

COVID-19 Service Orientation: A Day on Service

Last updated June 19, 2020

Thank you for your service! We are in a historic time that will likely define decades of patient care. Your assistance beyond what was expected is a testament to the nature of our profession. We appreciate your service!

Purpose: To orient non-hospitalist providers and residents for PUIs/COVID-19 teams

Hours	Start time: 7:00am Checkout time: 4:30pm and complete remaining work
Assigned IM Hospitalist	You will be notified of their contact information
Contact for Questions	Dr. Kornswad, (702) 769-5183
Materials to review BEFORE first day	1.) This document 2.) Separately provided "COVID Manual"

Preparation for a PUI/COVID-19 Team

Step 1: Watch the video how to perform donning and doffing. **PLEASE NOTE:** N95 will only be used in high risk for aerosolizing droplets (frequent suctioning, nebulized treatment, intubation, bronchoscopy). A regular surgical mask can be used instead for all other PUIs/COVID+ patients. Please refer to PPE section in COVID Manual. The video below shows N-95 usage.

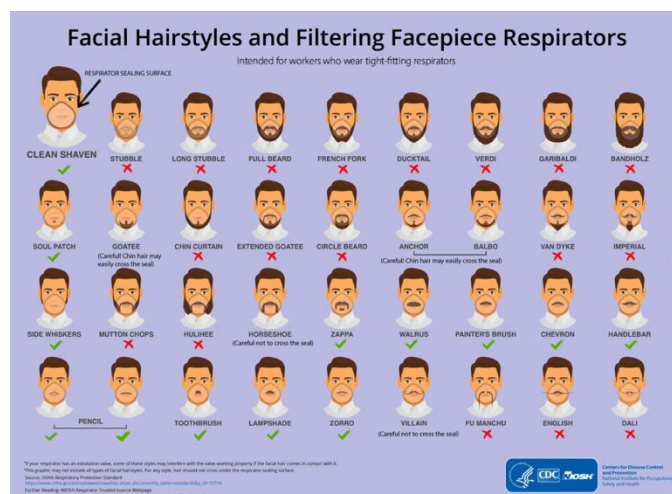
<https://www.youtube.com/watch?v=bG6zISnenPg>

Step 2: Please try to get your N-95 fitting prior to start on service If you have not already done so. See below regarding facial hairstyles that are appropriate with N-95 usage. If you have had an N-95 mask fitting in the past, there is no need to be retested. The rules have been relaxed for this pandemic situation.

House staff can contact University Health System Employee Health Services at 210-358-2277 to schedule their N-95 mask fitting.

- Employee Health will see you as a walk-in; however, you might want to call ahead to avoid long waits.
- Walk-ins are easiest to accommodate between 9 a.m. and 3:30 p.m.

Faculty and all other UT Staff will need to contact the UT Health environmental health department at 210-567-2955 to make their appointment for N-95 mask fitting.



Step 3: Read the COVID-19 Manual for material on how to care for Patient Under Investigate (PUI) and COVID-19 patients

Step 4: Attire

- Please only wear scrubs to work and make sure they are laundered before every use
- We recommend that you change out of your scrubs at the end of the workday before entering your home
 - Consider changing in staff locker room or in your car
 - If you already have access to the Cintas machines, consider changing in/out of scrubs at the hospital
- If you have long hair, please tie up your hair
- Jewelry is discouraged
- Ties and bowties are discouraged
- Consider using a separate pair of shoes for care at the hospital

Day of service for COVID-19/PUIs team

Location: 5ACU/ICU sky tower

7:00 am:

- Report to assigned IM attending to get patient assignments and updates from overnight. Create patient list on sunrise.
- Review patient chart (**vital signs, new labs, consultants' recommendations**)
- Please contact the 5ACU clerk to get one surgical mask if you have not received one upon entering building at screening desk. You will wear this mask for all patient encounters unless N95 is indicated. Mask should be appropriately doffed and placed in a paper bag when not in used during meals. (Guidance for which rooms require N95 will be in the COVID manual)
- **Rounding:**
 - Cisco phone may be available for you to call patient's room for non-urgent matter issues (Please refer to the room phone number section in the COVID Manual).
 - Multidisciplinary rounds with infectious disease and case manager about twice a day (please refer to the Patient Rounding section in COVID Manual)

