



## COVID-19 Response

### Ascension COVID-19 Website

We are pleased to launch the new [Ascension COVID-19 Response Resource Center](#). This site provides critical resources and updates for our Ascension community in support of our efforts to keep all stakeholders informed throughout this pandemic.

Our infection control specialists are working closely with the Centers for Disease Control and Prevention (CDC) and local public health departments to put in place safety and prevention measures. As information continues to evolve based upon CDC guidance, documents, protocols and resources will be updated. Please bookmark the page and check back often for updates.

#### Who can access the site?

The site is accessible to all associates, contingent workers, aligned medical staff, and other Ascension stakeholders with an existing Google account. Please [click here](#) for instructions.

#### How do I create a New Google Account if I don't have one?

The COVID-19 Response Resource Center site can be accessed by anyone with a Google account who is granted access. Please [click here](#) for instructions on creating a Google account.

#### Reminder

If you develop symptoms (fever, cough, difficulty breathing, or even a mild cough or low-grade fever), limit contact with others and seek advice from a healthcare provider.

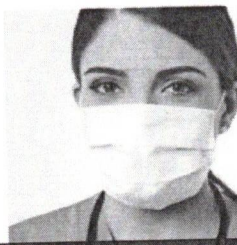
Also note that care provided through Ascension Online Care for [SmartHealth](#) members is now available at \$0 copay.

### Implementation of extended use for facemasks:

Extended use of facemasks is the practice of wearing the same facemask for repeated close contact encounters, without removing the facemask between patient encounters.

- You must take care not to touch your facemask. If you touch or adjust your facemask you must immediately perform hand hygiene.
- You should leave the patient care area if you need to remove the facemask.
- The facemask should be removed and discarded if soiled, damaged, or hard to breathe through.
- Not all facemasks can be re-used.
  - Facemasks that fasten to the provider via ties may not be able to be undone without tearing and should be considered only for extended use, rather than re-use.
  - Facemasks with elastic ear hooks may be more suitable for re-use.
- You should leave the patient care area if you need to remove your facemask. **Facemasks should be carefully folded so that the outer surface is held inward and against itself to reduce contact with the outer surface during storage. The folded mask can be stored between uses in a clean sealable paper bag or breathable container.** You will be provided a bag.

**\*\*\*Please put your name on your mask and bag\*\*\***



This is my  
mask.  
There are  
many like  
it, but this  
one is  
mine.



# Ascension

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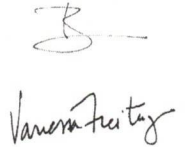
**To:** Ascension Wisconsin Leadership Team -- Vice Presidents-and-Above

**From:** Gregory Brusko, DO, MMM, FACOS, Chief Clinical Officer, Ascension Wisconsin  
Vanessa Freitag, Vice President Operations Integration and Pharmacy,  
Ascension Wisconsin

**cc:** Bernie Sherry, Senior Vice President, Ascension and Ministry Market Executive,  
Ascension Wisconsin  
Heather Schimmers, Chief Nursing Officer, Ascension Wisconsin  
Elizabeth Lemons, Interim Chief Operating Officer, Ascension Wisconsin

**Date:** March 23, 2020

**Subject:** Rescheduling Radiology and Imaging Procedures as Necessary



The following protocol is effective immediately. All timelines will be reviewed routinely and extended as appropriate. Please prioritize for immediate implementation.

**Please distribute the attached communication to Radiology Department leaders across Ascension Wisconsin.**

As cases of COVID-19 rapidly increase across Wisconsin, we must continue to expand measures that protect our patients, providers, associates and the communities we serve.

The American College of Radiology (ACR) fully supports and recommends compliance with the Centers for Disease Control and Prevention (CDC) guidance that **advises medical facilities to “reschedule non-urgent outpatient visits as necessary.”**

This includes non-urgent imaging and fluoroscopy procedures, including but not limited to: screening mammography, lung cancer screening, non-urgent computed tomography (CT), ultrasound, plain film X-ray exams, and other non-emergent or elective radiologic and radiologically guided exams and procedures. Radiologists should work with their referring physicians to review and reschedule such exams at least six weeks out.

