

## System Incident Management Update

May 8, 2020

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

New Updates In RED

### Letter from the Chief Clinical Officer

Dear Colleagues,

Thankfully, we continue to experience steady decreases in the numbers of admitted patients with COVID-19, aided by consistently large numbers of patients being discharged home, as well as ongoing reductions in new patients with COVID-19 requiring admission. We continue to plan for substantially increased availability of testing, in close coordination with the State of Connecticut in advance of a slow reopening of the state in the next several weeks.

Our ability to restart elective but clinically indicated care like surgeries, procedures, lab tests, and diagnostic imaging, will hinge on the creation of guidelines and workflows to keep both our patients and healthcare workers safe. Our action teams, which were critical in reshaping our clinical enterprise when our hospitals were experiencing an upward surge of patients with COVID-19, are now being recalibrated to develop clarity on how we continue to care for those with COVID-19 while also meeting the needs of those who are uninfected, and who may have deferred essential care. Part of that recalibration will be revisiting earlier recommendations regarding healthcare workers at higher risk in light of additional scientific data and increased availability of testing and PPE. We hope to have collaboratively revised recommendations distributed next week.

I thank you for your ongoing patience, professionalism, empathy, and dedication to our patients.

Warmly,



Thomas Balcezak, MD  
Chief Clinical Officer  
Yale New Haven Health

## New Updates for May 8

### **Remdesivir availability for YNHHS via the FDA's EUA**

The Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) for use of remdesivir for the treatment of hospitalized patients with COVID-19. The distribution of remdesivir to US hospitals under the EUA is being coordinated by the US Government. Based on current information, none of the YNHHS hospitals have been selected to receive remdesivir EUA shipments. Therefore, remdesivir via the EUA program is not available to YNHHS patients. There are current clinical trials for COVID-19 inpatients that include remdesivir, highlighted in the Treatment Algorithm. Please see the attached SBAR.

### **COVID-19 PCR testing**

The Testing Stewardship group has updated the guidelines for the use of PCR testing to identify active infections. Please see the attached document.

### **ED COVID-19 testing guidelines**

YNHHS is expanding COVID-19 testing to ALL admitted patients in the Emergency Department. This will allow bed management to appropriately cohort admitted patients to reduce transmission risk for patients and staff. We are limited in the number of 2-hour tests available and have developed new testing criteria for use of the 2-hour test where appropriate. Please see the attached guidelines.

### **Update for rescheduling for clinically prioritized OR cases**

Recovery to normal clinical operations will occur in stages. We will plan for a slow ramp-up of OR capacity beginning May 11. Note that this is a change from the originally planned May 20th date. This will be done in conjunction with procedural areas and delivery networks across the health system. We are modeling out the impact of increasing clinical activities on supply chain, testing capacity, and inpatient census, as these resource limitations will also govern our ability to expand capacity. We have prioritized semi-elective and elective cases, and will continue this process over the coming weeks with the goal of balancing prevention of delays with safe surgical care.

### **Update to Pharmacy Assisted Medication Reconciliation Program during COVID**

Admission medication reconciliation by Medication History Technicians (MHTs) has proven to be very successful across YNHHS. The COVID pandemic has necessitated staffing and workflow adaptations, but YNHHS Pharmacy is committed to support this resource. See attached memo for details.

### **Visitation restrictions – phase 3**

YNHHS remains in a Phase 3 visitor restriction. This means YNHHS is restricting visits from family, friends and the community until the transmission of COVID-19 is no longer a threat. Please note changes to the visitor PPE requirement and our collaboration with the Department of Developmental Services.

### **Ambulatory recommendations for discontinuation of self-isolation**

Time and symptom-based strategy is recommended for discontinuation of self-isolation and in most cases for return-to-clinic or return-to-work. Self-isolation may be discontinued 14 days after symptom onset AND 72 hours after fever resolution without anti-pyretics AND with improvement in respiratory symptoms (e.g. cough, shortness of breath). Yale University healthcare staff and YNHHS employees (including all delivery networks) may not return to work without formal clearance from Employee Health (YU) or Occupational Health (YNHHS). Please see the attached document.

