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	Page Number:	1
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	Document Title:	<b>GUIDELINES IN MANAGEMENT OF COVID-19 PATIENTS AT THE DESIGNATED ISOLATION FLOOR</b>

## PURPOSE


To reduce the risk of transmission of the virus that causes COVID-19 or other infectious disease from the patient to the Pediatric Residents.

## OBJECTIVE



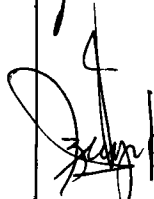
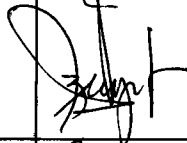


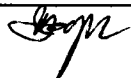



- a. To set assigned responsibilities in the care of pediatric patients at the designated isolation station.
- b. To state the roles of the Pediatric Residents in the care of the pediatric patients at the designated isolation station.


## GENERAL CONSIDERATIONS:

1. The clinical spectrum of COVID -19 has not yet been fully defined. Until specific treatment is determined, a more meticulous supportive care is warranted in managing these patients.
2. A dedicated healthcare worker should be in full Personal Protective Equipment (cap, N95 mask, goggles, face shield, full impermeable gown, gloves, and shoe covers) when handling the patient. Proper donning and doffing of PPEs and infection control measures should be observed at all times.
3. Require all patients to wear mask that covers mouth and nose except children  $\leq 2$  years of age.
4. The WHO recommends standard, contact, and droplet precautions with eye and face protection, with addition of airborne precautions as needed during aerosol-generating procedures.

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**APPROVAL:**

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## **GUIDELINES IN THE MANAGEMENT OF COVID PATIENTS AT THE DESIGNATED ISOLATION FLOOR:**

1. Stable patients admitted at the designated isolation floor shall be monitored by the Pediatric Residents via phone calls to the Nurses Station. The Pediatric Resident/s shall then directly communicate with the attending consultant to relay updates and concerns.
2. Unstable patients shall be closely monitored by the trained nurses from station 3 or 4. It shall be the attending consultant/s who shall manage the case. The Pediatric Resident/s may be directed by the attending consultant/s to follow up results of diagnostic procedures, facilitate procurement of medications or test tools, or other transactions relevant to the management of the case.
3. The Pediatric Resident/s is not advised to be in close contact with the patient nor patient's specimens.
4. The attending consultant and the residents can do contactless endorsement rounds on these patients using webcams, photo images, phone calls or thru SMS.
5. The established Bacolod City Pediatrics COVID Team shall manage the severe COVID pediatric patients on a rotational basis. This includes endotracheal intubation to be done by the specialist in the team.
6. Should the Pediatric Resident be required by the consultant to attend to a COVID suspect/probable patient, this resident should be provided with Level 4 PPE, charged to the account of the patient. And in such case, the consultant has full understanding that he/she shall be directly responsible for any undesirable consequence of that COVID exposure on the resident.

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This also comes with the understanding that the Department of Pediatrics upholds the right of the resident to refuse exposure to patient at the designated isolation floor.

### **Resuscitation Team at the designated isolation floor:**


*If the patient is already intubated, the members are -*

- A nurse compressor
- Medication Nurse
- Team Leader (Pediatric COVID Team Critical Care Specialist or Pulmonologist)

