

WashU Med COVID-19 Update

March 25, 2020

Information for School of Medicine faculty, staff and students

Faculty, staff and students,

As we continue our preparation for the evolving Covid-19 pandemic, we are introducing a new daily communication to keep you updated on our response to this emergency.

The content of this communication is a product of a joint (WUSM, BJH, SLCH) command center, functioning in close coordination with the BJC command center, that has been created on the WUMC campus to assemble and standardize communication to our faculty and staff across all three institutions. We hope this provides helpful and timely information.

David H. Perlmutter, MD

Executive Vice Chancellor for Medical Affairs and Dean

Paul J. Scheel, MD

CEO, Washington University Physicians

While on campus, wear your badge

All employees are required to wear their badge for entry to BJC HealthCare and Washington University Medical Campus facilities. An [Updated Visitor Policy](#) is in effect suspending visitors (with very few exceptions) to these facilities. Screeners have been stationed at select entry points on the Medical Campus. It is for the safety of our patients and fellow workers. Please wear your badge so you are not denied admittance.

Health-care providers must carry letter of access

Please remember to keep a copy of the [Health-Care Provider Letter of Access](#) with you, or in your car, indicating you are an essential health-care provider and, therefore, exempt from the Shelter-in-Place mandate issued by city and county governments. If you are asked by law enforcement, you also should be prepared to show your WUSM identification badge to prove your employment.

PPE requirements and recommendations for COVID-19

Updated personal protective equipment (PPE) requirements are in place to keep all patients and team members safe, while conserving the equipment supply for the highest-risk, direct patient care situations. All team members should familiarize themselves with these [PPE requirements, particularly the use of masks](#), which are tiered based on CDC guidelines.

COVID-19 policy set for employees over age 65, or with chronic conditions

Employees who are >65 years old, have chronic conditions, are receiving immunosuppressive therapy or are pregnant will not be assigned to active care of COVID-19-infected patients but should continue to work regular schedules as assigned by their department and/or division. Examples of underlying health conditions that pose increased risk include: chronic heart, lung, kidney, or liver disease, cancer, poorly controlled diabetes, or prior organ transplantation. Employees should discuss any concerns about personal risk with their department chair and/or division chief. Read the [WUSM Health-care Worker Policy during COVID-19 Epidemic](#) for complete details.

Outpatient testing for COVID-19

If patients are calling you from home for COVID-19-related symptoms and you feel the patient needs COVID-19 testing, please do not direct them to your clinic or the Emergency Department (unless you feel the patient needs emergency-level care). To have a patient referred for COVID-19 testing, please direct the patient to call

the hospital operator at 314-362-5000 and ask for the COVID hotline. Hotline personnel will screen the patients over the phone and, if appropriate, direct the patient to the testing sites. This service is currently available 8 a.m. to 4 p.m. Monday-Friday and 8 a.m. to 12 p.m. Saturday and Sunday.

Nasal procedure guidelines in COVID-19 patients

Intranasal procedures can be aerosol-generating. Also, mucous is easily transmitted onto scopes, tubes, or spray bottles, which could put others at risk. Carefully consider which suspected or confirmed COVID-19 patients need these interventions during this time. The procedure should be avoided unless absolutely necessary (i.e., will change patient care). Nasal and oral sprays of any type should be avoided. Moving the patient to a negative pressure room should be strongly considered, if available and clinically feasible to move the patient. For surgical, endoscopic and radiological procedures that cannot be deferred, a video tower/screen should be used to maintain distance between the physician/technician and patient. Appropriate PPE for intubation and nasal endoscopy includes: N95 respirator, face/eye shield, gown and gloves. [View further guidance on nasogastric/feeding tube placement and flexible or rigid transnasal endoscopy.](#)

Campus shuttles may only carry 10 people at time

To help adhere to social distancing guidelines, campus shuttle buses will only carry a maximum of 10 people. Managers, please take this into consideration so that staff are not penalized for being late because of this limitation.

Research labs asked to donate PPE

As work is reduced in university laboratories, medical students are asking researchers to [donate extra personal protective equipment \(PPE\)](#) from their labs to frontline health-care workers. Needed items include: eye protection, such as face shields and goggles (glasses are not effective); N-95 respirator masks, masks, gloves and gowns. Opened cases or other containers are acceptable, but NOT

used items. Items should be labeled clearly and left in lab spaces. Staff members from Environmental Health & Safety (EHS) are collecting donations. Complete [the PPE Donation Form](#) to request an EHS pickup.

For university-wide announcements, visit coronavirus.wustl.edu »

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