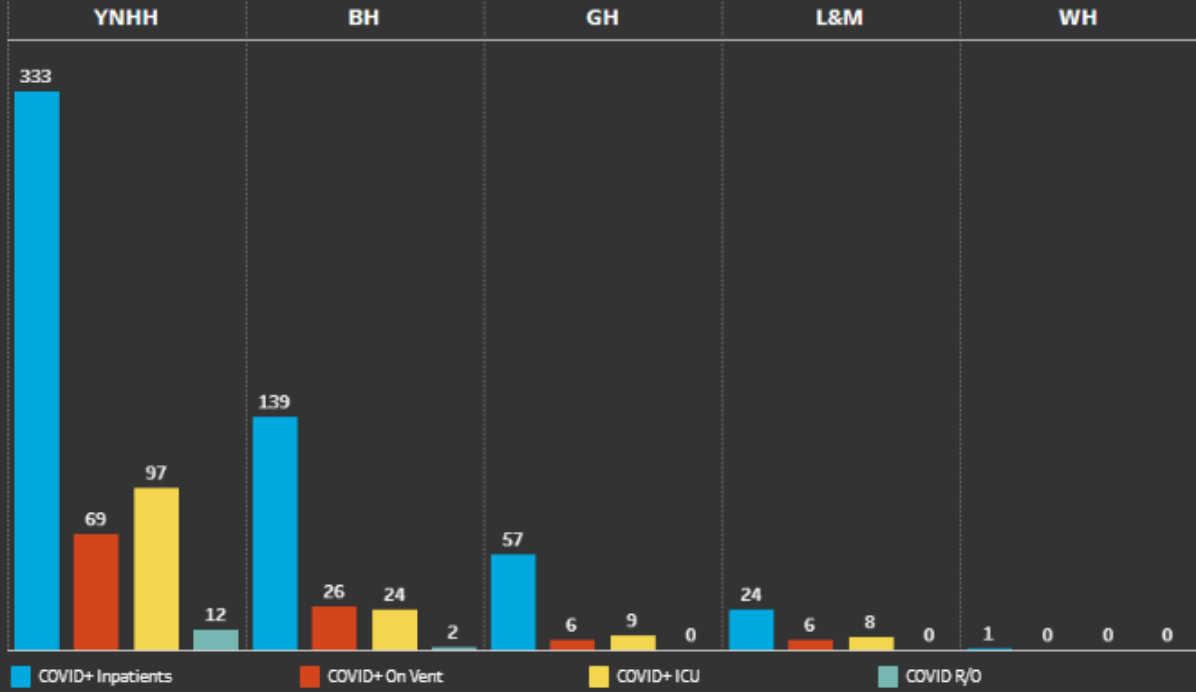
### **ITS requests**

As we transition into the Covid19 response and recovery phase, ITS will return to the standard request process as of Friday, March 8th. Please utilize the appropriate modalities:

