



Protocol For Treating Head & Neck Cancer Patients

References:
 --Guidelines for infection prevention and control in perioperative patients during the COVID-19 pandemic: protocol from a tertiary general hospital in Beijing. Zhe Du Et al
 DOI: <https://doi.org/10.1016/j.jmig.2020.04.06>
 -CORONA-steps for tracheotomy in COVID-19 patients: A staff-safe method for airway management Barbara Pichi Et al 2020 Jun; 105: 104682. Published online 2020 Apr 6.
 doi: 10.1016/j.oraloncology.2020.104682

Ensure use of PPE for doctors & staff

Screen patient for symptoms of acute respiratory illness (e.g. Fever, cough, difficulty in breathing)

History taking-
 • Medical history
 • Travel history for COVID-19
 • Tentative or confirmed exposure in last 14 days

• Admit the patient 48hrs prior to surgery in separate ward/isolation & RT-PCR

C O R O N A	Tracheostomy for	<p>Cover yourself</p> <ul style="list-style-type: none"> ➢ Cap ➢ Shoe cover ➢ Mask (FFP3, FFP2, covered with surgical mask) ➢ Goggles/Face shield ➢ Gown (double gown if possible) ➢ Gloves ➢ Buddy Check 	
	Operating Room setting	<ul style="list-style-type: none"> ➢ Correct planning in timing ➢ Tracheostomy team with expertise ➢ Limited number of people involved during the procedure ➢ Surgical kits & different sizes of cannula ready 	
	Open the trachea	<ul style="list-style-type: none"> ➢ Deep neuromuscular blockade ➢ Check SpO2 before opening the trachea ➢ Push tube cuff caudally to avoid air leakage. ➢ Hyper inflate tube cuff 	
	Nursing & Airway management	<ul style="list-style-type: none"> ➢ Safe suction of secretions ➢ Regular cuff pressure check ➢ Planned cannula change ➢ Wound closure when possible 	

Surgery

- Minimum staff in the OT
- PPE & all safety measures taken for the staff
- Minimize the duration of surgery
- Prefer local flaps over free flaps
- After operation, keep patient in isolation

Continuous evaluation of condition, Follow up of RT-PCR results.

ICT evaluate necessity of operation & isolation

No

Yes

Surgery

Operation in negative pressure laminar flow OT, Staff protection at BSL-3

After operation, patients returned to isolation Ward & RT-PCR results are tracked

Confirmed case

Transfer to designated hospital

Positive

Negative

Re-test negative after 24 hrs

ICT consultation to assess patient's condition, Whether to end isolation, continue routine treatment, or to continue further examination.

❖ ICT- Infection control team
 ❖ BSL3- Biosafety level 3