

**NYSNA Recommendations and Resources for Reopening during COVID-19**  
**Endoscopy Settings: NYSNAs Nursing Education & Practice and Health & Safety Guidelines**



Unit	Pre-Screening	Criteria for Testing	Unit Modifications	PPE	Cleaning	Visitor Access	RN to Patient Ratio
<b>Endoscopy</b>	Pre-procedure COVID-19 questionnaire within 72 hours of visit using telemedicine.  Staff should be screened prior to starting each work day.  A negative molecular test within 48 hours of scheduled procedure.	Any of the following symptoms within 14 days of the procedure: <ul style="list-style-type: none"> <li>Fever of 100.4 F (38 C) or higher</li> <li>Cough</li> <li>Shortness of breath, difficulty breathing, chest pain</li> <li>Sore throat</li> <li>Loss of sense of smell or taste</li> <li>New onset of fatigue or lack of energy</li> <li>New onset of nausea with or without vomiting</li> <li>New onset diarrhea</li> <li>Any new or unusual symptom</li> </ul>	Distancing of 6 feet.  Lobby/waiting room chairs redistributed for social distancing (reduce capacity by 50 – 75%).  Check in process should limit direct contact with staff with separate entrance and exit.  Plexi-glass partitions.  Nebulizer treatments should be administered during the procedure rather than pre/post operatively.  Metered dose inhalers are preferred over nebulizers.  Individual work stations for staff	Pre-procedure: Surgical masks should be worn by all staff, nitrile gloves.  During operative procedure: N95 respirator, nitrile gloves, impervious gowns, face shield/eye protection, and head covering.	EPA registered hospital grade disinfectant solutions and wipes for all high touch and horizontal surfaces.  Clorox/bleach wipes for desk spaces.  Desks, counters, keyboards, computers, microphones, doorknobs, faucets, should be disinfected at least twice daily.  Restrooms should be cleaned after each patient.  Standard bedside pre-cleaning and terminal cleaning of endoscopy unit.	Only 1 essential family member/caregiver. Patient should wait in vehicle until they are called.  Family member should wait in their vehicle until they are notified for post-procedure pick-up.	Staff working in endoscopy should not rotate in to COVID care zones.  1 (one) Registered Nurse in the pre-procedure area to perform patient assessment prior to IV sedation and analgesia.  1 (one) Registered Nurse in the post-procedure area to perform patient assessment during recovery from IV sedation and analgesia.  1 (one) Registered Nurse in the procedure room to assess and monitor during IV sedation and analgesia.  A second RN to assist the physician with complicated procedures (either by the severity of the patients illness and/or the complex technical requirements of the therapeutic procedure.  Availability of two RN's for pediatric patients.
	<b>Resources:</b> <a href="https://www.asge.org/docs/default-source/default-document-library/asge-guidance-for-reopening_4-28-2020.pdf">https://www.asge.org/docs/default-source/default-document-library/asge-guidance-for-reopening_4-28-2020.pdf</a> <a href="https://webfiles.gi.org/docs/policy/2020resuming-endoscopy-fin-05122020.pdf">https://webfiles.gi.org/docs/policy/2020resuming-endoscopy-fin-05122020.pdf</a> <a href="https://www.nursingcenter.com/journalarticle?Article_ID=288205&amp;Journal_ID=54035&amp;Issue_ID=288187">https://www.nursingcenter.com/journalarticle?Article_ID=288205&amp;Journal_ID=54035&amp;Issue_ID=288187.</a>						

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