



# LTC / Post-Acute Covid 19 Clinician Update

Chris Pomrink, DO  
Medical Director VMG

# Agenda

- Welcome: Dr Chris Pomrink
- Covid Trends to Date: Dr Andy Cohen
- State of the House - Virtua: Dr Eric Sztejman
- Regional LTC / Post-Acute Update: Tracey Lanoza
- Covid Clinical Updates: Dr Marty Topiel
- Clinical Insight: Dr Eric Sztejman
- Questions?



## Latest Covid Numbers

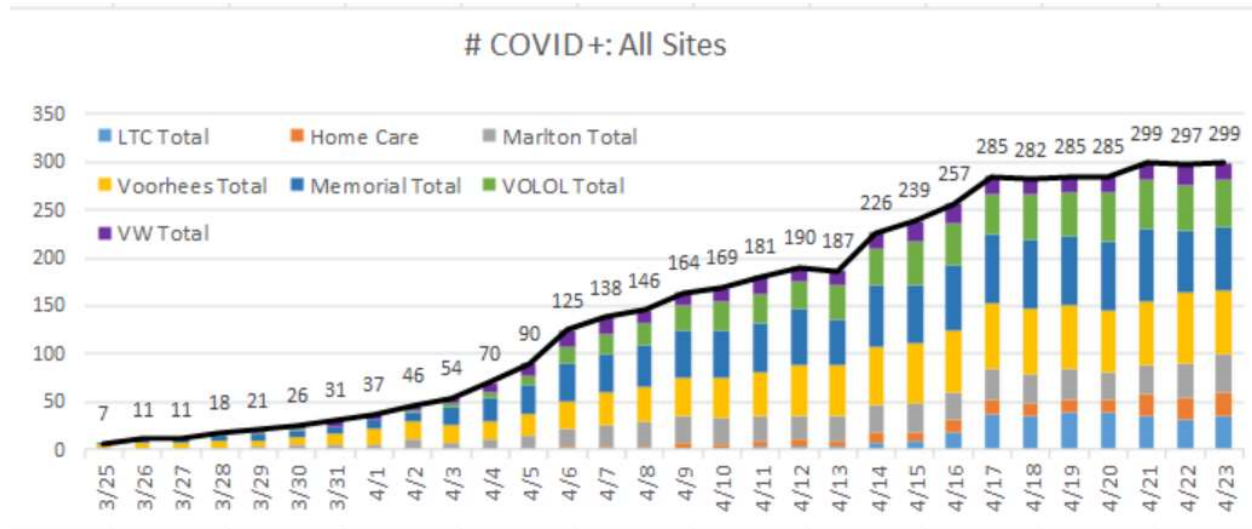
Andrew Cohen, MD  
Medical Director VPP/LHN

# Latest Covid Numbers

Date	Global	National	State	Regional	Virtua Acute Care Admissions
4/16	2,078,277	639,664	71,030	3,430	220
4/23	2,678,585	854,490	95,914	5,262	238
% increase	29%	34%	35%	<b>53%</b>	<b>8%</b>

## Virtua Trend

\*includes LTC/Home Care



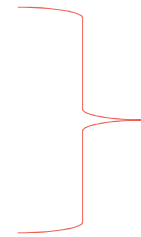


# We Do Not Believe We Have Passed Our Peak

Hospitalized Census peaks at 540 on Apr 29

ICU Census peaks at 249 on Apr 30

Ventilated Census peaks at 183 on May 01



Post Acute Surge Will  
Follow

*Disclaimer: This data is based off of our Internal Predictive Analytics Model and is Subject to Change*



## Virtua State of the House

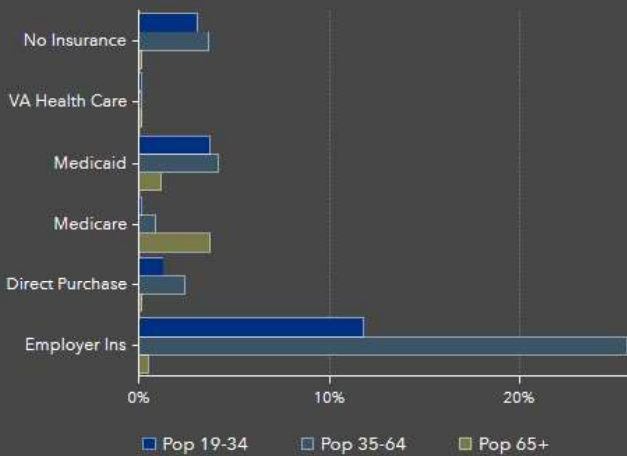
Eric Sztejman, MD  
Medical Director – VMG  
ICU Medical Director

