

PRINCIPLES* OF AIRWAY MANAGEMENT IN CORONAVIRUS COVID-19

FOR SUSPECTED/REPORTABLE** OR CONFIRMED CASES OF COVID-19



BEFORE

STAFF PROTECTION

PREPARATION

Hand Hygiene	Full Personal Protective Equipment***	Early Preparation of Drugs and Equipment	Meticulous Airway Assessment	Use Closed Suctioning System
Minimize Personnel During Aerosol Generating Procedures****	Airborne Infection Isolation Room (if available)	Formulate plan Early	Connect Viral/Bacterial Filter to Circuits and Manual Ventilator	Use Video Laryngoscopy (Disposable if available)

DURING

TEAM DYNAMICS

TECHNICAL ASPECTS

Clear Delineation of Roles	Clear Communication of Airway Plan	Airway Management by Most Experienced Practitioner	Tight Fitting Mask with Two Hand Grip to Minimise Leak	Ensure Paralysis to Avoid Coughing
Closed-loop Communication Throughout	Cross-monitoring by All Team Members for Potential Contamination	Lowest Gas Flows Possible to Maintain Oxygenation	Rapid Sequence Induction and Avoid Bag-Mask Ventilation When Possible	Positive Pressure Ventilation Only After Cuff Inflated

AFTER

Avoid Unnecessary Circuit Disconnection	If Disconnection Needed, Wear PPE and Standby Ventilator +/- Clamp Tube	Strict Adherence to Proper Degowning Steps	Hand Hygiene	Team Debriefing
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*Principles of Airway Management of COVID-19 may apply to Operating Theatre, Intensive Care, Emergency Department and Ward Settings. Similar principles apply to extubation of COVID-19 patients.

**There are regional and institutional variations on definition of a suspected/reportable case. Please refer to your own institutional practice.

***Personal Protective Equipment according to your own institutional recommendation, may include: Particulate Respirator, Cap, Eye Protection, Long-sleeved Waterproof Gown, Gloves

****Aerosol Generating Procedures: Tracheal Intubation, Non-invasive Ventilation, Tracheostomy, Cardiopulmonary Resuscitation, Manual Ventilation before Intubation, Bronchoscopy, Open Suctioning of Respiratory Tract

References:

1. World Health Organization. Infection prevention and control during health care when novel coronavirus (nCoV) infection is suspected Interim guidance. January 2020.
2. Center for Disease Control and Prevention. Interim Infection Prevention and Control Recommendations for Patients with Confirmed 2019 Novel Coronavirus (2019-nCoV) or Persons Under Investigation for 2019-nCoV in Healthcare Settings. February 2020.

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