

# COVID-19 UPDATE

## March 26<sup>th</sup>, 2020

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# Public Health Reminder

Healthcare facilities and clinicians should prioritize urgent and emergency visits and procedures now and for the coming several weeks. The following actions can preserve staff, personal protective equipment, and patient care supplies; ensure staff and patient safety; and expand available hospital capacity during the COVID-19 pandemic:

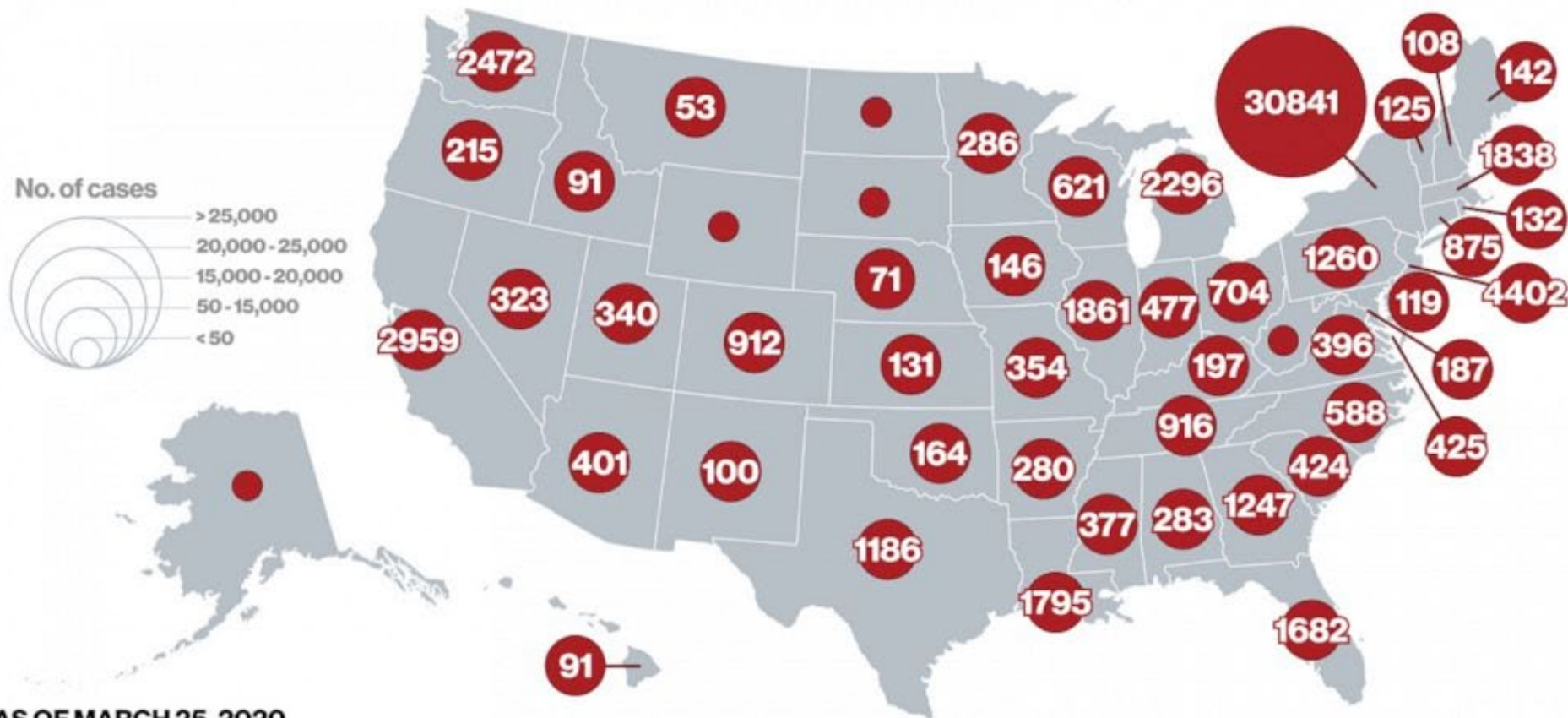
- Delay all elective ambulatory provider visits
- Reschedule elective and non-urgent admissions
- Delay inpatient and outpatient elective surgical and procedural cases
- Postpone routine dental and eyecare visits
- [Tools](#) and [resourcesexternal icon](#) exist as part of healthcare system preparedness plans and are often referred to as Pandemic Plans. Consult your state or local health department about specific plans for your community.

