask, visor, plastic apron over lead apron and gloves

**In the event of a cardiac arrest**

* The radiographer moves X-ray table down and out, pulls crash button on wall. Meanwhile the physiologist delivers 1-3 shocks (depending on cardiac rhythm). 2nd operator asks if all staff are wearing full PPE. If **not**, radiographer isolates X-ray equipment. The running nurse, physiologist and radiographer doff their plastic apron and gloves, (place in clinical waste bag), exit via X-ray room double doors, remove visor and mask in dirty utility room. Remain in lead PPE. Don full COVID-19 PPE (FIT tested mask, visor, thumb loop gown, gloves).
* Scrubbed staff can commence chest compressions only if all staff are wearing full PPE or once all staff leave the lab.
* Radiographer, running nurse and physiologist return to lab via scrub up room. Radiographer enables X-rays.
* Meanwhile, the CCU nurse (clean nurse) activates a 2222 call.  
  **Suspected = Cardiac arrest Positive = HCID cardiac arrest**
* Once staff are wearing full COVID-19 PPE, the running nurse will assist the patient’s airway and provide oxygen via an appropriate face mask 15 l/min.
* The team continues with CPR.
* Coordinator sign posts staff to lab.
* HCA ensures adequate PPE available for crash team and assists donning, plus maintains strict control of entry / exit to labs.
* Porter moves arrest team leads outside arrest lab.
* Clean radiographer collects Autopulse (if required) and ensures all staff entering the lab wear lead PPE.

**End of procedure**

* Inform the receiving ward that the patient is on their way.
* Transfer patient as per [up to date trust policy](http://gti.gstt.local/clinical/directorates/grida/directorate-services/infection/infection_prevention_control/wuhan-novel-coronavirus/internal-patient-transfer-protocols-for-covid-19.aspx).
* Transfer patient with appropriate monitoring equipment.
* All staff: Clean lab and lead PPE.

If resuscitation is unsuccessful, remain in full PPE until patient is laid out. Wait 20 mins inside the lab before doffing PPE.

Ambulance crew: Staff are met at the main department doors and given overshoes, PPE mask and gloves from grey cupboard (opposite women’s changing room). The crew will take patient into Lab 3 (or recovery if Lab 3 is occupied or needs assessment) and assist with patient transfer onto the X-ray table.

**N.B.** PAMI+ patients arriving on Lucas 3 will be intubated, and must be met and treated wearing full PPE. Ambulance crew to remain in department, to operate device, if required.