# COVID-19 STATUS REPORT

Camden, New Jersey

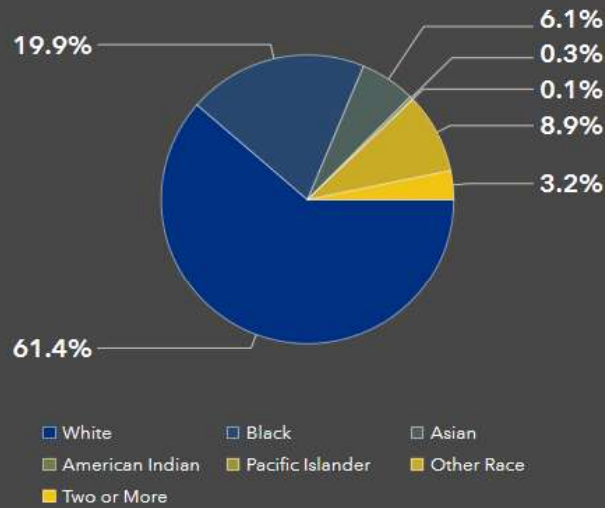
## HEALTH FACTS AND INFRASTRUCTURE

### HEALTH INSURANCE



## POPULATION

### RACE AND ETHNICITY



## POLICIES AND CASES

### COUNTY CASE DATA



### Comparative Statistics to State of New Jersey

Total Confirmed	Deaths	Fatality Rate	Tested
95,914	5,150	5.37%	191,659

Emergency Type	Date	Details
Govt Ordered Community Quarantine	3/22/2020 1:02:13 AM	



2,407  
Staffed Beds



2,231  
Licensed Beds



166  
ICU Beds



12.9%  
Poverty Percentage



507,078  
Total Population



75,995  
Population Age 65+



2,528  
Confirmed Cases



94  
Total Deaths



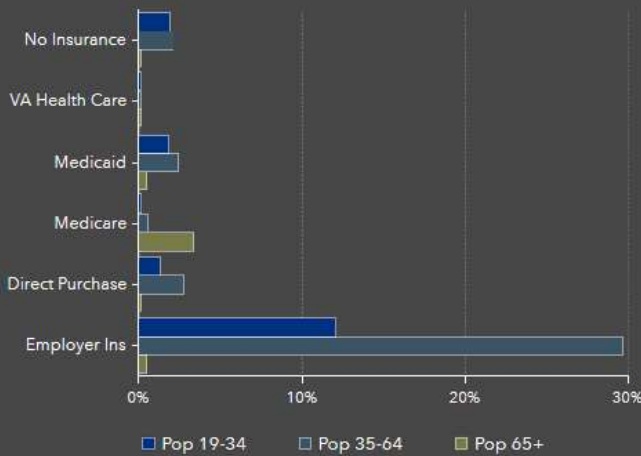
3.72%  
Fatality Rate

# COVID-19 STATUS REPORT

Burlington, New Jersey

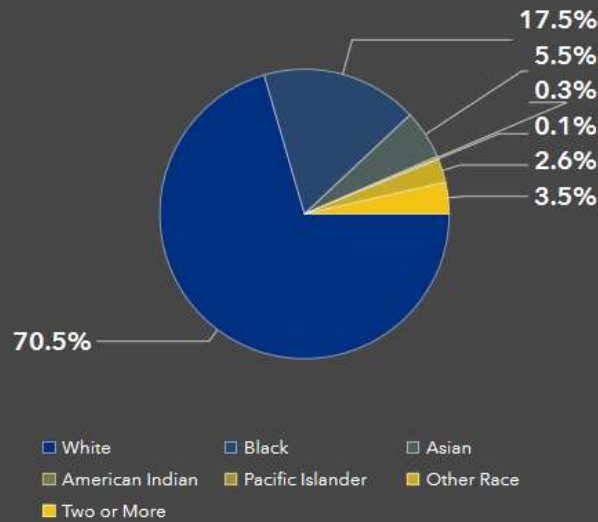
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Emergency Type	Date	Details
Govt Ordered Community Quarantine	3/22/2020 1:02:13 AM	



