Per-Operative Covid-19 Modifications for Oculoplastic Service – Patient Perspective and Regional Review of Practice

Dr Rupinder Chahal, Dr Joy Beamer, Professor Harpreet Ahluwalia

NHS University Hospitals Coventry and Warwickshire NHS Trust

AIM:

Devise a ***full face surgical draping technique*** for Oculoplastic patients, keeping patient and staff welfare in mind, during the COVID-19 Pandemic.

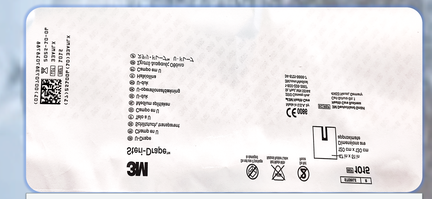
METHOD:

We undertook a '***Regional Survey***' in the Midlands, to compare regional Oculoplastics draping practices with our practice locally in the light of Covid-19.

We also undertook a prospective '***Patient Satisfaction Survey***', to understand the impact of our change in practice.

Survey questions:

1. *'Was the drape comfortable during the procedure?'*
2. *'Did you feel any sense of claustrophobia?'*
3. *'If you have had had any previous Oculoplastic surgery, how did this drape compare?'*
4. *'Any further comments?'*



Adaptation of a '3M Steri-Drape U-Drape 1015' Orthopaedic drape - a transparent polyethylene film, with a U shape cut out & an adhesive edge.

a



U shape of drape trimmed at adhesive edge *(a)*.

b



Nasal oxygen cannula provides oxygen beneath the drape *(b)*.

Povidone Iodine 5% drops are instilled into both eyes following 0.5% Proxymetacaine Hydrochloride, to offer additional conjunctival sac sterilisation, as COVID-19 virus has a predilection for the conjunctiva. [1, 2, 3]

c

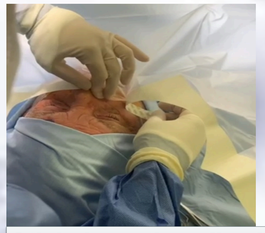


d



Following standard head wrap and full body drape, the 3M Steri-Drape is carefully applied *(c, d)*.

e



f



Stick down the adhesive edge just above the tip of the nose *(e)*, lateral walls and cheeks *(f)*...

g



... Then on top of the head drape *(g)*, thus isolating both the mouth and nose from the operative field.

h



i



Drape over a raised bar fixed to the operating table *(b)*, in order to tent it up keeping the drape away from the nose and mouth *(h, i)*.

j



Residual drape cut off from the initial trim, is used to secure the bipolar wire over the bar *(j)*.

22 consultant responses.	22% of the responders have modified a cataract drape by fashioning a larger hole to expose the lids.
RESULTS: Regional Survey	
39% continued their normal practice, with the full face exposed.	44% of patients wore a fluid resistant mask, whilst others removed the mask underneath a bespoke drape.

RESULTS: Patient Satisfaction Survey:

Q1. 100% of patients felt the drape was very comfortable.
Q2. No patient reported any claustrophobia.
Q3. Of those who had had previous Oculoplastic surgery pre-COVID, no one reported any notable difference without versus with the new drape.
Q4. Further comments:

- One patient felt nauseous during procedure, but this was likely to be attributable to the sedation.
- 30% patients commented on the relief of not having to wear a mask.



CONCLUSION:

- 122 procedures completed using this draping technique to date.

Advantages:

- ***Simple*** method, creating a ***sterile*** operating field
- The transparency of the drape allows the ***anaesthetist to visualise*** and monitor the patient, especially when using sedation.
- ***Removes*** the requirement of an ***unsterile mask***.
- ***Avoids claustrophobia***, thereby improving per-operative patient comfort.
- ***Latex free***.
- Theatre personnel are ***protected*** by isolating the patient's nose and mouth, reducing the risk of droplet exposure. [4]
- ***Inexpensive, readily available***, disposable 3M Orthopaedic Drape.

The risk of infectious viruses are likely to continue into the foreseeable future. Our draping technique provides a longer term solution to address safety and comfort of both patients and staff.

References:
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2. O'Brien, Terrence P. MD; Pelletier, Jesse MD, FACS Topical Ocular Povidone-Iodine as an Adjunctive Preventative Practice in the Era of COVID-19, Asia-Pacific Journal of Ophthalmology: March-April 2021 - Volume 10 - Issue 2 - p 142-145 doi: 10.1097/APO.0000000000000353
3. Sarma P, Kaur H, Medhi B, Bhattacharyya A. Possible prophylactic or preventive role of topical povidone iodine during accidental ocular exposure to 2019-nCoV. *Graefes Arch Clin Exp Ophthalmol*. 2020;258(11):2563-2565. doi:10.1007/s00417-020-04752-2
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