



MEMORANDUM

TO: Department Heads, Program Directors, Program Administrative Assistants, Residents, RDoS & PGME Staff

SUBJECT: 2019 NOVEL CORONAVIRUS (COVID-19) UPDATE
RESIDENTS' PERSONAL SAFETY AND SAFETY OF OTHERS DURING PROVISION OF CLINICAL CARE AND ATTENDANT SERVICE-LEARNING IN EMERGENCY DEPARTMENT

FROM: Dr. Anurag Saxena, Associate Dean, PGME

DATE: March 15, 2020

Situation: It has been observed that during the provision of clinical care in the Emergency Department, health care providers are putting on and taking off PPE incorrectly. Examples include: leaving the arms exposed, not following the right order of doffing or proper procedures doffing. We know that doffing is where most health care workers contaminate themselves and become ill.

Required action: As required by the ED, following procedures must be followed: (effective immediately March 15, 2020):

1. SHA videos that demonstrate the correct procedure for donning and doffing should be reviewed prior to coming to the hospital for every shift. **This video is ONLY 3 MINUTES! This is time well spent for your safety and everyone else's safety. Please do not forget hand hygiene in between every steps.** <https://www.youtube.com/watch?v=CChf0-enyp0>
2. We know that your time is valuable and urgent decisions need to be made. However, **when leaving a contaminated room make sure that you take the time to wait until someone can come and watch you doff your PPE.** The ED is working on processes to support you with this. We have seen in other countries that if we adhere to the protocols there are almost no HCW infections.
3. **LIMIT the number of times that you enter/leave a room.** Every time you doff you put yourself at risk of contamination. We also need to conserve PPE at this time. Stay in the room until you are certain that you have all the lines etc. in place that you need.
4. **LIMIT the number of people in the room.** Only have an individual capable of accurately collecting and communicating clinical information enter the room. Clinical findings can be communicated through the door with proper distancing. This will minimize the number of people who interact with the patient in close proximity and reduce transmission of virus.

These principles and procedures also inform provision of clinical care in non-emergent settings.

The [PGME office](#) will work with all residents, programs and staff during this time and are available to answer any questions you may have.

Sincerely,

Dr. Anurag Saxena
Associate Dean, Postgraduate Medical Education