To GME Program Directors and Program Coordinators:

First, we want to say thank you to the residents and fellows who are working so hard in the face of the usual challenges of taking care of patients across busy hospital and clinic sites. We applaud you for calmly continuing to work even harder as we face increased clinical loads and manage anxiety from patients, their families and our colleagues on the clinical teams.

GME leadership and Hospital Epidemiology/Infection Prevention from DHMC, UCH, CHCO, VAMC continue to collaborate very closely about the current situation with COVID-19 regarding residents and fellows and we have the following updates about policies. Please pay close attention to individual hospital policies, which will be more specific to your current patient care areas. When you have questions, please contact your program director and you may be directed to infection prevention/control or occupational health at your site.

All Residents and Fellows will continue to be involved in evaluation and treatment of patients with suspected respiratory illness, including those suspected of [patient under investigation (PUI)] or confirmed as having COVID-19. Residents will receive refresher training on PPE usage at each clinical site as appropriate. We will keep you updated about required trainings and available sessions.

See this video for guidance: [https://m.youtube.com/watch?v=bG6zISnenPg&feature=youtu.be](https://m.youtube.com/watch?v=bG6zISnenPg&feature=youtu.be)

1. For now, although CDC guidance which has changed and to no longer requires N95 masks or negative pressure rooms, we MUST follow our individual hospital procedures and policies. All PUI and COVID-19 positive patients still require facemask, eye protection (goggles or shield), gown and gloves.

2. If residents or fellows experience an exposure from a patient with suspected or confirmed COVID-19, the resident should put on a mask and contact employee health or infection control (see below) immediately at the hospital of the exposure for recommendations. He or she should also notify the program director of the exposure.
   a. School of Medicine and UCH Contact: Call 303-724-6242 Campus Health Center
   b. VAMC Contact: Residents should contact their Residency VA Site Director/Attending first. Occupational Health and Infectious Disease (720-723-5038) referrals are channeled through them
   c. CHCO Contact: Call 720-777-6577 Occupational Health (Dr. Chris Nyquist)
   d. Denver Health Contact: Call 303-436-OUCH (6824)

3. Residents and fellows with respiratory illnesses and fever should stay home and should call their primary provider (do not go to clinic). In order to be excused from clinical duties, they should communicate with chief resident AND program director.

4. The University of Colorado School of Medicine/Anschutz has restricted all business travel. The guidance is copied here:
Effective immediately, the University of Colorado School of Medicine is suspending all work-related travel for all employees and students. This includes any travel associated with scholarly activities as a CU employee, even if travel is funded by a government grant, foundation, company, or other university.

Exceptions will be considered only in extraordinary cases. For consideration, the School has created an online form that must be completed to request a review for an exception. The form is available at https://ucdenverdata.formstack.com/forms/som_covid_travel_exception_request.

While we acknowledge the inconveniences created by this restriction on work-related travel, we are focused on ensuring the health and safety our community. The administration will monitor conditions and the work-related travel restriction will remain in place for the immediate future.

In addition, we strongly recommend that you limit your personal travel. In particular, if you are required to self-quarantine after a personal trip, be aware of how your absence affects your unit and university operations. In cases of personal travel, you may not be eligible for administrative leave if you are required to be in quarantine. Please review guidance here.

A few additional recommendations:

We recommend that all Programs should make contingency staffing plans now in preparation for the time when we have widespread community transmission. Considerations include the following:

a. Prepare staff to be able to work from home (coordinators, schedulers, etc) with laptops, internet access and VPN.

b. Conduct all conferences and didactics via virtual means (zoom, remote access, etc). This includes case conferences, grand rounds, M&M, etc.

c. Programs should identify critical staffing needs (ICU vs elective, ward services, surgical services, consult vs wards) and prepare to move residents from lower priority areas to higher ones in the event of large numbers of resident or fellow quarantine. An example is the UW BMT unit which is staffing in a pattern of 14 days on and 14 days off. Assess the schedules now to make these plans possible.

5. In an effort to preserve PPE, the hospitals are recommending several changes to rounding practices. Please follow policies and recommendations at each hospital site. Examples may include limiting the number of physicians who enter patient rooms or limiting pre rounding on patients who are in isolation.

6. Co-horting of patients to nonteaching services is occurring at some of our sites (Denver Health currently has a non-teaching service for PUI or COVID-19 positive patients). We recommend that all services consider preparing non-teaching (Attending ONLY) services for PUI or COVID-19 positive patients.

7. Circumstances are evolving quickly and will change once sustained community transmission is our reality in Colorado. Email updates will come regularly from GME through Dr. Rumack’s office.

8. Each hospital may have variations in the clinical recommendations and restrictions, but we will try to have the highest level of recommendations consistent across our systems.
More information will be forthcoming. Please direct questions to program directors and Dr. Rumack and we will answer questions in the next email.

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