Centers for Disease Control and Prevention does have a statement that “if a community is experiencing spread of COVID-19,” it is reasonable for healthcare facilities to “cancel elective and non-urgent procedures.” **Given the many calls to promote social distancing as a primary means of reducing or delaying the spread of COVID-19, the SBI recommends that individual facilities consider delaying screening breast exams for several weeks or a few months.**

We ask our radiology team members to work with local sites to determine how far out to reschedule appointments based on the site and the type of test. Thank you.



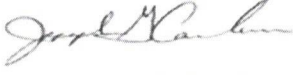
## COVID-19 Response


March 18, 2020 1:15 PM

**To:** Ascension Executive Leadership

**cc:** Mohamad Fakih, MD, MPH  
Vice President, Quality and Clinical Integration

Richard Fogel, MD  
Senior Vice President and Chief Clinical Officer, Clinical & Network Services

**From:** Joseph Cacchione, MD, FACC   
Executive Vice President, Clinical & Network Services

Craig Cordola   
Executive Vice President and Chief Operating Officer

The CDC has recently updated the personal protective equipment (PPE) used for COVID-19. Person-to-person transmission most commonly happens during close exposure to a person infected with COVID-19, primarily via respiratory droplets produced when the infected person coughs or sneezes. Droplets can land in the mouths, noses, or eyes of people who are nearby or may be inhaled into the lungs of those within close proximity. It is thought that airborne transmission from person-to-person over long distances is unlikely unless exposed to aerosol-generating procedures.

The new guidance addresses the potential impact to the healthcare personnel and clarifies when to use a face mask vs. an N95 respirator. **Please share page 2 of this document with appropriate patient-facing staff as needed.**

We continue to do our best to protect our associates by following CDC guidelines with the available PPE. Updated guidance from the CDC is based on currently available information from local and regional analysis of PPE with regard to COVID-19. These guidelines are subject to change based on CDC recommendations.

# CDC Recommendations for Respiratory Protection during COVID-19

Tier	PATIENT SCENARIO	SETTING OPTIONS	ROOM TYPE	ROOM CLEANING	ISOLATION TYPE	PPE REQUIREMENTS
0	Symptoms consistent with viral respiratory illness	ED Acute Care	Regular room door closed	Routine cleaning no wait time after discharge	Droplet	Surgical/procedure mask Standard Precautions  No N-95 NEEDED
1	Positive Screen AND Person under investigation (PUI)	ED Acute Care	Regular room door closed	Routine cleaning no wait time after discharge	Droplet + Contact + Eye protection	Surgical/procedure mask for patient AND associate Face shield/goggles Gowns Gloves No N-95 NEEDED
1	PUI or confirmed COVID (and no aerosol generating)	ED Acute Care	Regular room door closed	Routine cleaning no wait time after discharge	Droplet+ Contact+ Eye protection	Surgical/procedure mask Face shield/goggles Gowns Gloves No N-95 NEEDED
2	PUI (for procedure of swabbing for COVID)	ED Acute Care	Regular room door closed	Routine cleaning no wait time after discharge	Droplet + Contact + Eye protection	N95/CAPR/PAPR (or surgical/procedure mask if not available face (extended use) Face shield (preferred over goggles) Gowns Gloves
3	PUI or confirmed COVID (and performing aerosol generating procedures)	ED Acute Care (usually ICU)	Negative pressure room if available OR private room - door closed	Routine cleaning Wait 20 minutes after discharge	Airborne+ Contact + Eye protection	N95/CAPR/PAPR (Re-use unless AGP) Face shield (preferred over goggles) Gowns Gloves

Definitions and Acronyms:

- **GREEN: Low Risk Yellow: Medium Risk Red: Higher Risk**
- **PUI:** Any person who is currently under investigation for having the virus that causes COVID-19
- **AGP:** Aerosol Generating procedure: Aerosol-generating procedures include positive pressure ventilation (BiPAP and CPAP), endotracheal intubation, airway suction, high frequency oscillatory ventilation, tracheostomy, chest physiotherapy, nebulizer treatment, sputum induction, and bronchoscopy.
- **ED:** Emergency Department
- **UC:** Urgent Care
- **CAPR:** Continuous Air powered respirator
- **PAPR:** Powered Air powered respirator