# The Use of Personal Protective Equipment by Anesthesia Professionals during the COVID-19 Pandemic

The CDC recommends a combination of approaches to conserve supplies while safeguarding health care workers and when there are existing or projected shortages of N95 masks:

- Implement engineering and administrative controls to minimize the number of individuals who need to use respiratory protection.
- Where feasible, use alternatives to N95 masks (e.g., other classes of filtering face piece masks, face piece air purifying respirators, and PAPRs). For more details on these respirators, see CDC's "[A Guide to Air-Purifying Respirators.](#)"
- Implement practices allowing extended use and/or limited reuse of N95 masks.
- Prioritize the use of N95 masks for those personnel at highest risk of COVID-19 exposure and/or those anesthesia professionals in high risk categories (e.g., those with prior health conditions, older age).
- Masks approved by the National Institute for Occupational Safety and Health (NIOSH) typically used in the construction and manufacturing industries but not currently meeting the Food and Drug Administration's (FDA's) requirements may be effective in protecting health care personnel from airborne exposure, including COVID-19.

# U.S. CORONAVIRUS CASES



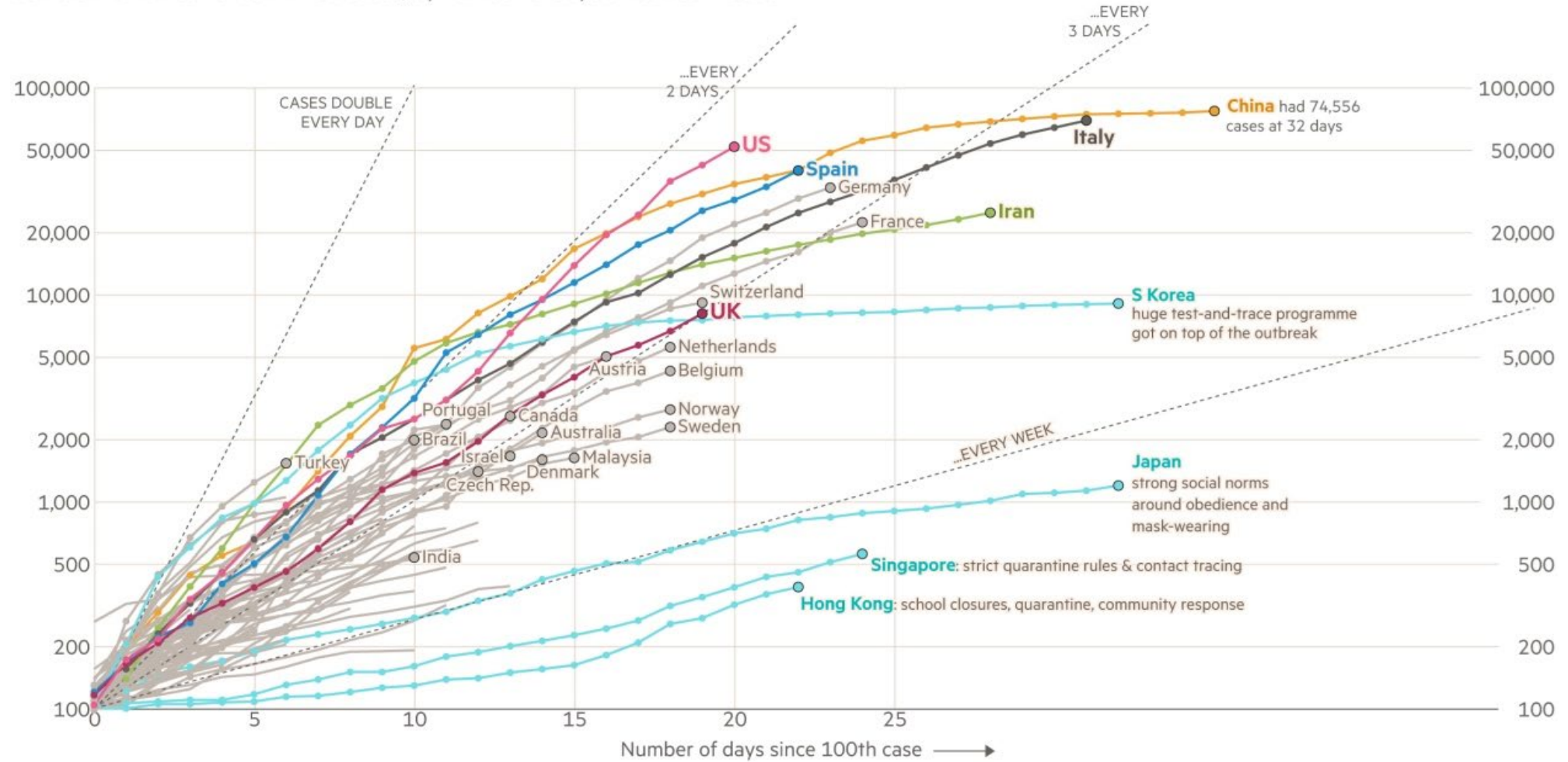
AS OF MARCH 25, 2020

SOURCE: JOHNS HOPKINS CSSE

\*Does not include individuals repatriated to the US from Wuhan, China, and from the Diamond Princess cruise ship.

## Country by country: how coronavirus case trajectories compare

Cumulative number of confirmed cases, by number of days since 100th case



FT graphic: John Burn-Murdoch / @burnmurdoch

Source: FT analysis of Johns Hopkins University, CSSE; Worldometers; FT research. Data updated March 24, 19:00 GMT

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**Question:** Can physicians who are licensed out of state provide medical care in Connecticut at this time?

