

Calgary Zone Department of Emergency Medicine COVID GR

Q&A - April 9th

1. Under the new guidelines, should we be retesting Calgary patients with prior negative swabs and persistent or progressive symptoms who are not sick enough for admission? Had a case like this yesterday and wasn't sure.
 - Your discretion Katie - no specific guidance but I would. We know sensitivity is <90%
 - Thanks!

2. I was able to get scrubs @ FMC yesterday
 - Do you want to share where you got them from and the process?
 - Just at the linen office in the basement at FMC - they only asked for my name. The nurses told me that there may be limited numbers available though.
 - For females the OR locker room/ground floor change room has scrubs and code is 420*
 - Just got AHS memo stating that Scrubs order is delayed to late April/early May and will NOT be available to non-surgical staff. This was for SHC specifically but may apply to all sites.

3. What about hoods covering head and neck like in Ebola pandemic?
 - These pieces of PPE are not part of the current AHS recommendations.
 - Many other jurisdictions using head and neck coverings. Current PPE gowns leave neck, hair and upper chest exposed.
 - I share this concern as well, especially with AGMP. Please provide rationale. Thank you.
 - If this is not answered by Kat Linton - we will bring it up at the end
 - Kat Linton will address this
 - The primary reason we aren't recommending these pieces is that we are not familiar with doffing them. Therefore, you are more likely to self-contaminate while using an unfamiliar piece of PPE. Additionally, they are not recommended by WHO or PHAC.
 - Thanks Craig. This is completely valid. I appreciate the response. I wonder if an exposed neck covered with infected droplets after performing an emergency intubation would be very high risk for self-contamination? In Vancouver coastal health, health care providers are recommended to shower after all AGP of suspected COVID patients....
 - I understand low risk of transmission to neck/chest given droplet/contact but during AGMP procedures/resuscitation I wonder if we should consider covering all exposed surfaces. If doffing is a challenge, education/doffing coach could be used?

4. Any guidance re: separately purchased goggles for those with difficulty wearing safety glasses?
 - You can ask the department for supply of AHS approved goggles.
 - what about prescription safety goggles? Those have to be bought outside of AHS. Are their guidelines for what is adequate or what standards need to be met?

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5. On procuring PPE for the future. I have a friend working with the NHS in England and he states much of the masks purchased from China have needed to be thrown out as they are of so poor quality they aren't useable. It seems this occurred in Ontario recently. Do we know if AHS is aware of this issue?
- Health Canada has standards specifically for masks and face shields. CSA and other standards. Agree risk of using "quick PPE" is that quality may be low and we may feel falsely reassured that we are protected. AHS would vet "safe" PPE
 - Thanks Kathryn.
 - Deedo - To be fair, the items ordered by the NHS were supposed to meet standards there and didn't when they arrived.

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6. "What are people doing re: stethoscopes?
a) abandoning them? (high NNT for change in mgmt)
b) wiping them?
c) using in-room stethoscopes"
- I'm using in-room steths. as much as possible.
 - The in-room stethoscopes are so bad that it might be better to do nothing IMHO
 - Agree, Marc. Also not convinced they are always and adequately cleaned.
 - Answer is coming from IPC- Kat Linton - stay tuned
 - How often does the stethoscope actually change your management? Pretty rare to be fair.
 - I'm using them mostly for the placebo effect. ;)
 - Risk of personal infection > Placebo effect
 - If you have to wipe it all down first than why would you not use your own that actually works

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7. Makes sense that we get and leave scrubs at the hospital and take a shower there before leaving. The ORs should be "quiet" can we access these areas for scrubs and showers?
- This is site specific, please contact the specific Site Command Post to determine access to staff areas. Their email address is SCP.Calgary.RGH@ahs.ca (changing the site abbreviation)

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8. Any progress with the no fixed address population? If the shelters cannot accept them back, do you still admit them all?
- Hopefully discuss this next week at rounds.
 - Iso hotel starts Friday, details to follow

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9. "practice PPE sessions email came to me this am.
Sent on behalf of the Site Command post

FMC PPE educations sessions – 30 minutes

Starting today, the FMC site will be offering PPE educations sessions with a particular focus on donning and doffing.

