

| RESPIRATORY / NIV CLINIC / ALL CONSULTANTS COMBINED STANDARD OPERATING PROCEDURE | | |
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1.0 Introduction

| | NIV Respiratory | NIV Respiratory | Cystic Fibrosis | NIV Respiratory |
|------------|--|----------------------|---------------------------------|----------------------|
| nd Floor | Dr. Javadpour Dr. McNally Dr. Ringhole | Prof. Cox | Dr. O'Reilly All Consultants | Dr. O'Reilly |
| Ground | Monday PM | Tuesday PM | Wednesday AM/PM | Thursday PM |
| er - | 3 rooms | 3 rooms | 5 rooms | 3 rooms |
| Tower | 10-15 | 10-15 | 4-8 | 10-15 |
| Medical To | Sarah Terry Claire See below | Lisa Farrell 8407 | Lisa Farrell 8407 | Lisa Farrell 8407 |

- NIV Clinic: New and return patients requiring noninvasive ventilation.
- Respiratory: New and return general respiratory patients including asthma.
- See separate Sop for Cystic Fibrosis Clinic

2.0 Location / Available Rooms

- Medical tower Ground Floor
- Rooms available 3
- Average number of patients
- 10-15 per clinic

3.0 Team Respiratory

Consultants: Dr. Ruth O'Reilly / Dr. Javadapour / Dr. McNally / Dr. Ringhole / Prof. Cox

CNSp: Lisa Farrell Bleep 8407

Secretary: Sarah Quinn, Terry Skerrit, Claire Lanigan Extn 2626 / 2530

4.0 Management of the ICA's

- Room 15 may be available
- Where possible check ICAs previous day, investigate if the ICA remains active.
- All ICAs will be flagged on IPMs and clinic print out. Ensure in advance of arrival that a room is available, and place a sign on the door, on patient's arrival they should be shown to isolation room.
- If there are large numbers of ICAs, it may be necessary to contact parents and ask them to come for last appointment.
- If there are empty rooms available, please use them to see patients.
- Remove any equipment that will not be used, prior to the patient being reviewed.
- Contact the janitor to complete a discharge clean when the patient leaves the room, discard any single use equipment.
- There is an infection control alert diary for staff to record all ICAs alerts. If a patient has VRE, log in book in suite 1, stating room number.

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5.0 Clinic Set-up

- \Ensure computers are on and prescription pads out for team. High tech. prescription required (locked in press in nurse's station)
- For NIV Clinic parent should bring memory stick if the child is on CPAP or BIPAP. Give same to the respiratory technicians to download.
- Consultant will decide what patients need PFTs. Give child's weight, height and addressograph label to technician.
- Doctors will order chest x-rays as required.
- Parent/or nurses letter used to check in at desk.

6.0 Safety Checks

- Note where emergency trolley and emergency medication is kept and perform checks daily (including de-fib and suction).
- Emergency intubation medication will be brought by the team from ICU when required.
- Check oxygen, BVMs and suction in all rooms.

7.0 Implementation Plan

- Weight
- Height
- Oxygen sats
- BP or urine as requested

8.0 Equipment

- Weighing scales x2 (baby, floor scales)
- Stadiometer / Rollometer
- Dinamap / sats monitor

9.0 Clinic Closure

- Ensure all patients have been reviewed, discharged, and left the clinic
- Stamp all DNAs charts for consultant review and plan.
- DNA charts go back to reception desk.
- Clinic charts will be collected by secretary. Return all prescription pads to locked press in nurse's check-in room.

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