# System Incident Management Update

# April 1, 2020

# Distribution: All Yale New Haven Health System Employees and Medical Staff Leadership

## New Updates In RED

# Personal Protective Equipment (PPE) Updates

# **Ambulatory PPE Guidelines**

The YNHHS/YM SIM COVID Ambulatory Task Force, with input from Infection Prevention and Supply Chain, has developed PPE guidelines which reflect the current understanding of the prevention of transmission of SARS-CoV-2 and offers guidance on preventive measures for application to the ambulatory setting. See attached guideline document.

# Guidance regarding substitution of small-sized N95s with universal N95s given shortages

The Health System's supplies of small-sized N95 respirators have become extremely limited. We have begun to sterilize and reprocess used small-sized N95s, and we expect stocks to be replenished in the coming days. Until the small sized N95s are back in stock, healthcare workers can safely switch to the universal-size 1870 N95 respirator for the care of COVID-19 patients. A repeat fit test is not required as long as care does not include participation in an aerosol-generating procedure such as intubation, bronchoscopy, upper endoscopy, or sputum induction. Such procedures should be carried out by individuals wearing a respirator for which they have been fit tested.

## Clarification regarding PPE guidance issued on March 27, 2020

We continue to calibrate the distribution and implementation of the use of masks for hospital-based healthcare workers as described on Friday, March 27. It should be made clear that when working in any clinical area within the hospital, the expectation is that everyone will be wearing a mask that is appropriate for the risk in that area (N95 vs face mask). The grid circulated on Friday provides detailed guidance for duration of mask use and when respirators should be used. That document remains the primary reference for operational implementation of the policy.

# Clarification regarding the use of N95 respirators for intubation

PPE recommendations across YNHHS call for use of N95 respirators, face shields, gown and gloves when providing care to patients who have tested positive for COVID-19, *including when such patients are undergoing aerosol generating procedures such as intubation or receiving ICU level care.* Our current supply of N95 respirators is sufficient to support these recommendations, which are in accordance with current national guidelines.

Given the anticipated increase in patient volume and limited supply of N95 respirators, we are also exploring alternatives, which we may deploy more broadly as our N95 resources become limited. These include N95 reprocessing, which will scale up in the coming week, and expanding the use of our limited supply of powered air purifying respirators (PAPRs) and elastomeric respirators (industrial cartridge respirators), currently being piloted in some areas. There is *no evidence* that PAPRs or elastomeric respirators are more effective in preventing transmission of viral respiratory diseases than are N95 respirators. **Intubations may be safely performed with either N95s, PAPRs or elastomeric respirators, along with gown, gloves and eye protection.** 

# Implementation of revised PPE guidelines (3/27)

As a reflection of our commitment to ensuring our front-line healthcare workers are protected to the maximum degree possible during the COVID-19 pandemic, new guidelines clarifying the appropriate clinical indications for the use of PPE, including N95 respirators and facemasks, were implemented on March 27. We currently have adequate supplies to protect all *healthcare workers who cannot socially distance*. We will continue to calibrate the communication of the policy, as well as improve the effective and efficient distribution of these supplies.

# YNHHS Procedure for re-processing of personal protective equipment (PPE)

Please continue to ensure that used N95 respirators, goggles, and face shields that are not torn, broken, or visibly soiled are not discarded in the garbage and are placed in designated collection bins for reprocessing.

# Use of makeup while using PPE

Our supply chain and central sterile supply departments developed an innovative process to safely and effectively reprocess critical types of PPE, including N95 respirators, face shields and protective goggles. The process can only be performed on items that have not been visibly soiled. 25 percent of collected used PPE currently has to be discarded because of makeup stains. Front-line healthcare workers who use these critical PPE items <u>should not wear makeup to work</u>. Cooperation is critical to our ability to have a sustainable source of essential PPE items, which are in short supply across the country.

# **Clinical Care/Operations Update**

Revised treatment algorithm for hospitalized patients with COVID-19

The COVID-19 Treatment group, led by Drs. Maricar Malinis, Jeff Topal, Rick Bucala, and Charles DeLaCruz have developed the attached revised treatment algorithm for hospitalized patients with severe & non-severe COVID-19.

#### **Consolidation of Women's Services at Yale New Haven Hospital**

Women's Services and Neonatology at St. Raphael's Campus will be temporarily relocated and combined into the existing services at York Street Campus. This move is being made to ensure the ability to protect patients with or without COVID19 by reducing the risk of exposure, and to enhance flexibility and protection of our OB and Neonatology healthcare workers. A detailed memo is attached.

## **Obstetric Patients Transferred to Yale New Haven Health**

Given the developments in New York State related to COVID-19, Yale New Haven Health (YNHHS) Labor and Birth units have been receiving inquiries and visits from maternity patients from New York State who are not previously registered with our hospital or affiliated providers. YNHHS Leadership is concerned that, without adequate planning, a potential large influx of these patients could overwhelm capacity. We are also committed to providing safe, compassionate, and equitable care of high standards. The measures outlined in the attachment have been enacted to address this unexpected development.

#### Telephone triage for ambulatory adult patients

A new guideline has been developed for telephone triage of ambulatory patients with respiratory symptoms and asymptomatic individuals who have had known COVID-19 exposure (see attached). It includes guidance for determination of severity and length of isolation, among other things. No matter the severity of symptoms DO NOT bring patients into the office.

## Telephone triage for ambulatory obstetrical patients

A new guideline has been developed for telephone triage of obstetrical patients. It provides guidance to COVID positive and non-COVID positive patients both with and without obstetrical complications. Non-OB patients (e.g. gyn) can use standard triage algorithm. See attached document.

## **Ambulatory imaging HOT SITES**

ALL ambulatory imaging exams, including X-Rays, are now required to be scheduled in advance by calling the Radiology COVID-19 hotline (available 7a-7p, any day of the week at (475)246-9660). Epic providers will see a Best Practive Advisory reminder of this upon ordering of imaging. Known or suspected COVID-19 patients, and those who are positive upon screening, will be scheduled at designated Radiology COVID-19 "HOT SITES" located throughout the system.

## Open blood draw stations

Attached is a list of open laboratory draw sites located throughout the health system. For current Blood Draw Station information, please call the Lab Medicine Customer Service number 1-800-305-3278.

# Recommendations against outpatient prescribing of repurposed medications for COVID-19 therapy

Recommendations against ambulatory prescribing of medications with possible efficacy against COVID were approved by the Ambulatory Task Force team. Outpatient prescribing of hydroxychloroquine, HIV-1 protease inhibitors and azithromycin should be reserved ONLY for patients who have medical conditions where their use has been established in the inpatient setting. To promote the appropriate prescribing of hydroxychloroquine and azithromycin, a combination of clinical decision support tools have been created. See attached document.

## **COVID-19 Related Operational Snapshot**

Below you will find an overview of the total number of inpatients who are positive or under investigation with COVID-19 and updated testing results from across the Health System. These numbers are from our JDAT team.



