CRITICAL CARE PROTOCOL FOR OPHTHALMIC CARE IN COVID RESPONSE

ON ADMISSION

•Assess and document eyelid position **DURING ADMISSION**

•Assessment to occur daily unless stated otherwise in protocol; record frequency in care protocol

EQUIPMENT NEEDED: A bright pen torch

Notes:

1.Signs of infection include redness, discharge, lid or conjunctival swelling and / or corneal clouding.

2. Tape eye or apply eye cover during open oropharyngeal suctioning if patient known to have active respiratory infection.3. Do not withdraw the suction catheter across patient's face after suctioning.

4. Taping must be changed once daily.

5.To refer bleep 1625 or call consultant via switchboard



•Overlay gauze and tape gauze to skin