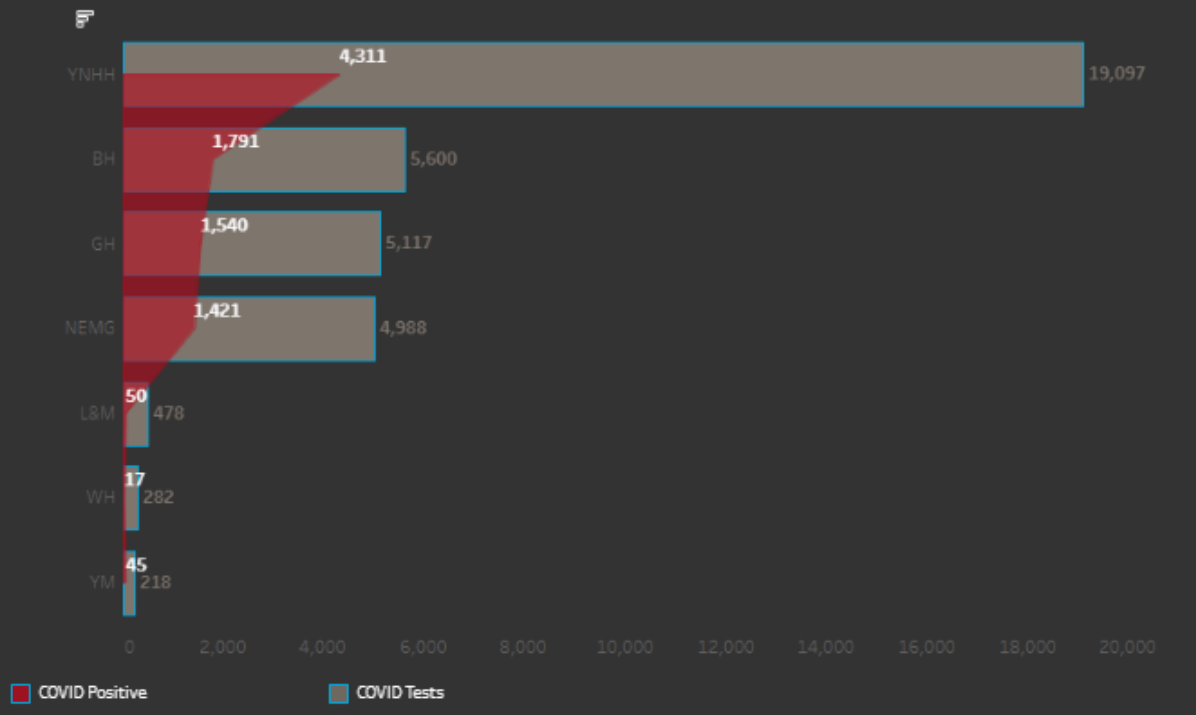
- IRMA. New projects or software solutions Including data and reporting
- Help Desk (203)-688-4357. New technology or access to existing applications (e.g, Zoom, Epic)

**Operational Snapshot (Source: JDAT)**

### Operational Data



### YNHHS COVID TESTING



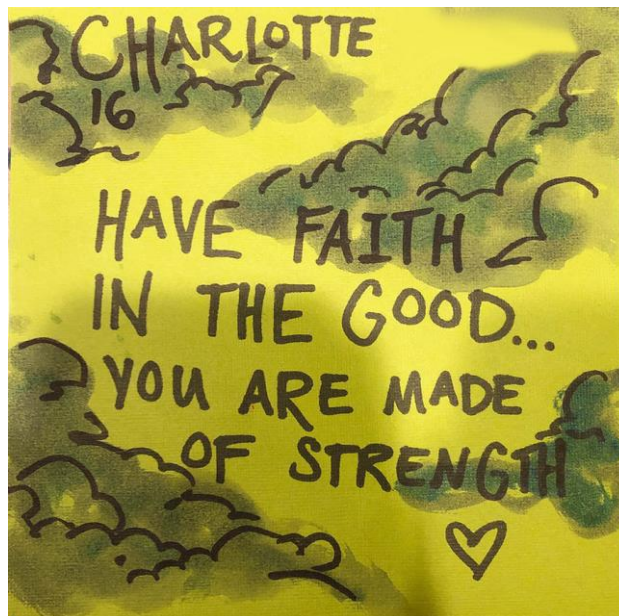
Yesterday

61

Since March 14

2,116

COVID-19 patients have been **discharged** back to their lives after being treated by our **healthcare heroes**.



## Personal Protective Equipment (PPE)

### YNHHS/YM PPE Policy

- The ambulatory and inpatient policy and related FAQ are available on the Clinical Resources site at: <https://www.ynhhs.org/patient-care/covid-19/for-employees.aspx>

### PPE reuse and collection

- ***Please do not wear makeup such as foundation or lipstick as they soil the facemasks and respirators making them ineligible for reprocessing. Makeup is the #1 cause of being unable to reprocess.***

- PPE reuse policy and other information can be found on the Clinical Resources page at: <https://www.ynhhs.org/patient-care/covid-19/for-employees.aspx>

## Clinical Care/Operations

### **Infection prevention contact email**

Please utilize the below email address for your inquiries about COVID-19 - they will be triaged with a goal of replying within 48 hours, please indicate in the subject if urgent. Please do not use this email for patient consults that are urgent in nature.

[\*\*\*COVID InfectionPrevention@ynhh.org\*\*\*](mailto:COVID.InfectionPrevention@ynhh.org)

Resources:

Attachments to this message can also be found [here](#).

Previous All Staff updates are archived and can be accessed [here](#).