**795**  
Staffed Beds



**894**  
Licensed Beds



**100**  
ICU Beds



**6.2%**  
Poverty Percentage



**445,384**  
Total Population



**72,612**  
Population Age 65+



**1,878**  
Confirmed Cases



**68**  
Total Deaths

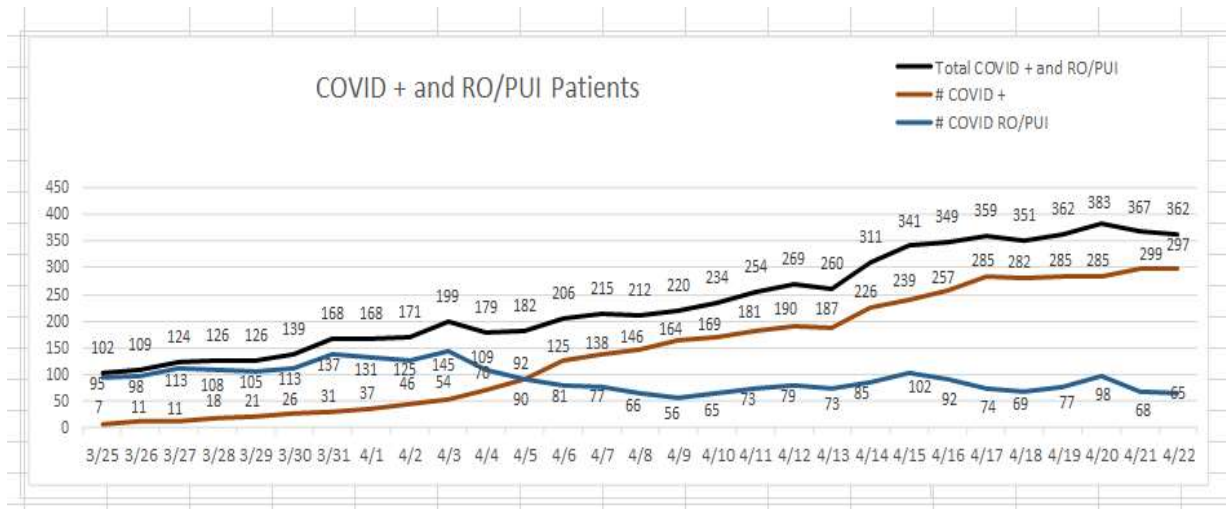


**3.62%**  
Fatality Rate



# State of Virtua

- 4/23/2020
  - 850 inpatients / normal census 950
  - 310 Covid + PUI = 39 %
  - 59 patients with requiring mechanical ventilation
  - 78 Available ventilators