Where: Coombs lecture theater

When: Monday to Friday (excluding STAT holidays) between the hours of 0715 to 1115 and 1200 – 1400

Length: Sessions are approximately 30 minutes long with a maximum of 6 participants each (social distancing will continue to be observed).

These sessions will be drop in so please feel free to send any staff you feel may benefit from this education. These sessions might move to sign up basis but are being launched with a drop-in format for now.

Thank you,
FMC PPE Working Group"

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10. I haven't been able to find any reliable info re. breastfeeding and COVID. I'll still be nursing when I return from mat leave. I know some parents are preemptively isolating from their families/kids even in the absence of symptoms (concerned re. asymptomatic spread), but this won't be an option for me. Beyond usual handwashing, any specific recommendations?
- Current AHS recommendations are for symptomatic patients to wear a mask when breastfeeding with appropriate HH.
 - CPS had a related document this week <https://www.cps.ca/en/documents/position/breastfeeding-when-mothers-have-suspected-or-proven-covid-19>
 - Excellent question. WHO supports continued breastfeeding in setting of COVID-19 (even for affected mothers). I will find and send the resource. Of course mask and hand hygiene.

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11. Any clarification re: NP swabs being a nursing or MD order? I've been doing it if I think of it before I see the pt (bring swab in with me), but if I cohort with other orders after I exit room, have gotten pushback from some nurses
- Either care provider can do it. Makes sense that if you are in there in PPE that you do it.
 - thx Neil
 - Thx for clarifying - definitely do it myself if already in PPE, its just those low pre-test pts who I see and then decide to treat as COVID

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12. CPS had a related document this week <https://www.cps.ca/en/documents/position/breastfeeding-when-mothers-have-suspected-or-proven-covid-19>

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13. Dr Yiu mentioned re sterilizing n95 yesterday with steam. wondering how these will be tested to ensure sterility and if this process has been used elsewhere with success
- A good US site is N95decon.org that organizes all the current research on this topic. MDR worked with WHS to ensure fit testing is not an issue. They used PortaCount testing, which is a quantitative test.
 - being answered right now by Dr. Conly

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14. If this is the case then should we start saving the N95s now?
- being answered now

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15. Regarding cardiac arrest patients arriving with supraglottic devices (i.e., King LTs) and ongoing CPR: Are there any official opinions/recommendations on risk of aerosol generation with CPR/supraglottic devices/bagging and continuing CPR without endotracheal intubation?

This would seem to be a reasonably low risk procedure given the inflated balloon and there are clearly patient harms with stopping resuscitation of stopping CPR to place a definitive airway, but safety of the care team should be paramount.

If we are doing CPR in patients with supraglottic devices in place, 2 mitigation strategies might include:

1. Using a 30:2 compressions to respiration ratio until ETT placed
2. Cutting a slit in the center of a simple surgical mask, remove the bag, and place the supraglottic device tube through the tube, then put the mask on the patient's face which might prevent droplets leaking past the balloon aerosolizing into the room.

Thoughts?

- Clear guidance on this should be coming in the next day or so. It is high on the agenda.
- thx Ian.
- This is where I think the Mayo tray + clear drape would also be helpful. Mitigates risk of aerosolization, can see the pt face, can continue CPR, and easily discardable/cheap.

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16. I am confused around eye protection for AGMP. What is the difference between "safety glasses" and "goggles"?

- Kat Linton from IPC will speak to this
- being answered now - either are fine according to Dr. Conly

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17. put another way - are standard safety glasses that most have in the ER adequate by themselves for an AGMP?

- Yes, the important aspect is full coverage of the eyes, including protection from side splashes.
- Kat Linton will also speak to anticipated trajectory of droplets for face coverage
- from gavin - <https://www.homedepot.ca/product/milwaukee-tool-safety-glasses-with-clear-lenses/1001486318> Craig, just found this image. These are similar to the blue rimmed glasses we have in ER. These are adequate for AGMP?
- I can't copy/paste that link, but the unit should have adequate stock to supply you with safety glasses. I don't believe we have a specific document about what is AHS approved.

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18. What are the "big picture" plans being made if EMS reaches capacity and we need to move critical / intubated people from Urgent Cares to the EDs?

- Raj - we won't be covering this today but can try and discuss this next week
- Thanks Shawn, this will affect our plans at the Chumir - can we talk offline later this AM, maybe?

- definitely.

