

CMO SPECIAL REPORT: COVID-19 UPDATE

FROM THE DESK OF

Amy Tucker, MD, MHCM, Chief Medical Officer, Upstate University Hospital
Associate Dean for Clinical Affairs, College of Medicine
Vice President, Ambulatory Services and Population Health, Upstate Medical University

UPSTATE
UNIVERSITY HOSPITAL

MARCH 24, 2020

Routine Use of Surgical Masks

We have heard, and sympathize with, your concerns and requests to routinely wear masks throughout the day whether or not you are caring for a patient with suspected or confirmed COVID infection. Please know that this issue is a major topic of ongoing, thoughtful deliberation by the experts on the COVID-19 team. We are aware of, and have reviewed, the scientific data, articles in the lay press, the recent “Matilda’s Law” recommendation by Governor Cuomo, practices at other organizations, and a variety of other data sources. Staff safety and the safety of our patients is Upstate’s top priority. Maintaining our supply of PPE for the increase in COVID cases is our second priority.

In an ideal situation with unlimited supply of masks and other PPE, and if our incidence of COVID were known to be significantly higher, we would recommend more liberal use of masks for clinicians involved in patient care. In fact, this is not currently possible for a number of reasons. At our current PPE use rate, we have a twenty-day supply of both surgical masks and N95 masks, without a foreseeable replenishment. Other forms of PPE are also in limited supply. So far in our community, the percent of positive COVID tests is still low, at 2.9%. We expect prevalence to increase significantly over the months to come. Some New York City hospitals have run out of masks entirely. At present, we have 2 COVID+ patients in the hospital. We expect this to increase significantly over the months to come. We want to conserve some PPE for times when the risk of transmission is higher. From a safety perspective, constantly wearing masks in between patient encounters results in frequent touching of the mask, mask adjustments, wearing the mask improperly (below the nose), touching of the face, and other actions which actually increase the risk of personal contamination in the event the mask captured an infected virus droplet. Additionally, every time you don and doff a mask you create a potential contamination event. At this point, to conserve our PPE for when the risk of potential transmission is higher, strategic use of PPE is imperative. The grid below outlines the COVID team’s PPE-use recommendations. This guidance is based on collective expertise of the COVID team and the desire to provide a safe work environment now while preserving the ability to maintain a safe work environment in the future.

Please follow the guidelines in the attached grid, and encourage your colleagues to do the same. Please trust your experienced COVID team and follow their guidance. There are numerous sources of information in the scientific and lay press, TV, our specialty society communications, and in social media; these do not represent Upstate guidance. We are counting on each of you, as leaders, to model proper PPE use. The COVID team is

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constantly monitoring the situation and will adjust course and modify our PPE recommendations when conditions change.

Thanks to you all,

Stephen Thomas

Amy Tucker

Nancy Page

Exposure Scenario	Patient's PPE	Staff PPE	Staff Action after Contact / Potential Exposure
No Known Exposure	None Recommended	None Recommended	No action
COVID Ruleout Patient	Appropriate PPE* for Patient	Appropriate PPE for Staff**	No action
	Patient without PPE	Appropriate PPE for staff	No action
	Patient without PPE	Inappropriate PPE for staff	***Continue to work, monitor symptoms and temperature until test COVID test results available, if longer than 48 hours for test results wear surgical mask
COVID Positive Patient	Appropriate PPE* for Patient	Appropriate PPE **	No action
	Patient without PPE	Appropriate PPE for staff	No action
	Patient without PPE	Inappropriate PPE for staff	***Continue to work, wear a mask, monitor symptoms and temperature for 14 days or until symptoms develop. For symptoms, seek medical care
COVID Positive Patient having a High Risk Procedure. (eg FOB/BAL, NP swab collection, Intubation, Surgical procedures which could aerosolize)	N/A	Appropriate PPE **	No action
	N/A	inappropriate PPE for staff	***Continue to work, wear a surgical mask, monitor symptoms and temperature, continue monitoring for 14 days or until symptoms develop. For symptoms, seek medical care
Staff member positive for COVID			Should not work for at least 7 consecutive days. Contact Employee Health prior to returning to work.
Staff member awaiting COVID result			Self-quarantine at home until results are available. For symptoms seek medical care
Staff member returning from domestic travel without known COVID+ contact			***Continue to work, monitor symptoms and temperature, continue monitoring for 14 days or until symptoms develop. For symptoms, seek medical care

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* Appropriate patient PPE = surgical mask

** Appropriate provider PPE = N95 mask or PAPR for clinician OR both patient & provider wearing surgical mask; goggles or shield; gloves; gown

*** Incubation period from time of exposure to time of symptoms ~5 days; Earliest time from exposure to time of potential infectiousness estimated at 2.5 days;

Current time from sample collection to COVID test results < 48 hours

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