

# **MINIMIZING INTERACTIONS – COVID-19**

The CDC has recommended that approaches be taken to reduce face-to-face contact with potential COVID-19 cases to slow the disease transmission and reduce the number of people who get sick. The primary goals of facilities are to provide medical and nursing care protecting staff and non-COVID-19 residents from infection.

The following recommendations are to minimize contact between staff and residents to reduce risk of transmission of COVID-19. Resident procedures and monitoring will be evaluated individually with the physician to avoid any unnecessary contact.

## **Vital Signs**

Routine vital signs will be decreased to those necessary, including evaluating monitoring frequency prior to medications. Acutely ill residents will be monitored as needed. Hospice/Palliative care residents vital signs will be limited to those essential to maintaining comfort.

# **Finger Stick Blood Sugars**

Assess each resident's monitoring to determine if frequency can be decreased to what is necessary and safe for each resident. Review Beer's List.

## Lab Monitoring

Evaluate and cease routine labs for medication monitoring unless necessary for resident safety. Labs should be ordered for acute situations to assist in diagnosing and/or treatment.

### **Wound Care/Management**

Evaluate deceasing the frequency of wound care procedures or discontinue if appropriate with physician orders.

#### Coumadin/Warfarin

Evaluate each resident to determine if the current drug regimen can be changed to a Direct Oral Anticoagulant which require less/no lab monitoring

#### **Nebulizer Treatments**

- Evaluate individual resident needs and obtain physician orders to eliminate the treatment if possible. If long term PRN orders are in place, consider holding and calling MD prior to use. If chronic use, evaluate where using an inhaler with AeroChamber would be appropriate.
- Symptomatic/COVID-19 positive residents should not have nebulizers initiated by standing orders. Since the procedure significantly increases the risk of transmission, the physician should be consulted as needed.
- Consider maintaining inhalers and/or nebulizer supplies at the bedside instead of the med cart.

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.



# **Unnecessary Medications**

Evaluate and reduce non-essential medications, such as supplements or multivitamins to reduce medication administration time and limit exposure to residents.

https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-hcf.html (February 29, 2020) https://www.minnesotageriatrics.org/covid-19.html (March 31,2020)



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