Coping with COVID: The CV Team Experience
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6:00  Welcome
Christopher Giuliano, PharmD, MPH
CV Team Liaison
Michigan Chapter ACC

6:05  The NP Experience
Katie Leonard, RN, MSN, ACNP-BC

6:15  The Pharmacist Experience
Stephanie Edwin, PharmD, BCPS-AQ
Cardiology

6:25  The Psychological Strain
Samuel Sears, Jr. PhD

6:40  Audience Sharing and Questions

7:00  Adjourn
Coping with COVID - The NP Experience

Katie Leonard, RN, BSN, MSN, ACNP-BC
Inpatient Cardiology
Ascension St. John Hospital
The First Days of COVID

**Professional**

- Where are all the cardiology patients?!  
  - Significant decrease in daily census
- Elective cases cancelled
- Protecting yourself/PPE  
  - To wear a mask or not to wear a mask, that is the question
- Fear of the unknown
The First Days of COVID

**Personal**

- Kids school closed
- Daycare closed
- Gym closed
- Obtaining essentials
- Protecting my kids and family
- Homeschooling
Reallocation

- Surge in ICU patients creates an increased demand for critical care providers
  - The call to act
  - We may have enough ventilators, but who is going to care for these patients?
- Management of the critically ill COVID patient
  - Learning COVID management recommendations
  - Who are the players? Members of the healthcare team
  - Dealing/Coping with A LOT OF DEATH
- Make-Shift ICU, Is this for real??
  - Lack of the usual basic ICU commodities
- Incorporated Teared Nursing Model
  - ICU RNs, Cath Lab RNs, and Pre/Post Cath RNs
- Survival Mode
  - Added hours and off shifts
  - Emotional/physical tolls
(re) Defining the NP Role

- **Clinician**
  - Order Entry - medication management, transfer orders
  - Defining and ensuring implementation of plans of care
  - Interventions

- **Case Manager/Social Worker**
  - Identifying patient needs
    - Homecare
    - Durable medical equipment
    - Rehab needs

- **Collaborator**
  - Communicate with all disciplines of the healthcare team
    - Rounds with intensivist, RNs, respiratory, case management, social work, staff RNs, palliative care
  - Include and communicate with patient families

- **Leader/Resource**
  - Constant presence in the unit
  - Promoting teamwork within the care team

- **Educator**
  - Resource for the RN staff, specifically the non-ICU staff
Coping

- Unit opened April 5
  - Correlating with the peak of cases in the State of Michigan
- What the team felt...
  - Anxiety
  - Fear
  - Exhaustion
  - Stress
- All Overcome by...
  - Teamwork
  - Persistence
  - Determination
  - Adrenaline
  - Responsiveness
  - Empathy
- Unit closed April 17
The COVID Home Life

- Childcare and Homeschooling
  - School now cancelled for the rest of the school year
- Fear/worry about health of loved ones/children
  - Managing their stress/anxiety
- Family Time
  - Trying to feel connected to friends/extended family
- Decompression without the usual coping strategies
  - Self care
- Still trying to get those essentials
Hard times don’t create heroes. It is during the hard times when the ‘hero’ within us is revealed.

— Bob Riley

HAPPIERHUMAN.COM
Coping with COVID - The Pharmacist’s Experience

Stephanie Edwin, PharmD, BCPS-AQ Cardiology
Clinical Pharmacy Specialist - Cardiac ICU
Ascension St. John Hospital
Practicing with Limited Evidence

“A pandemic is not a compelling reason to abandon evidence-based medicine.”

- Hydroxychloroquine + azithromycin was the standard of care early in COVID-19 pandemic
- Unclear therapeutic benefit, potential to cause harm due to QTc prolongation

Pharmacist’s Role
- Monitor QTc...particularly in high risk patients!
  - Balance patient risk with staff exposure to obtain EKG
Pharmacist's Role

- Monitor QTc, particularly in high-risk patients!
- Balance patient risk with staff exposure to obtain EKG.

Practicing with Limited Evidence

“A pandemic is not a compelling reason to abandon evidence-based medicine.”

Hydroxychloroquine + Azithromycin
- 21% developed QTc > 500 msec
- 13% had a change in QTc > 60 msec
- Baseline QTc > 450 msec noted to be a risk factor
- One patient developed torsades de pointes leading to drug discontinuation
- Balance patient risk with staff exposure to obtain EKG
If COVID-19 is associated with thrombosis, then should we give all of these patients anticoagulation?

- VTE prophylaxis?
- Higher-intensity VTE prophylaxis?
- Therapeutic anticoagulation?

Will anticoagulation help if the thrombosis is driven by inflammation?

