

March 17, 2020

Dear Colleagues,

As the COVID-19 situation quickly evolves we are implementing changes in hospital operations. The Purdue Veterinary Hospital will continue hospital operations **with the following restrictions implemented with immediacy balanced with practicality, and fully executed on Friday, March 20 at 8am.** It is imperative that everyone in the hospital works together so that we continue to serve the animals and people of our community while keeping our teams and clients protected.

Critical Initiatives

- Controlled caseload reduction
- Controlled client traffic
- Adjustments to student education
- Collaborative working environment and social distancing

Our key focus is on reducing human traffic in the hospital and close contact, practicing social distancing of 4-6 feet when practical, reducing the number of our faculty/staff/students in small spaces, supporting public health measures, being mindful of usage of PPE supplies, and managing the care needed by our patients with our staffing ability to provide that care.

Controlled Caseload Reduction

Elective Procedures

No further elective procedures will be scheduled and currently scheduled elective procedures will be rescheduled for appointments beginning after May 30, 2020. Elective procedures include routine spays, laparoscopy-assisted spays, castrations, dental prophylaxis, cataracts, etc. Procedures that do not require anesthesia are appropriate under the guidance that the goal is providing medically necessary patient care, meeting student educational requirements and maintaining client trust. It's anticipated that as the COVID-19 crisis continues to evolve, we will experience increases in urgent, emergent or emergency cases from surrounding veterinary hospitals.

Ambulatory Services

Priority 4 Paws will reduce spays and castrations to support required student education and community shelter needs, while minimizing staff and students present in the trailer. Another alternative is to utilize the junior surgery laboratory.

Large animal ambulatory services will operate normally but take steps to reduce close contact (e.g., utilize an extra vehicle) and provide explicit client instructions to minimize interpersonal contact.

Cardiology Extension will operate under specific procedures to reduce contact as well as limit cases seen deemed medically necessary or emergent.

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If you have trouble accessing this document because of a disability, please contact PVM Web Communications at vetwebteam@purdue.edu.

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In-hospital Services

- Each service should determine how to reach the goals of reducing caseload to those deemed medically necessary, emergent or emergency, maximizing team safety, while ensuring the student learning to meet rotation objectives continue.
- “Medically necessary” will be determined by the attending clinician with increased mindfulness of staffing availability. Each service head should communicate with VTH administration how those goals will be met.
- Each service should work with their liaison or receptionist to facilitate the changes made with currently scheduled appointment which must be moved or adjusting the scheduler.

Increased phone and digital communication with rDVMs and clients will be important to inform decisions on patient care. Consultations with rDVMs should continue to support our referral base. Telehealth services for established patients and clients (with VCPR) that replace an on-site visit should be charged appropriately (e.g., recheck visit fee).

Controlled Client Traffic

- Controlled client traffic will be implemented by Thursday, March 19.
- A detailed written protocol for managing controlled client traffic will be provided on Wednesday, March 18.
- Clients will be informed the hospital is open for medically necessary, emergent and emergency patient care.
- Client health screening will occur at the time of appointment reservations and also at client intake.
- When the appointment is made, clients will be informed that they will not be permitted inside the hospital and the patient receiving protocol will be communicated. They will be directed to drop off their animals or remain in their cars during appoints and most communications will be delivered via telephone.
- **Exceptions will be made** for end-of-life decisions, and critical emergency situations. Enhanced safety precautions will be implemented for overnight hours to protect staff.
- Detailed client procedures will be provided, including instructions to bring small pets in a carrier, and having appropriate leashes, leads, etc. on dogs and large animals. The hospital will increase supplies of cardboard carriers, leashes, etc. to facilitate curb-side client service. Large animal clients will unload their animals from the trailer.
- Client instruction signage will be placed at the hospital entrances.

Adjustments to Student Education

- Dr. Salisbury will be sending out further information on clinical education to provide guidance in achieving appropriate learning outcomes.
- Educators should optimize DVM student learning in this setting of potential reduced patient contact by focusing student activities on “doctor” competencies and delegating patient care activities to the veterinary nurses and veterinary nursing students when possible. An example would be having nursing students focus on patient care and client education skills and veterinary students focus on clinical skills, including history and physical examination.
- Clinical student rounds **must be moved** to larger rooms or delivered online to allow social distancing. Sections should work with student services to schedule an appropriate room.

