



Bulletin No 8-24/05/23

Distributions-: All Community Pharmacies by email

CO Monitoring for the Quit Your Way (QYW) Pharmacy Smoking Cessation Service

The requirement for CO monitoring for pharmacy QYW clients was paused at the height of the COVID 19 pandemic due to distancing restrictions in place (Scottish Government Circular PCA(P)(2020)9.

As these restrictions have now all been removed, CO monitoring can recommence where appropriate. When taking CO readings, pharmacy staff should be encouraged to do so in a COVID safe manner. CO readings should be done at Weeks 1, 4 and 12 and recorded on PCR. Weekly testing is encouraged. Below are guidelines for CO monitoring post pandemic. More complete guidance and risk assessment documents are available from the Pharmacy Health Improvement Team.

CO monitors, mouthpieces, D-pieces and alcohol free wipes are available from the Pharmacy Health Improvement Team.

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CO Monitoring Guidance

Staff should ensure the patient has no recognised symptoms of COVID 19 before carrying out a CO breath test.

The Bedfont CO monitor is **not** an Aerosol Generating Procedure (AGP). Standard Infection Control Procedures remain a priority and staff should ensure they are frequently washing their hands thoroughly i.e. before and after each client, and adhering to relevant PPE and infection control guidance regarding non aerosol generating procedures.

Alcohol based hand rub (ABHR) with an alcohol content lower than 73.5% can be used when handling the Smokerlyzer® CO monitors. Hands must be completely dry before handling the CO monitor. Failure to do so may result in the machine giving a faulty reading.

The following process should be adhered to when undertaking a breath test:

- Where possible staff should CO screen patients in a well ventilated area where they
 are able to maintain a 2 metre distance.
- Staff member should wipe clean the CO monitor with alcohol free antimicrobial wipes before and after every CO breath test. This includes the D-piece™ which should be removed, wiped and then re-inserted into the device.
- Ensure a multi-patient use D-piece[™] is used with a fresh single-use individually wrapped SteriBreath[™] mouthpiece. Best practice is for the SteriBreath[™] mouthpiece to be removed from its packaging by the patient who should put it onto the CO monitor.
- Where possible staff should remain 2 metres away from the patient and direct the patient on how to use the CO monitor.
- Ensure the client is **not** facing staff member when blowing into the machine.
- Once the breath test has been carried out and reading obtained, staff should ask
 the patient to remove the steribreath mouthpiece and dispose of it in the clinical
 waste bag.
- Once CO monitor is returned to staff member it should be cleaned with alcohol free antimicrobial wipes and allow machine to air dry. This also includes the external surface of the D-Piece.
- Patient and staff should wash hands or use ABHR on completion as appropriate