**Answer:** Department of Public Health Commissioner Renée D. Coleman-Mitchell has signed an order permitting the temporary suspension of the requirements for licensure, registration, or certification in a number of medical professions for those who have the appropriate credentials in another state. This will allow Connecticut to accept support from neighboring states and will continue the state's collaborative, regional approach to combating COVID-19. Practitioners should note that until further executive action is taken, these practitioners are not able to prescribe controlled substances. This is currently being worked on by the administration. The order by Commissioner Coleman-Mitchell does not change insurance coverage or insurance networks. Please check with your insurance carrier in regards to whether a practitioner is covered. Question: Can I receive telehealth services from a practitioner who is based out of state? Answer: Section 5(b) of Executive Order 7G allows a clinician licensed in another state to treat someone in CT through telehealth without getting a license in CT. However, please check with your insurance carrier to understand whether an out of state telehealth provider will be covered.

# Protect others from getting sick

When coughing and sneezing  
**cover mouth and nose** with  
flexed elbow or tissue



**Throw tissue into closed bin**  
immediately after use

**Clean hands** with alcohol-based  
hand rub or soap and water  
after coughing or sneezing and  
when caring for the sick



Protect yourself and others from getting sick

## Wash your hands



- after coughing or sneezing
- when caring for the sick
- before, during and after you prepare food
- before eating
- after toilet use
- when hands are visibly dirty
- after handling animals or animal waste