Collaborative Working Environment and Social Distancing

- It will be critical for all services to work with their teams to determine patient needs and also be mindful of hospital resources. **We must all work together and support each other.** There may be cases that require services to manage patient anesthesia (outside of the anesthesia service) and we may be rotating technician support throughout the hospital.
- Sections are encouraged to develop teams and work in shifts to reduce the number of individuals in small rooms, around patients, etc. This will also support staffing needs if we have team members unable to work.
- We are not reducing staff. We are supporting telework where feasible.
- These are challenging times, and we are navigating a grey and fluid environment. Patient care, education, and safety require multiple people working together. The goal is to be mindful and innovative, thinking of social distancing when possible and preventive hygiene/sanitization always.
- This is the time to be collaborative, flexible and nimble and that responsibility falls on each and every one of us.

COVID-19 is a challenging, evolving crisis. We are implementing, revising, educating, and sharing information as quickly as possible. Situations may change rapidly with revised protocols issued.

I will share daily highlights of anything new and we will be coordinating a remote town hall to answer questions and listen to feedback

Please read the information provided, continue to go to the University COVID-19 website for the most up to date information, and we will all do our very best together.

<https://Purdue.university/covid-19>

Earlier Reminders to Continue!

Stringent Preventive Hygiene

Elevating preventive hygiene practices is critical. All personnel are reminded to follow the Centers for Disease Control and Prevention (CDC) guidelines for hand and respiratory hygiene and preventive actions:

- Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing or sneezing.
- Avoid touching your eyes, nose, and mouth.
- Avoid close contact with people who are sick.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Follow 'no handshake' behavior

Additional precautionary steps taken:

- Soap and hand sanitizer will be checked frequently to ensure availability.
- Cleaning of frequently touched surfaces will be increased.
- Swipe card readers for entry into the hospital were converted to swipe only. Building exterior swipe card readers will continue to be swipe plus PIN.
- Customer payment will be taken by credit card over phone. If that option is not available, enhanced hygiene will be reinforced and gloves worn.

Supplies

- As a precautionary measure to support appropriate patient care, we have stocked up on supplies (gloves, masks, hand sanitizer, gowns, etc.) and have a 1-3 months' supply on hand.
- To support critical supply management, please keep the smallest quantity on hand in the hospital for clinical needs. The remainder of the stock will be secured in Central Supply and storage. We realize this will increase labor in some cases, and we appreciate your attention and support.
- Supplies are for hospital use only and should not be used for non-clinical cases or taken outside the hospital.

What to do if you're sick or have been exposed to COVID-19:

- We are following the guidelines provided by the University (see FAQs on University website <https://www.purdue.edu/newsroom/releases/2020/Q1/need-to-know-info-about-covid-2019.html>)
 - If you are ill with fever, cough, or other concerning symptoms, it is recommended that you remain home (or go home) and seek medical assistance. It is recommended to call your healthcare provider for advice.
 - Employees and manager must report COVID-19 related absences to human resources by calling or emailing benefitshr@purdue.edu

Wellbeing support

- Control what you can and be proactive. Follow CDC guidelines on using proper hygiene. Put together a family plan on what to do if your family were to become affected.
- Use coping skills that have been effective in the past, such as talking with a friend, meditation, or mindfulness. Past health epidemics have resulted in increased knowledge around how to control the spread of disease. Turn off media that may be increasing fears and worries.
- Some anxiety is normal; and it is what keeps us out of danger. However, if concerns and fears are having a negative impact on someone's daily life, they can reach out to [Mental Health America](#): Call or Text 765-742-0244, available 24/7. Toll-free call line 877-419-1632
- Article on ways to cope during a healthcare epidemic <https://psychcentral.com/blog/coronavirus-anxiety-4-ways-to-cope-with-fear/>

CDC also has current information and guidelines <https://www.cdc.gov/>

COVID-19 puts us all in an exceptionally challenging time, and you have my sincere appreciation for everyone coming together as one team.

With appreciation



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