Before patient encounter

- Donning per the video. Please note because UHS has adopted universal mask protocol, you are already wearing a surgical mask
- If you need to use a stethoscope then follow instructions in COVID manual for sanitizing current one in room
- If you need a Cisco phone for translation then ask gatekeeper for instructions to bring in and remove phone from room
- If it's your first time donning and doffing then please let your gatekeeper know. He/she can more closely monitor you during your first time and provide further guidance
- DO NOT bring any paper, pen, cell phone, personal stethoscope into the room

During patient encounter:

- Perform only the physical examination elements most essential for clinical diagnosis and decision making
- Press the red call light button on patient's remote to get assistance from outside/gatekeeper

After patient encounter

- Doffing per the video

- If you feel your mask has become contaminated (by touch, cough, water droplet contact), please discard the mask and ask for a new one from gatekeeper/PCC after you leave the room
- We recommend you write down important history and exam findings for the patient immediately after exiting room to avoid confusion later when writing your note. Another option is to just immediately finish your note on the computer
- If any of your patients meet severe disease criteria or are decompensating (refer to the COVID Manual, section How to care/transfer a critically-ill patients), please report this to your IM hospitalist immediately and page the ICU COVID team 210-513-0363

Post-Round Duties:

- If you are a resident then please review all your patients with your IM Hospitalist, enter needed orders (refer to COVID Manual, sections General Management and COVID Specific Treatment), page consultants.
- If you are a faculty then please review patients you have questions on with your IM Hospitalist, enter needed orders (refer to COVID Manual, sections General Management and COVID Specific Treatment), page consultants.
- Write daily notes on all your patients (medicine/faculty admission H&P, progress note or discharge summary). Please refer to COVID Manual, section Documentation tips for helpful acronym expansions.
- Perform afternoon interdisciplinary huddle with infectious disease & case manager teams. Times will vary based on ID team's availability.

4:30 pm: Sign out

- If you do not have access to the hospitalist's Teams App channel, run your patient list with the IM Hospitalist so they can update the sign out sheet.
- If you have access to the hospitalist's Teams App channel, update the sign out sheet for assigned team.
- For help with accessing the sign out sheet, refer to the COVID manual under rounding

****Due to the visitor policy, it is very important to contact patient's families and update them daily.**

What to do when you leave the hospital

Currently there is no official guideline for health care providers on what to do when they leave the workplace but below are some recommendations.

- Remove your scrubs & shoes before you enter the house if you have not done so after leaving the hospital
 - Consider using the staff locker room or personal car as a changing space
- Wash your hands per protocol and take a shower immediately
- If using a shared bathroom then disinfect touched surfaces of bathroom after shower (consider temporarily designating a bathroom for only post-hospital use)
- Washing your work clothes in a different load than other laundry
- Avoid physical contact with anyone until after your shower
- Wipe down surfaces with proper disinfectants that you commonly touch pre-shower (e.g. steering wheel, dashboard, doorknobs, door lock)

Health Care Provider (HCP) well-being is of the utmost importance. As an HCP, you should self-monitor by taking your temperature twice daily and evaluating yourself for COVID-19 like illness. The timing of these checks should be at least eight (8) hours apart with one check immediately before each work shift. If you have any of the following symptoms, DO NOT come to work, you MUST stay at home and immediately notify your supervisor.

- Fever (subjective or temperature of greater than 100.0° F or 38.0° C)
- Cough

- Shortness of breath
- Sore throat
- Diarrhea
- Nausea
- Vomiting
- Muscle aches
- Malaise (feeling tired or run down)

Guidance for home self-isolation duration and when to return to work can be found in the COVID Manual

UT Health Provider Hotline

This is staffed by trained nurses and will be our point of contact if we think we may need testing for COVID-19. They take calls from UT Health faculty, staff, and students. Phone number is: (210) 450-8000. It will be available M-F 8a-5p and 10a-4p on the weekends.

UHS Provider Hotline

This hotline (210-358-9999) is for resident and fellows working at UH. For resident and fellow use if experience symptoms and need guidance. If you become aware of a colleague or resident who was exposed, please contact the staff working the hotlines, who will provide further recommendations.