**Pharmacist’s Role**

- Bleeding risk assessment if therapeutic anticoagulation ordered
- Reviewing emerging literature related to COVID thrombosis
- Collecting QA data to evaluate current practice and need for changes
Explosion of the ICU Census!

Severe shortages of sedatives, analgesia, paralytics, and metered dose inhalers!
- 51% increase in demand
- 63% fill rate for product ordered

Rapid expansion of ICU beds
- Incorporation of non-ICU clinicians and staff from other Ascension sites into model

Pharmacist’s Role
- Implement early initiation of enteral sedation
- Develop plans to use alternative IV products
- Provide additional clinical support to COVID units
These patients are REALLY sick...

60 year old female presented to ED with dyspnea and fever x 3 days concerning for COVID-19.

CXR: multifocal pneumonia infiltrates in the bilateral upper and lower lobes

Patient initially on Bipap, however, required intubation and rapid escalation of oxygen requirements for persistent hypoxia.

- FiO2 = 100%, PEEP=14, proned
- pH = 7.34 / pCO2 = 55 / pO2 = 68 / HCO3 = 29

Acute kidney injury → eventual need for RRT

Norepinephrine → up to 0.6 mcg/kg/min

Pharmacist’s Role

March 18th
- Recommend remdesivir to ID physician
- Submit request for compassionate use to Gilead Sciences
- Approved!

March 19th
- Submit eIND application to FDA
- Approved!
- Submit eIND approval back to Gilead

March 20-24th
- SO MUCH WAITING...
- Informed consent obtained by ID

March 25th
- First dose administered!
Maintaining Professional Health and Well-Being

- Always celebrate your wins
- Hand cleanser for hands only, do not drink
- Heroes work here
- Happy Graduation!
Maintaining Personal Health and Well-Being
A SHOUTOUT TO EVERYONE WHO IS TRYING RIGHT NOW.

Trying to do the right thing. Trying to stay open. Trying to keep going. Trying to hold on. Trying to let go. Trying to find their flow. Trying to stay afloat. Trying to meet each new day. Trying to find their balance. Trying to love themselves. Trying new things and new ways.

I see you. I’m there too. We’re in this together.

- S.C. Laurie
Coping with COVID - The Psychological Strain

Samuel F. Sears, Jr., PhD
Professor, Departments of Psychology and CV Sciences
East Carolina University
COVID: THE PSYCHOLOGICAL STRAIN

OBJECTIVES:

WHAT IS NEW ABOUT COVID & STRESS?

- ADDRESS THE STRESS -DEMANDS
- DISCUSS COPING AGILITY
- IDENTIFY 1 NEW STRATEGY TO TAKE HOME
COVID: THE PSYCHOLOGICAL STRAIN

FOR MAXIMUM PSYCHOLOGICAL IMPACT ON HEALTH CARE PROVIDERS, A VIRUS SHOULD:

LIMIT KNOWLEDGE AND CONTROL OVER:

ETIOLOGY
PROGNOSIS OR OUTCOMES
MEANS OF PROTECTION
THREATEN SELF & FAMILY
LIMITED TREATMENTS
CREATE ISOLATION AND GRIEF
DISRUPT SOCIETY
EMOTIONAL INTELLIGENCE

That Discomfort You’re Feeling Is Grief

by Scott Berinato

March 23, 2020

HBR Staff/3sixty/Getty Images
COVID: THE PSYCHOLOGICAL STRAIN

IMPACT ON HEALTH CARE PROVIDERS

MAINTAIN USUAL STRESS + DEAL WITH:

POSSIBILITY OF INFECTION
JOB INSTABILITY
PAY RAMIFICATIONS
IMPACT ON FAMILY & KIDS
AMBIGUITY
RECESSION
FRUSTRATION WITH “EXPERTS”
Well Being

