



## Acute Surgical Assessment Units (ASAUs) in Ireland during the COVID 19 pandemic

The **Acute Surgical Assessment Units (ASAUs)** is a recent, robust addition to acute surgical care on many sites in Ireland. It has the benefit of providing our patients with senior decision makers early in their clinical pathway on the acute floor.

Covid 19 represents a significant threat to how we apply efficient and safe care to our acute surgical patients. There is a wealth of experience in many ASAUs across Ireland. After consultation with accredited and non-accredited sites, The National Clinical Programme in Surgery recommends the following adaptations and expansion of ASAUs for the duration of the pandemic:

ASAUs should remain open to support enhanced ingress from other specialties (including, where agreed locally: Vascular, Urology, Plastics, ENT), [in addition to the criteria published previously](#).

- Robust Triage/ streaming should be provided to exclude high risk of COVID19 patients
- Robust Triage/ streaming to allow Triage category 3&4 patients. Selected Category 2 patients may be allowed
- Triage category 5, usually excluded from ASAUs, may be entertained for urgent indications
- Minimum opening hours should be 0800-1600
- There should be a review clinic available to all specialties from 0900-1100
- There should be access to an emergency theatre list
- There should be access to a dressing clinic
- Clinical Staffing is as per on call rotas, with resident NCHDs in the unit at all times
- Nursing Staffing is as per normal ASAU, supplemented where necessary with ED or Day ward nursing staff
- Depending on local agreements, the General Surgical and other speciality NCHDs may provide cross covering arrangements. Here it is essential these are agreed and equitable
- It is recommended that Eye goggles, surgical mask and gloves (with appropriate hand washing) are used for assessing all acute patients

There should be a clear principle of pulling patients from the ED stream where appropriate. There also needs to be a clear clinical lead identified (usually the ASAU lead). Inter-speciality agreements and issues should be escalated to the lead as early as possible.