**Labour Epidural for a COVID-19 Positive/Suspected Patient**

**AKA COVID “Red” Epidural**

**Initial Chart Review**

* Usual preparation in anticipation of LEA
* *Include review of CBC as COVID-19 can present with thrombocytopenia*
* Consider more frequent monitoring of oxygen saturations if symptomatic
* Discuss expedited testing with OB team for symptomatic patients or those at increased risk of C/S (1 hour turnaround)

**COVID LEA Equipment Checklist**

***(Gather equipment outside LDR5- minimize door opening)***

* PPE
	+ Full contact/droplet precautions
	+ Perform POCRA and use N95 for COVID positive or suspected patients in labour
	+ Use sterile blue gown instead of yellow
	+ Sterile gloves
* Epidural kit
* Prep sticks x 3
* CSE kit *(if required – this is separate from the epidural kit)*
* ICE *(to test block)*
* Verify the LDR 5 nurse has 2” Hypafix strips
* Verify the LDR 5 nurse has the epidural pump & solution

**Drug List**

* Normal saline x 2
* Lidocaine 2% 5 ml polyamp *(for skin, if wanted)*
* Bupivacaine 0.25% plain 20 cc vial
* Fentanyl 50 mcg/ml x 2 ml
* Ephedrine/Phenylephrine/Atropine syringes

*Leave these inside LDR 5 and replace stock on the epidural cart*

**Prepare for LEA**

* Ensure your back up is aware that you are unavailable (consider need to call in extra people)
* Strip off extra stuff (pens, lanyard, pager etc.)
* Wash hands
* Set up sterile epidural tray outside the L&D room on wheeled steel table
* Don contact/droplet PPE *adapted for sterile procedure (LEA)*
	+ Mask, eye protection, sterile blue gown, sterile gloves
* The LEA cart/supplies itself will remain outside the L&D room
* A C5 nurse will assist with preparation of the equipment, donning PPE and entering LDR 5

**Interview Patient & Perform Procedure**

* Patient and partner to wear surgical mask at all times
* Usual anesthetic & airway assessment
* Verbal consent obtained
* Patient positioned to distance RN from being near the patients face. This is not standardized. Options include:
	+ Partner supports patient (wearing mask) if appropriate;
	+ Patient sits well back and supported on bed (e.g. cross-legged)
	+ RN supports patient at arms-length from patient
* LDR Nurse will assist with prepping the patient’s back
* Perform LEA procedure

**Ensure Epidural Working**

* Test & load epidural
* Check block clinically and with ice
* Program and start pump before leaving room *(nurse can assist)*
* Chart in corner of room with CLEAN hands OR wait and chart outside
* Doff as per doffing poster *(doffing area is in corner of room closest to exit door; poster is on the wall)*
* N95 to be removed outside of room
* Clear communication with Obstetrics regarding plan for patient and need to avoid category 1 C/S for this patient
* Extra things passed in/out via RN protocols
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