Basic life support (BLS) guidance
Suspected or confirmed COVID-19 ONLY

Ensure you know the goals of care for your patient. Wear PPE according to local facility and current NSW COVID-19 guidance. Start BLS immediately using combined contact and droplet precautions.

| D | DANGERS? | Limit the number of BLS responders in the patient zone at all times |
| R | RESPONSIVE? | IMPORTANT Additional responders begin donning airborne PPE |
| S | SEND FOR HELP | CALL 2222 or local emergency number |
| A | OPEN AIRWAY | Apply oxygen (O₂) mask. Opening the airway is not an aerosol generating procedure (AGP)** |
| B | NORMAL BREATHING? | WARNING Bag-valve-mask ventilation is an AGP** Airborne precautions are required |
| C | START CPR | WARNING Chest compression is a potential AGP** Airborne precautions are required |
| D | ATTACH DEFIBRILLATOR (AED) | IMPORTANT This is NOT an AGP** Do not delay. Defibrillation can precede compressions using contact and droplet precautions |

** AEROSOL GENERATING PROCEDURES (AGP) MUST NOT BE PERFORMED UNTIL ALL RESPONDERS WITHIN THE PATIENT ZONE ARE WEARING PPE FOR AIRBORNE PRECAUTIONS.
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Avoid exposure to potentially infectious aerosol

- Limit the number of BLS responders in the patient zone at all times.
- If not in a single room, consider moving the patient, if practical.
- Evacuate the area of other patients, visitors and non-responding staff, if possible.
- Signs of life, including breathing, can be determined visually from a distance.

Oxygen therapy and masks during BLS

- Oxygen therapy using a mask is not an AGP and may provide benefit.
- A Hudson mask (6L/min) or non-rebreather mask (10L/min) are both suitable. Covering with a surgical mask over these may provide additional protection against droplet and/or spray contamination.

Personal protective equipment (PPE)

- A responder using combined contact and droplet precautions should commence resuscitation immediately.
- All BLS interventions that are not AGPs should be performed without delay.
- Do not delay early defibrillation of shockable rhythms.
- Responders that arrive and are not wearing PPE, should use contact, droplet and airborne precautions (P2/N95 mask) so that all resuscitation interventions can proceed as soon as possible.
- AGPs that occur commonly during resuscitation are listed below.

Known or potential AGPs

- High flow oxygen nebuliser therapy
- Manual ventilation using a bag-valve-mask
- Open airway suctioning
- Chest compressions
- Intubation

This information was sourced from the National COVID-19 Clinical Evidence Taskforce, CPR for adults with COVID-19 in healthcare settings - clinical flowcharts (accessed 1 July 2021). Available at https://covid19evidence.net.au/#clinical-flowcharts
Consultation
Consulted with senior clinicians, both medical and nursing, from NSW intensive care units through the intensive care community of practice, Cardiac COP clinical lead and manager, Respiratory COP clinical lead and manager, ED COP clinical lead and manager and the ICNSW Executive, ACI.

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For use by
To support adult intensive care and ward staff with surge in COVID-19 pandemic