From: Schwartz, David
Subject: DOM Covid Communication
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Attachments: covid19treatmentquidelines.pdf
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Dear Friends and Colleagues,

I hope you, your family, and your friends are remaining well. There's a lot going on, so let me fill you in on what I know.

Covid Numbers are Improving

- **Covid Deaths:** The Colorado Department of Public Health and Environment (https://covid19.colorado.gov/case-data) is reporting a substantial drop in the number of coronavirus related deaths; see histogram below.
- Covid Hospital Census: While the number of reported new cases in the state have been relatively constant for the past week between 250 and 450 (https://covid19.colorado.gov/case-data), the table shows that at UCH, we've had a marked decline in the number of hospitalized cases (lowest since the first week in April). In addition, the state is reporting a leveling off of the number of hospitalized cases of Covid-19. The likely conclusion is that the new cases are due to more expanded testing, and there is an overall decrease in the number of cases of Covid-19 in Colorado.

The take home message is that we're getting through the initial surge of the Covid pandemic. However, as our state and other states relax social distancing, it's likely that we'll see an increase in hospitalized cases. While the experts are warning us that easing restrictions will likely result in more cases, no one really knows what will happen or when it will happen. However, it's important that we and our patients maintain social distancing, and continue to appropriately rely on PPE and testing to limit exposures.

Clinical: I've attached a copy of the new treatment guidelines that were released today by the NIH (Steve Johnson is on the expert panel) — these treatment guidelines are excellent. Our providers and hospital staff continue to do an outstanding job taking care of Covid-19 patients at UCH, DH, VAMC, and NJH. At last count at UCH, we've admitted 671 patients with Covid, ventilated 158, successfully extubated 95 (73% success rate), and discharged 498 (89% success rate) Covid patients. Only 22 patients have been readmitted and 49 patients have unfortunately died from this virus (21 deaths in patients over 75 years of age). The clinical program is entering into a reactivation phase that will involve a phased and deliberate transition and will be coordinated and highly orchestrated by UCH and CU Medicine. Virtual health will continue to be emphasized to meet our patient needs. Importantly, a recovery like this has never been done before and we need to learn from what we do and modify what we're doing. Hang in there and let us know if you have ideas that can help improve this transition. I'm extremely proud of the contributions our providers and hospital staff have made to fighting this disease, caring for our patients, and working together. The comradery I see every day is something we have to retain forever. We are stronger together, and we're proving it every day.

Research: Our research program is going through a phased recovery with an emphasis on safety of our workforce. Some core activities and support services have already been activated. The phased transition to recovery will be directed by Tom Flaig, Vice Chancellor for Research and will involve the following steps:

- This week
 - o Covid officials are submitting specific activation plans for each floor of the research buildings and these plans are currently being
 - o Skillsoft training program for those returning to campus or currently on campus
 - o Testing of building entry procedures for the research buildings
- Ongoing
 - o Any work that can be done remotely will continue to be done remotely
 - o Incident tracking to assess transmission of infection when and if they occur
 - o Reinforcement of social distancing
 - o Assessment of PPE needs for lab and clinic-based research
- Monitor progress and be prepared to modify plans

Covid-19 Medical Grand Rounds (MGRs): The presentations for our MGRs are posted on the on the <u>Grand Rounds library</u> and recording are available at the below youtube sites.

- April 1: Covid-19: Challenges, Opportunities, and Unknowns https://youtu.be/fvl7xv29Bf0?t=1
- April 8: Acute Respiratory Distress Syndrome, Interleukin-6, and Cytokine Storm Induced By Covid-19 https://voutu.be/iUmsUqFUltA?t=1
- April 15: Crisis Standards of Care: 10 Years of Lessons Learned About Ethical Triage, But Are We Ready? https://youtu.be/5P-BPasFI3k
- April 22nd: SARS-CoV2 Vaccine Development https://youtu.be/kD90qLY1c-s?t=1
- April 29th: Challenges in the management of Covid-19 patients, case-based presentations https://youtu.be/6y1kCWNf7g8
- May 6th: Covid-19: Why the supply chain for PPE and medications are vulnerable to disasters https://youtu.be/hXsdQi150_g
- May 13th: Mind the Brain: Mental health in the time of Covid-19

- o Steven Berkowitz, MD
- o Charles Benight, PhD
- o Brooke Griese, PhD
- o C. Neill Epperson, MD
- May 27th: Racial Differences and Health Disparities in Covid-19
 - o Shanta Zimmer, MD
 - o Lily Cervantes, MD
 - o Carlos Franco-Paredes MD,
 - o Katherine Dickinson, PhD

If you have suggestions for other topics or speakers, please let me know

Finances:

- Given our loss in clinical revenue, the DOM is <u>conservatively projecting</u> a \$4.3M deficit in FY20 and a \$2.9M deficit in FY21. In addition, it is likely that we will receive less support from SOM and UCH in FY21.
- Our deficit reduction plan will involve contributions from the divisions and the department. Almost all of my Division Heads and Vice Chairs have joined me and donated 10% of their salary to help offset some of the expected losses with the goals of supporting our outstanding faculty and staff, and maintaining critical Departmental and Divisional education and research programs. I'm confident that we will be able to address the anticipated deficits through December. My primary goals are to continue to support our faculty, trainees, and staff, and the educational and research programs that we've built over the past decade.

We're entering the next phase of what is proving to be an extended multi-stage process that is somewhat unpredictable and will continue to test our resolve. While we can't predict what the virus will do, we're fully capable of controlling our response to the virus. On our campus, we know we can rely on each other, we know how to focus on problems and deliberately think through our options, we know we have an incredibly talented community of faculty, staff, and trainees, and we know that science and our collective determination will lead our way out of this crisis. As I've said before, we need to have the humility and strength to let the truth and our values guide our next steps. I'm confident that we'll get through this together. Stay well and stay connected. Please send me your concerns and ideas. My very best wishes.

David

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