Clinical Brief #2 | COVID-19

Thursday, March 26, 2020

INFORMATION FOR ALL CLINICIANS

In an effort to keep you current regarding AdventHealth's response to COVID-19, we are providing frequent clinical updates to all clinicians. The following topics are included in this brief:

- Personal Protective Equipment (PPE) COVID-19 Policy Addendum
- Tiered PPE Supply and Usage
- Health Care Provider (HCP) Exposure Updates
- Skilled Nursing Facility (SNF) Transfer Policy
- COVID-19 Cohorted Units, Designated Teams
- Implementation of Outside of Facility Triage
- Blood Inventory Management

March 25 COVID-19 Situation Report

COVID-19	CFD	WFD	MSD
Confirmed Total	99	11	7
Discharged to Home	68	9	3

^{*}Based on currently available lab test info

PPE COVID-19 Policy Addendum

HCP masking: The increasingly frequent and atypical presentation of COVID-19 cases and the need to further protect all clinical team members and medical staff requires an addendum to the PPE policy. All team members in clinical venues will now begin wearing an ear loop or surgical face mask. The mask must be checked out/in and reused at the next shift or day until soiled or damaged.

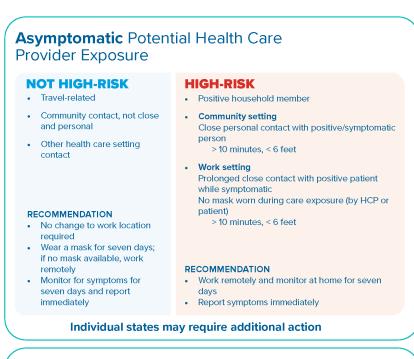
- Provide one ear loop mask per day to all staff in clinical venues
- Use until soiled or unusable; i.e., multiple days
- Formalize checkout/in procedure
- N95 respirators will be issued based on exposure to <u>high-risk transmission cases</u> per policy

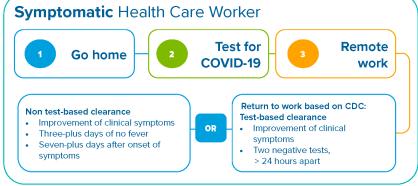
Tiered PPE Supply and Usage

Supply Chain and AdventHealth Clinical will review PPE specifications to ensure maximum protection. Team members are expected to use PPE in the following order. Team members should only be using Tier 1 as of this time, until otherwise direct by the System Command Center.

- Tier 1 Commercially available, clinically certified PPE
- Tier 2 AdventHealth-approved, commercially produced, non-certified PPE
- Tier 3 Locally sourced masks (only use when Tier 1 and 2 aren't available)

Health Care Provider Exposure Updates







Skilled Nursing Facility (SNF) Transfer Policy

The Centers for Medicare and Medicaid Services (CMS) has waived the three-day stay requirement for all discharges, regardless of their COVID-19 status, to allow hospitals to free up beds.

Non-COVID-19 patients may be transferred and discharged to a post-acute care facility if a home setting is not available.

Persons under investigation (PUIs) awaiting COVID-19 test results cannot be transferred to a postacute care facility until their test results are negative and that facility follows their state guidelines for transfer.

Confirmed COVID-19 patients may be discharged to such a facility if:

- Afebrile >72 hours without use of antipyretics or seven days after onset of symptoms whichever is longer
- Released by the state public health department
- Have a negative test result, if state requires

SNF transfer forms must be used for <u>Texas</u> and <u>Florida</u>. For <u>North Carolina</u>, a decision grid is available. Georgia, Kansas, Kentucky and Wisconsin may click <u>here</u> for Centers for Disease Control and Prevention (CDC) guidance.

COVID-19 Cohorted Units, Designated Teams

To conserve PPE and confine the infection to one area, if clinical leadership has not already, they should oversee:

- Cohorting and grouping together confirmed COVID-19 patients into one area of the hospital
- Assigning of designated teams of HCP to provide care during their shifts for all suspected/confirmed COVID-19 patients

This strategy is per the CDC.

Implementation of Outside of Facility Triage

All facilities should implement out of facility triage by end of business Friday, March 27, to conserve PPE and limit staff exposure.

Conserve Blood Inventory from COVID-19 Donation Decline

Due to COVID-19, blood donations are declining. There is no evidence that COVID-19 poses risk to donors, and no PUI or positive cases related to transfusion or transmission have been reported. The recommendation is that facilities proactively prepare for the possibility of blood supply decline by activating internal disaster plans and protecting blood product inventory.

Transfusion Services

- Contact your blood supplier and request a written update on current and future blood inventory
- Organize current inventory, using shortest expiration dates first
- Label shelves appropriately for ease of communication between team members and shifts
- Issue short-dated products first
- Avoid pre-allocation of units
- Share blood inventory and action plan with medical staff

Clinical Team

- Maintain a strict adherence to blood transfusion guidelines
- Transfuse appropriately based on patient status and clinical condition
- Minimize unnecessary requests for blood products
- Minimize wastage

For the March 25, 2020, Clinical Brief, click here.

We encourage you to take care of yourself, your families and each other as we move through this ongoing response to COVID-19.

GREATER AS A WHOLE | RESOURCES

Online

Novel Coronavirus Information Site | Providers | FAQs

AdventHealth Coronavirus Website | Videos | Blog

Centers for Disease Control and Prevention (CDC)

Department of Health: Florida, Georgia, North Carolina, Kansas, Kentucky, Texas, Wisconsin

Worldwide Coronavirus Data: Johns Hopkins' Global Cases Webpage

By Email:

CoronavirusQuestions@AdventHealth.com

By Phone:

Information Hotline: 877-847-8747