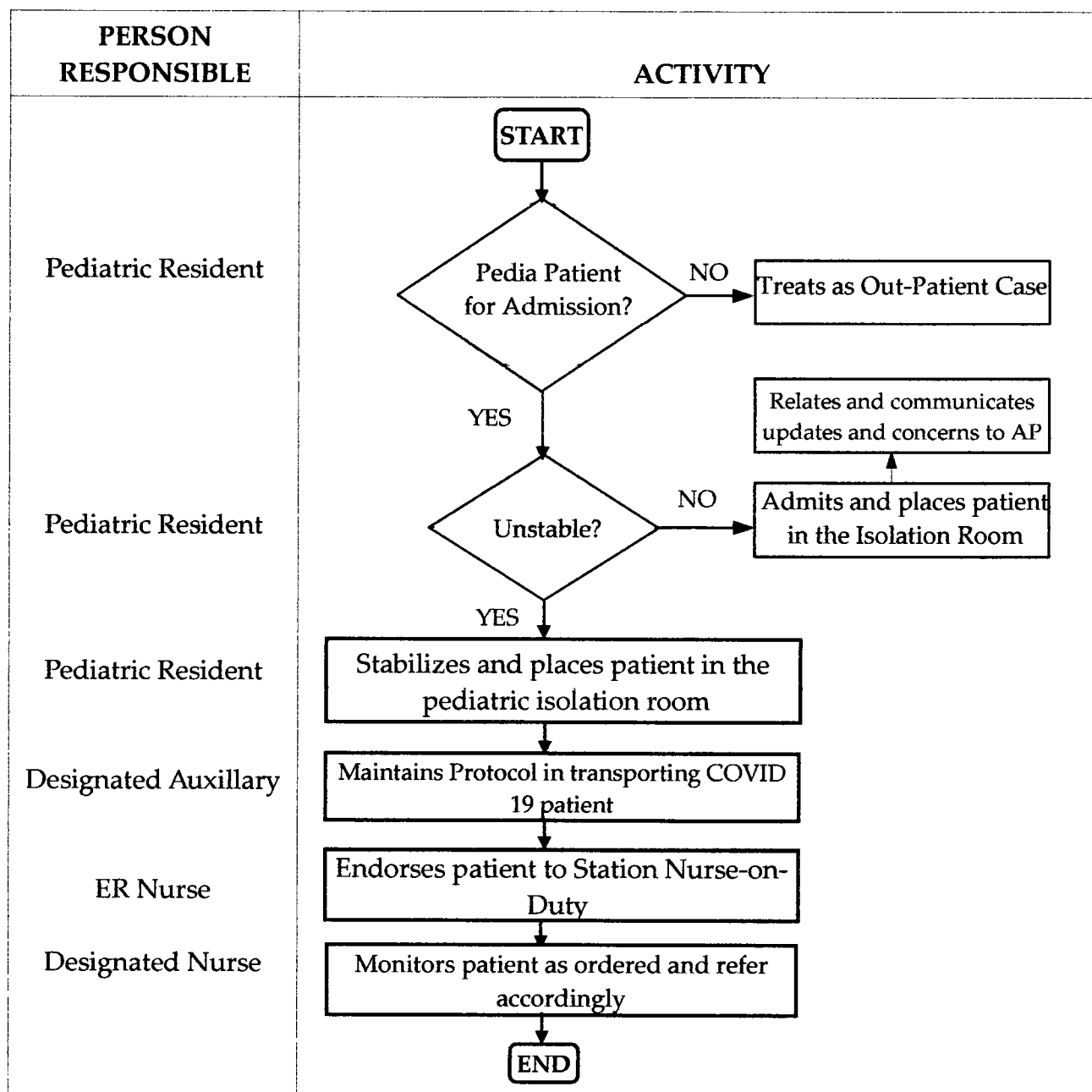
*If the patient is needing intubation, the members are -*


- A nurse compressor
- Medication Nurse
- Team Leader (Pediatric COVID Team Critical Care Specialist or Pulmonologist)
- Intubator (Anesthesiologist in the Pediatric COVID Team)
- Respiratory Therapist

	PULMO/ CRITICAL CARE	CARDIO	ANESTH	SURGERY	ENT	INFECTIOUS
<b>COVID TEAM A</b>	Ruby Garcia	Gozar	Banlaoi/ Prudente	Adhara	David	Panes or Deocadez
<b>COVID TEAM B</b>	T. Par	Tan-Ngo or Tumaneng	Banlaoi/ Prudente	M. Montelibano	David	Panes or Deocadez
<b>COVID TEAM C</b>	Sollesta or Laroza	Tumaneng	Banlaoi/ Prudente	J. Alejano	David	Panes or Deocadez

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## FLOWCHART



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