Self-Care

COVID Era Coping

Family Care

Routine Coping Strategies

Thriving Care
<table>
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<tr>
<th>Request</th>
<th>Principal desire</th>
<th>Concerns</th>
<th>Key components of response</th>
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<tbody>
<tr>
<td>Hear me</td>
<td>Listen to and act on health care professionals' expert perspective and frontline experience and understand and address their concerns to the extent that organizations and leaders are able</td>
<td>Uncertainty whether leaders recognize the most pressing concerns of frontline healthcare professionals and whether local physician expertise regarding infection control, critical care, emergency medicine, and mental health is being appropriately harnessed to develop organization-specific responses</td>
<td>Create an array of input and feedback channels (listening groups, email suggestion box, town halls, leaders visiting hospital units) and make certain that the voice of health care professionals is part of the decision-making process</td>
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<tr>
<td>Protect me</td>
<td>Reduce the risk of health care professionals acquiring the infection and/or being a portal of transmission to family members</td>
<td>Concern about access to appropriate personal protective equipment, taking home infection to family members, and not having rapid access to testing through occupational health if needed</td>
<td>Provide adequate personal protective equipment, rapid access to occupational health with efficient evaluation and testing if symptoms warrant, information and resources to avoid taking the infection home to family members, and accommodation to health care professionals at high risk because of age or health conditions</td>
</tr>
<tr>
<td>Prepare me</td>
<td>Provide the training and support that allows provision of high-quality care to patients</td>
<td>Concern about not being able to provide competent nursing/medical care if deployed to new areas (eg, all nurses will have to be intensive care unit nurses) and about rapidly changing information/communication challenges</td>
<td>Provide rapid training to support a basic, critical knowledge base and appropriate backup and access to experts</td>
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<tr>
<td>Support me</td>
<td>Provide support that acknowledges human limitations in a time of extreme work hours, uncertainty, and intense exposure to critically ill patients</td>
<td>Need for support for personal and family needs as work hours and demands increase and schools and daycare closures occur</td>
<td>Provide support for physical needs, including access to healthy meals and hydration while working, lodging for individuals on rapid-cycle shifts who do not live in close proximity to the hospital, transportation assistance for sleep-deprived workers, and assistance with other tasks, and provide support for childcare needs</td>
</tr>
<tr>
<td>Care for me</td>
<td>Provide holistic support for the individual and their family should they need to be quarantined</td>
<td>Uncertainty that the organization will support/take care of personal or family needs if the health care professional develops infection</td>
<td>Provide lodging support for individuals living apart from their families, support for tangible needs (eg, food, childcare), check-ins and emotional support, and paid time off if quarantine is necessary</td>
</tr>
</tbody>
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God, Grant Me The Serenity To Accept The Things I Cannot Change, The Courage To Change The Things I Can, And The Wisdom To Know The Difference.
COPING AGILITY

TAKE YOUR TEMPERATURE

ENGAGE IN TRENCH FRIENDSHIP

ROUTINE MAINTENANCE: JIFFY CARE

SPARK JOY

ATTEND TO SMALL VICTORIES

CONTROL THE CONTROLLABLES

SEEK SUPPORT FROM FAMILY
SELF CARE = REDUCE STRAIN
“JIFFY CARE”
I CANNOT CONTROL
(So, I can LET GO of these things.)

IF OTHERS FOLLOW THE RULES OF SOCIAL DISTANCING

I CAN CONTROL
(So, I will focus on these things.)

THE AMOUNT OF TOILET PAPER AT THE STORE

THE ACTIONS OF OTHERS

MY POSITIVE ATTITUDE

PREDICTING WHAT WILL HAPPEN

HOW I FOLLOW CDC RECOMMENDATIONS

OTHER PEOPLE'S MOTIVES

TURNING OFF THE NEWS

LIMITING MY SOCIAL MEDIA

MY KINDNESS & GRACE

FINDING FUN THINGS TO DO AT HOME

HOW LONG THIS WILL LAST

HOW OTHERS REACT

CLIPART: Carrie Stephens Art
THECOUNSELINGTEACHER.COM
COPING AGILITY

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ROUTINE MAINTENANCE: JIFFY CARE

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COVID: THE PSYCHOLOGICAL STRAIN

CONCLUSION

- COVID STRESS IS UNIVERSAL
- ATTEND TO YOUR COPING AGILITY
- WHICH 1 NEW STRATEGY WILL YOU TAKE HOME TONIGHT?
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<td><a href="#">ACC.ORG/COVID19</a></td>
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<td><a href="#">MEDAXIOM.COM/COVID-19-RESOURCES</a></td>
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<tr>
<td><a href="#">MEMBERHUB.ACC.ORG - COVID DISCUSSION</a></td>
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<tr>
<td><a href="#">ACC CLINICIAN WELLNESS RESOURCES</a></td>
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<tr>
<td>The CV Team &amp; COVID-19 Lessons from the Frontline - ACC WEBINAR</td>
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<tr>
<td><a href="#">MICHIGAN.GOV SUPPORTING EMOTIONAL HEALTH OF THE HEALTH CARE WORKFORCE</a></td>
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Please share!

Our Commitment:
Help You Help And Heal

For a limited time, ACC is offering complimentary 2020-2021 membership for CV Team and CV Administrators.

Learn more and apply at: acc.org/membership/join-us

Use promo code: HereForYou
Thank you!

We gratefully acknowledge ZOLL LifeVest for sponsoring this webinar.