Initiatives in Anesthesia Workspace Hygiene During COVID-19: The Gray Airway Basin and the Epic Hand Hygiene Event

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What's the Problem?

The COVID-19 Pandemic has highlighted the need for anesthesia providers to decrease workspace contamination, particularly during and after airway management.

Delineation of "clean" and "dirty" spaces in the anesthesia workplace has been historically challenging, but the heightened awareness of microbial contamination presents a new opportunity to effect behavioral change among staff.

Root Cause Analysis:

- There is no designated receptacle to separate items in contact with the airway or with oral secretions from the rest of the workspace, even from other "dirty" items like syringes
- Unclear separation of "clean" and "dirty" areas in the anesthesia workspace
- The complexity of the anesthesia induction and extubation workflows make adherence to hand hygiene guidelines very challenging

How Might We: Improve infection control by decreasing contamination of the anesthesia workspace?

Interventions:

1. Introduction of an inexpensive ($0.15/unit) single use gray basin designated to contain contaminated airway equipment

2. Creation of an Epic reminder for infection control that generates a pop-up window when "Patient in Room" and "Surgery End" events are documented

Isolation of Contaminated equipment
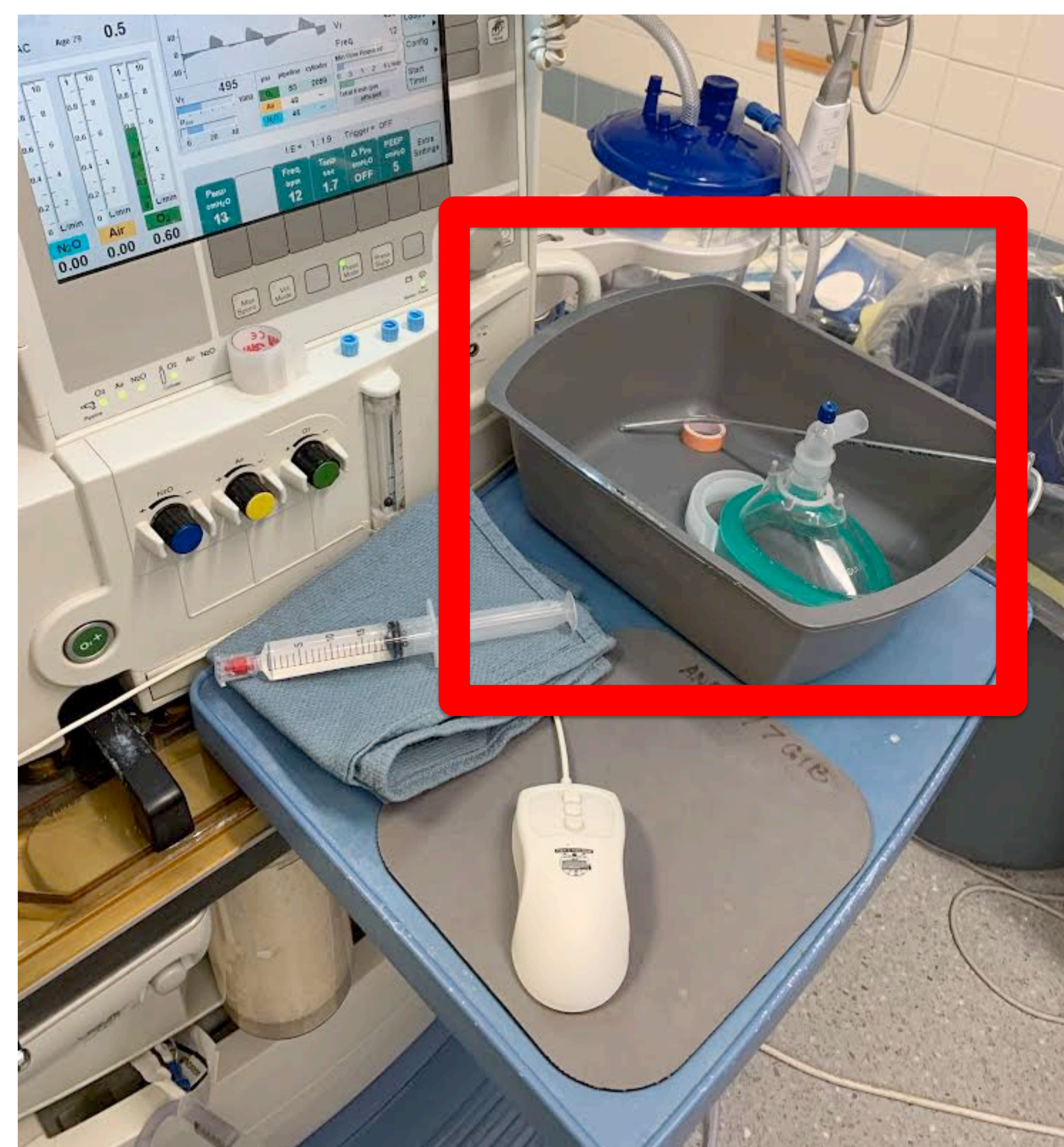
Hygiene Prompt at key moments in the anesthesia workflow