Coronavirus: Crisis management, equipment and rationalising services

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Lessons learned from the ISUOG Webinar on 24th March 2020

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Coronavirus: crisis management, equipment and rationalising services – Lessons learnt

Crisis management if the system is overwhelmed and what happens if you don't use PPE properly – T Frusca, Italy

• In the early phase of the epidemic triage take as many swabs as possible to detect and isolate also asymptomatic patients.
• Recommendation in favour of the use of surgical masks for staff and visitors and FFP2 masks for medical personnel attending delivery in suspected/confirmed COVID-19 cases.

What happened in Wuhan: why so many doctors become infected – J Deng, China / UK

• Most infections and deaths among staff occurred on wards not dedicated to COVID-19 patients, where healthcare providers did not use optimal PPE → if you don’t use adequate PPE, infections cannot be prevented.
• Ultrasound practitioners are at high risk of infection (non-ventilated room, direct patient contact), hence should wear a mask.

COVID 19 - how to clean your equipment properly – S Campbell Westerway & J Basseal, Australia

• COVID-19 has low resistance to disinfectants and can be removed by low-level disinfection. It is essential to first clean and then disinfect all surfaces (monitor, keyboard, transducer holder, gel bottle) between examinations. For more information see https://www.isuog.org/uploads/assets/d03798de-11ff-4037-beec9c1495d9572/e6f65fb1-f6af-4d94-beb02bb34ea78c0cc/ISUOG-Safety-Committee-statement-COVID19.pdf
• Recommended: PPE (masks, gloves +/- gown); hand hygiene before and after each patient; only allow 1 visitor to the scanning room; reduce scanning time; no additional staff in the room.

Potential ways to rationalise the provision of ultrasound resources - R Abu-Rustum, USA

• Fundamental to prioritize care (triage based on local status, staff availability and patient co-morbidities) and reduce patient volume to minimize exposure. Use telehealth where possible (also to triage the day before the scan). Consider postponing US scans.
• The sonographic exam has its inherent risks. Adhere to safety recommendations.