**416,686**

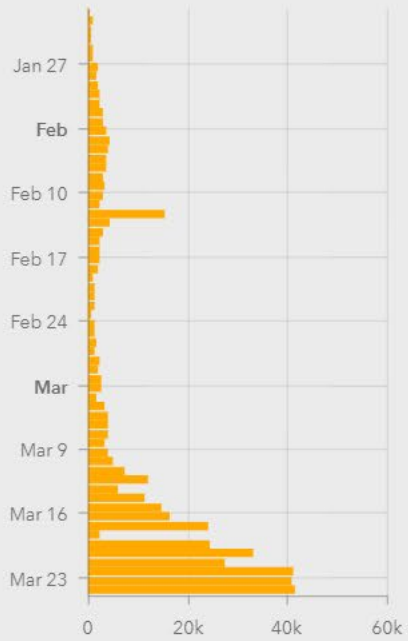
confirmed cases

**18,589**

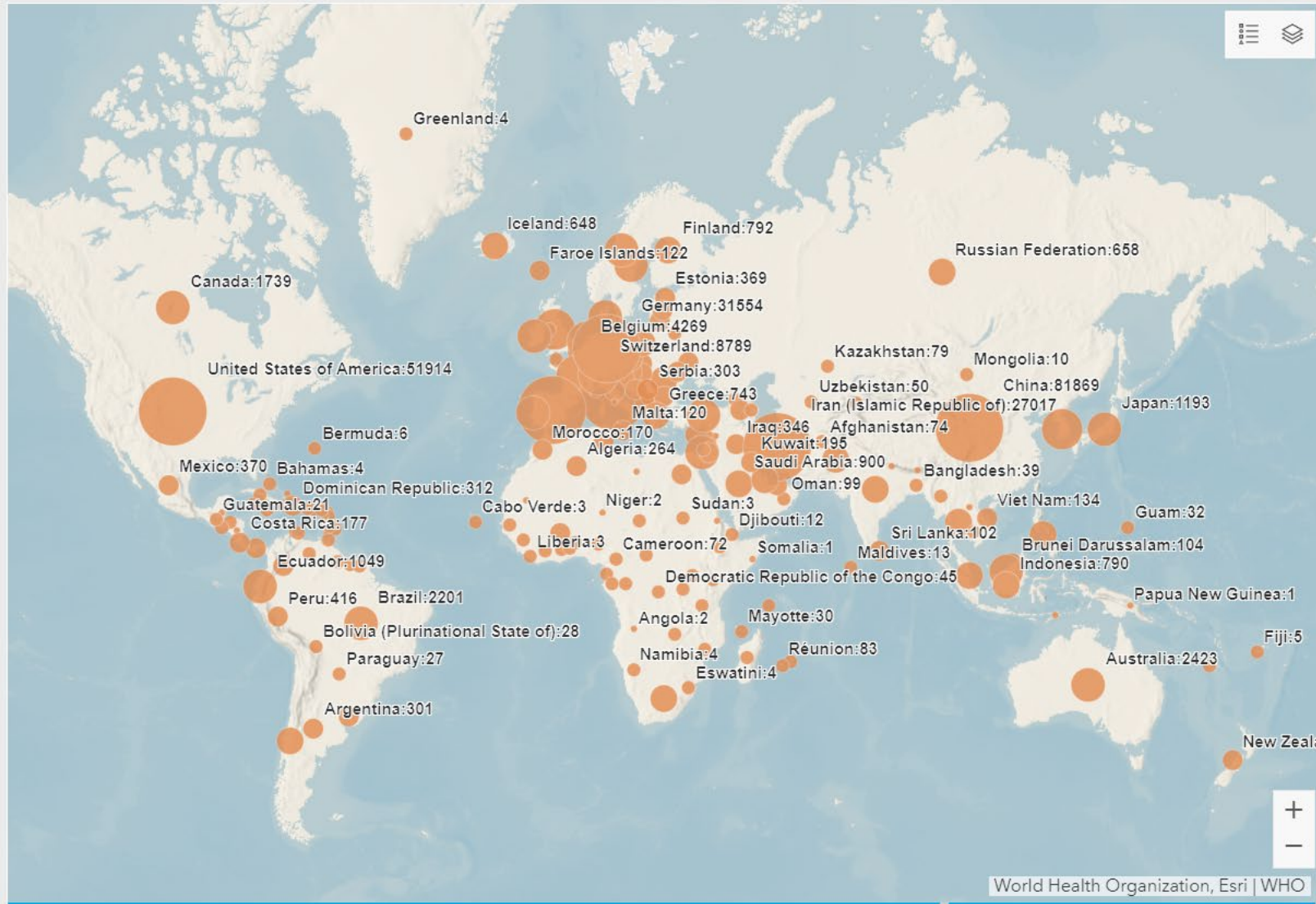
deaths

**196**

countries, areas or territories with cases



Cases by date of report



**Countries, areas or territories with cases**

- China :81869 cases
- Italy :69176 cases
- United States of America :51914 cases
- Spain :39673 cases
- Germany :31554 cases
- Iran (Islamic Republic of) :27017 cases
- France :22025 cases
- Republic of Korea :9137 cases
- Switzerland :8789 cases
- The United Kingdom :8081 cases
- Netherlands :5560 cases
- Austria :5282 cases
- Belgium :4269 cases
- Norway :2566 cases
- Australia :2423 cases
- Portugal :2362 cases
- Sweden :2272 cases
- Brazil :2201 cases
- Israel :2170 cases
- Turkey :1872 cases
- Malaysia :1796 cases
- Canada :1739 cases

Last updated:25/03/2020 18:00 CET

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Data source: WHO National Health Commission of the People's

# Please check the CDC and WHO daily for critical updates

- <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
- <https://www.cdc.gov/>
- <https://emergency.cdc.gov/han/>