



### HOW TO BEGING THE DAILY ACTIVITIES IN AN INTENSIVE CARE UNIT SHIFT

## At the beginning of the shift, each professional must enter the unit with:

The regulation uniform Enclosed footwear Surgical facemask

# Once in the care area, the first thing the professional will undergo is a **BRIEFING**

Duration: 10-15 minutes Aimed to all personnel in every room: intensive care medical specialists, resident medical interns, nurses, nursing care assistant technicians and safety coordinators

#### **INFORMATION TO BE DELIVERED IN THE BREFING:**

#### **1.** Availability and indications for the different types of equipment\*:

#### FACEMASK

Surgical facemask → All the time and in any area of the ICU except when the following is indicates:

| Facemask FFP2 for distances under two meters with the patients.  | <b>Facemask FFP3</b> for procedures with high-risk<br>of generating aerosol at high concentrations.<br>Basically reserved for orotracheal intubation.  |
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| <ul> <li>PERSONAL PROTECTIVE EQUIPMENT</li> <li>For any procedure in de the room</li> <li>Fluid-resistant gown</li> <li>Shoe covers</li> <li>Cap</li> <li>Goggles and/or visor</li> <li>Facemask FFP2</li> <li>Double layer of gloves</li> </ul>   | <ul> <li>For an orotracheal intubation and pronation-depronation</li> <li>Coverall</li> <li>Shoe covers</li> <li>Goggles and/or visor</li> <li>Facemask FFP2</li> <li>Facemask FFP3 (only for the person performing orotracheal intubation)</li> <li>Double layer of gloves</li> </ul> |
| <ul> <li>GLOVES <ul> <li>Indicated:</li> </ul> </li> <li>As part of the standard precautions during a procedure when there is perceived risk of exposure to bodily fluids.</li> <li>Gloves must also be used when assisting colleagues that are using the above-mentioned personal protective equipment</li> </ul> | <ul> <li>Remember:</li> <li>Perform hand hygiene before putting on the gloves</li> <li>Remove gloves immediately after finishing the task</li> <li>Perform hand hygiene after removing gloves</li> </ul>   |

In all other situations, the use of gloves is counterproductive. They macerate and spoil

the hands and eliminate the perception of risk. Hands with gloves get contaminated as much or more than hands without gloves.

2. Specific briefing on the situation of each patient. ISOBAR / SBAR

3. Allocation of patients and day planning

### Include a positive news

\*Following the recommendation of the document titled "PROCEDIMIENTO DE ACTUACIÓN PARA LOS SERVICIOS DE PREVENCIÓN DE RIESGOS LABORALES FRENTE A LA EXPOSICIÓN AL NUEVO CORONAVIRUS (SARS-CoV-2)" (ACTION PROTOCOL FOR THE PREVENTION OF OCCUPATIONAL HAZARDS SERVICES AGAINST THE EXPOSURE TO THE NOVEL CORONAVIRUS (SARS-CoV-2)) prepared by the Ministry of Health on March 24, 2020

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