19. To be fair, the items ordered by the NHS were supposed to meet standards there and didn't when they arrived.

- You can report any issues with medical equipment using the form linked here <https://insite.albertahealthservices.ca/cpsm/Page5995.aspx>

20. I've seen people using cell phones in the dept for pt care, while in Ziploc bags - better or worse than just wiping them down frequently?

- good question - will ask
- Hey Raj, many of us do this as well ... make sure you treat the "dirty" bag as just that following your shift.
- I feel like that ziploc gets "dirty" so fast, and then we keep touching them, putting them in our pockets, etc... I'm just wiping down my iPhone each time when I do my hand hygiene.... keep it cleaner?
- here is the AHS document on this - <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-cleaning-disinfection-poster.pdf>

21. What is the best way to clean your reusable goggles?

- good question

22. Craig, yes we have lots of the blue rimmed safety glasses. My question is are those adequate by themselves for an AGMP? You could type that link into your browser to see an image of glasses that are similar to the ones in the ER.

- addressing now gavin
- Those look sufficient, perhaps a bit hard to clean fully though.
- FMC found the glasses get a bit cloudy after disinfecting a bunch of times. They said that an occasional soap and water wash removes the cloudy film.
- Also, Kimwipes are the recommended wipes for goggles/shields

23. Can we wash our reusable glasses with soap and water? Often times we doff into a sink, so it seems logical to use it.

- agree - good question - disinfectants ruin the lenses as well
- see above Katie - Also, Kimwipes are the recommended wipes for goggles/shields

24. I've been using the CaviWipes on my goggles, and it seems to strip the coating off of them, leaving the view very streaky. Does anyone have suggestions to avoid this?

- Consider using Kimwipes (purple package) for cleaning your goggles. Less stripping of the coating/streaking

25. Thanks Craig. My take home is that the eye protection for an AGMP does not need a "seal" (i.e. goggles)

- Correct.

26. can faceshields be sterilized and recycled for reuse?

- Potentially, but at this point they are not being cleaned or reused.

27. are the 3M 7500 reusable respirators going to be approved? This will conserve N95 supplies.

- Colleen, happy to address questions about that through the PPE insurance committee. Not a departmental initiative

28. Team, would there be interest in ordering more scrubs? I can look into doing another scrub order but wont be providing sizing samples due to risk of contamination.

- maybe email the group via the Tuesday newsletter?
- <https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-hlthcare-attire-scrubs-uniforms-info-sht-z0-bpr-pt-care.pdf>

29. Stethoscope cleaning?

- answered now

30. Any comment re: which wipes would be safest on cell phones?

- kimwipe I believe. Kathryn?
- <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-cleaning-disinfection-poster.pdf>
- Craig can you share this with all?

31. committee group. Not a departmental initiative.

32. for goggles, use of 70% fine mist spray to clean vs streaky cavi-wipes.. thoughts?

- No, we need the physical action of cleaning. Soap and water will remove the cavi-wipe cloudy film
- "Kat from IPC suggested the kim tech wipes which are alcohol based. The accel wipes are hydrogen peroxide and would be a good second choice. Basically whatever the nurses use to clean anything with a screen. The caviwipes are quite harsh and cause those problems"

33. are there any concerns re wipe supplies? noting at FMC kimtech wipes seem to be hard to find

- They are harder to find as they weren't used that commonly prior to COVID but supply is sufficient I believe.

34. Was involved in CPR with King airway - RT advised both goggles and face shield for intubating. Is this an official recommendation? hard to see as I wear my own glasses too.

- no need for double eye protection

35. Are we planning to increase the number of housekeeping staff? They are working hard, run off their feet and I have seen multiple episodes of corner cutting (e.g., one single wipe across the front of the ophthalmoscope/otoscope rack without removing the actual device which is at high risk of being contaminated)

- can you ask this to Neil/Eddy?

36. always wear gloves when using wipes?

- I would. My opinion - not based on any specific policy

37. clearly there is ongoing confusion around eye protection - see Nicola's post. Could Kat address this?

- I'll discuss with her offline and send out the response

38. Hi Shawn, saw your comment re twitter. Most of us are likely not on twitter. Will some kind of summary document around all aspects PPE be going to our departmental university web page?

- yes - like all the prior rounds - Q and A questions will be sent out
- perfect