UHB 3/22:

## PPE:

We have a stock of heavy duty goggles for all the PA's, attendings, and residents thanks to Dr Arquila for buying these for us. We will be giving these out this week through Patti Roblin at 440 Lenox Road suite M (disaster office). You will need to sign out for these. The goggles can be reused so please clean them after each shift. We are still having everyone take a new N95 at the start of your shift.

## Phones in the room:

Phones have been installed in every room in the main ED. The Directory for the numbers are posted by the phones and also attached to this email. Rooms 1-4 unfortunately have the same extension which can't be fixed, so you can't talk to more than one patient in these rooms at a time. You can use these phones to take a patient history or if you need to ask any questions. This will hopefully limit your exposure time. The phone extensions are attached to this email.

## Admissions:

When admitting this patients, please select "Adm Iso" and add "R/O Covid". This helps the registrar make the appropriate bed requests.

**Imaging:** imaging should be portable xray and no CT scan unless they are looking for something not related to COVID, and then again, only if needed emergently. Should coordinate with CT tech and radiology; let's not expose them if we don't have to expose them.

## Intubations:

see attached for some guidelines that may help.

## SHARED FROM DR GLEYZER:

as per NYC DOH, outpatient coronavirus testing will not be done anymore. 311 callers will receive counseling only, not a referral for testing. SARS -Co2 is a prevalent pathogen in the community. Anyone with fever and/or cough/sore throat - assume COVID19 infection.

NYC DOHMH released Advisory #8 this afternoon that states: "IMMEDIATELY STOP TESTING NON-HOSPITALIZED PATIENTS FOR COVID-19...Persons with COVID-like illness not requiring hospitalization should be instructed to stay home. It is safer for the patients and health care workers and testing does not currently change clinical management or recommendations about staying home.

# INTUBATION RECOMMENDATIONS

MARCH 21, 2020

## CONSIDER AN ICU CONSULT AND EARLY INTUBATION IN PATIENTS WITH INCREASING O2 REQUIREMENTS

#### PRE-INTUBATION ASSESSMENT

- Avoid Bipap
- Check equipment before entering the room
- Call respiratory early to set up the vent before intubation
- If MAP<70 mm Hg, start vasopressors before intubation
- Set up ETCO2 detector prior to intubation

### INTUBATION

- Intubation should be performed by senior resident or attending only
- Full PPE is required for intubation
- USE GLIDESCOPE: maximize distance between doctor and patient
- Perform rapid sequence intubation
- Avoid manual ventilation: if needed use small tidal volumes and two-hand mask seal
- Confirm with ETCO2 and disposable stethoscope
- Recommended tidal volumes: 6-8 cc/kg

### POST-INTUBATION

- Dispose of all disposable equipment in trash bin
- Wipe down reusable items with saniwipes
- Doff all PPE and put in to trash bin
- Wipe down reusable items again with saniwipes and put in plastic bag
- Wash hands thoroughly

FOR ELDERLY PATIENTS CONSIDER AN EARLY ICU CONSULT TO DISCUSS GOALS OF CARE WITH PATIENT AND FAMILY

• Text page 917-205-0626 with MRN and "COVID" with your name and call back number