

“Flying Squad” pacing cover for London

The purpose of this Standard Operating Procedure (SOP) is to identify the roles and responsibilities for all physiology staff undertaking COVID-19 cross site pacing cover for London.

Section 1: Background

Hospitals without 24 hour pacing cover may require support for emergency pacing if there is a shortage of beds / labs / ambulance transport during the COVID-19 outbreak. It may be increasingly challenging to move patients to Barts for this life-saving procedure and our aim is to minimise the number of patients dying with treatable conditions because of resource limitations. A potential solution to offer emergency care to heart block patients and other life threatening bradycardia would be to travel to the patient’s local hospital and treat them there.

- **Key operational relationships**
 - Key team members – Consultant cardiac electrophysiologist, running nurse, device physiologist.
 - Partner-hospital relationships – Clinical leads of local hospitals for contact details and triage, local radiologist, emergency care team looking after patient.

- **Operational personal and roles**
 - Consultant electrohysiologist– clinical decision making for treatment, communicating with flying squad for organization of plan i.e meeting point, transport method, timing, etc.
 - Running nurse – ensuring all nurse related equipment is available including medications, ensuring appropriate documentation forms are present i.e timeout sheet, drug charts, etc.
 - Device Physiologist - ensuring all device related equipment is available.
 - Radiographer – Local radiographer to operate fluoroscopy and navigate flying squad to patient and procedure room.

- Medical team looking after patient to assist with patient transfer (if necessary) to appropriate room.

Section 2: Physiologist related information

- **Service requirements from Physiologist**

- 24hr cover for sites across London for the critically ill requiring emergency pacing – heart block and life-threatening bradycardia pacing only.
- Small team of physiologists willing to participate /rota in an on call service for set number of hours/days - TBD.
- Team to stay onsite or within an appropriate response range (hospital accommodation or hotel) as pacing equipment will need to be moved into transport method quickly – likely transit van.
- Willing to travel across various sites with potential COVID-19. Appropriate PPE will be available – need advice from infection control.

- **Equipment requirements**

Equipment	Quantity
Laptop – mediconnect, spreadsheet	1
Bar code scanner	1
Defib with external pacing	1
Defib pads	1 box
ECG electrodes	3 packets
Paper pacing ID cards	15
Abbott programmer	1
Power plug	1
Extension cable	1
Abbott ECG cable	1
Abbott PSA connector	1
Abbott telemetry box	1
Abbott wand	1
PSA cables (Medtronic or SJM)	3 boxes
Safe sheaths 6F 13cm	3 boxes
Safe sheaths 6F 23cm	1 box

Safe sheaths 7F 13cm	3 boxes
Safe sheaths 7F 23cm	1 box
Abbott PPM Assurity SR	5
Abbott PPM Assurity DR	5
Abbott Tendril 52cm	5
Abbott Tendril 58cm	5
Abbott Isoflex 52cm	5
Abbott Isoflex 58cm	5
Lead gowns & thyroid shield	1
Pacing packs	3
Theatre gowns	4
Choloroprep	6
Sutures	3 sets
NaCl	3x 500ml bags
II sterile cover	3
Steristrips	3
Mepore dressing	3
Lead gowns	3
Contrast	50 ml x3
Drugs – lignocaine, midzaolam	
Syringes (5,10, 20ml)	3
Temporary pacing flotation wire	3
6F sheath	3
Cables and temp pacing box	3
Femoral procedure pack	3
Sutures	3 sets
loban adhesive drape	3
Scrub hats	1 box
Face masks	1 box
WHO checklist and consent forms	
Procedure care plan	
Tyrx envelope	1
PPM info booklets	15
Envelopes	15

- Small portable pacing trolley to store all relevant kit to allow easy transport.

- **Service requirements from Physiologist**

- 24hr cover for sites across London for the critically ill requiring emergency pacing – heart block pacing only.
- Small team of physiologists willing to participate / rota in an on call service for set number of hours/days - TBD.
- Team to stay onsite as equipment will need to be moved into transport method quickly – likely transit van.
- Willing to travel across various sites with potential COVID-19. Appropriate PPE will be available.

- **Logistics**

- Documentation on medconnect using laptop as per normal implant workflow - ?need for internet connection. Could capture critical details in a book and have admin staff upload later
- Paper ID cards and info booklets for patients to take post implant.
- Flying squad spreadsheet to be made for necessary patient details i.e NHS number, name, DOB, address, contact number, GP practice. Again could put this in the book
- Flying squad spreadsheet accessible for admin team to create and send follow up appointments and home monitors to patients if necessary.

Process for procedure

- 1) Call is made to arrhythmia on call phone – they will get a picture of ECG and if transfer to Barts (or satellite pacing site) isn't possible then refer the call to the consultant in charge of the flying squad
- 2) Consultant takes patient details, location and the contact number of the local care leader and calls the team
- 3) Consultant calls the local care leader and gives them an ETA for the team arrival and requests antibiotics to be given

- 4) Nurse calls the on-call radiographer at the hospital and asks them to secure the appropriate fluoroscopy machine and room (if patient in an open ward)
- 5) Team meets and drives to local centre
- 6) Pacemaker inserted as per standard procedure.
- 7) Team moves to their next location or back to Barts to go home.