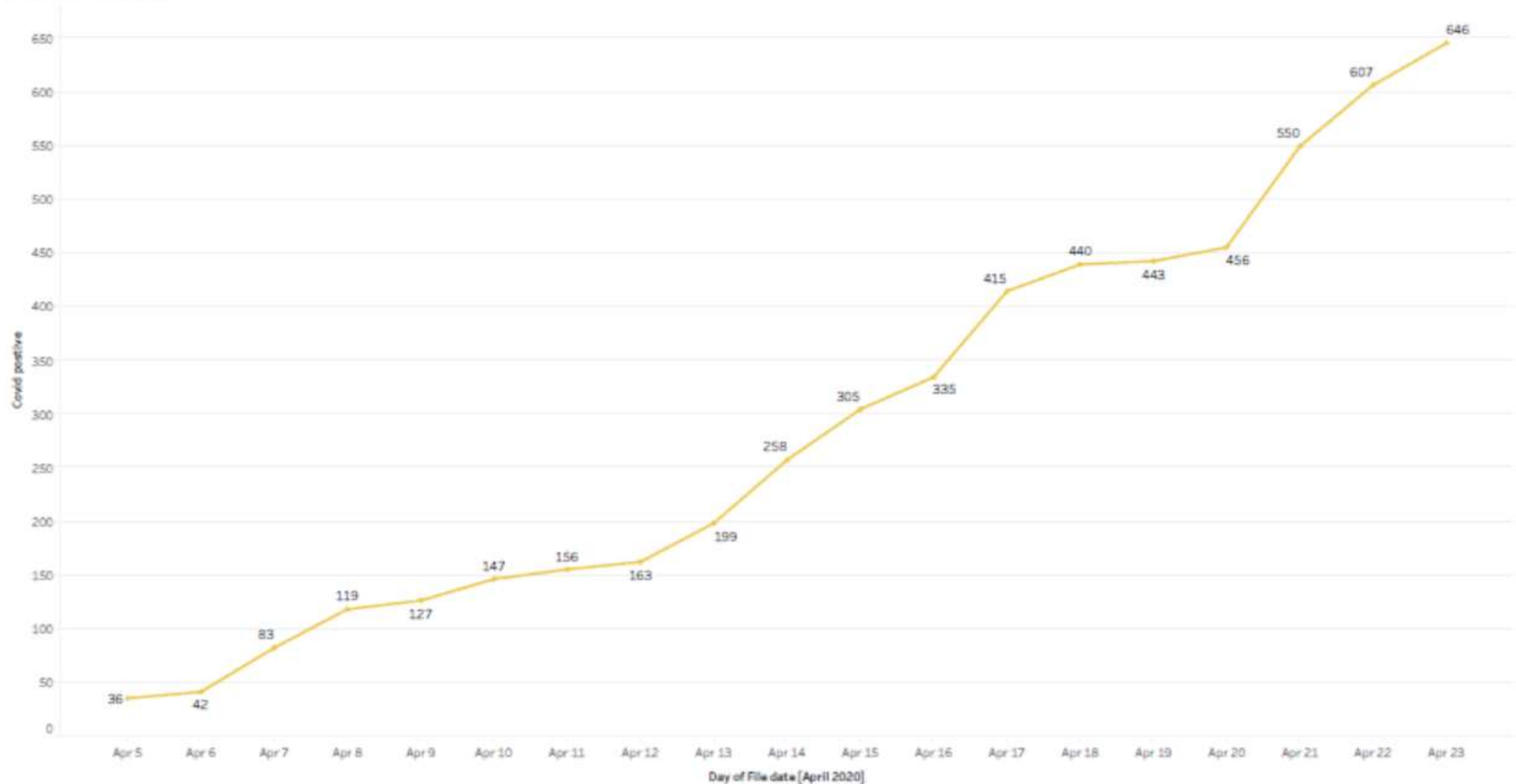
# COVID-19 Effect on Regional Post-Acute Facilities

**Tracy Lanoza, DNP, MBA, APN, FNP**  
Lead NP for SNF Initiative

# Daily SNF Survey

Availability				Capabilities							Covid Status		Facility Issues		Preferred SNF	County
Open for admits	Date expected to reop	SNF Bed Available	Vent Bed Available	Neuro	Ortho	Cardiac	Wound	IV	Trach Care	Dialysis	Covid + pt	Rule out Covid P1	Staffing issues	PPE issue		
Readmits only		0	NC								12	1	11	yes		Mercer
yes		0	NC								50	3	0			Gloucester
Readmits	unk	0	NC								13	0	7	yes gowns		Camden
no	unk	0	NC		x	x	x	x	x		24	1	4	no		Camden
no	unk	0	NC				x	x	x		30	0	20	no		Burlington
NO	unk	0	NC								24	4	20			Camden
yes	unk	37	NC								6	3	4	yes		Burlington
yes		16	NC								45	4	8	yes		Burlington
yes		8	NC	x	x	x	x	x	x		1	4	8	no	*	Burlington
no	unk	0	NC								0	0	0			Mercer
no	will review	0	NC	x	x	x	x	x	x		16	1	20	yes	*	Camden
yes		5	NC	x	x	x	x	x	x		15	44	12	yes		Gloucester
yes		0	NC								0	1	15	yes		Gloucester
yes		0	NC								0	0	0	yes		Camden
yes		3	NC								0	0	0			Mercer
no		2	NC								20	0	10	no	*	Mercer
no	unk	0	NC								0	0	0			Mercer
yes		1	NC					x	x	PD	0	0	2	no		Gloucester
NO	unk	0	NC				x	x	x		1	0	2	no		Camden

### Covid 19 Positive



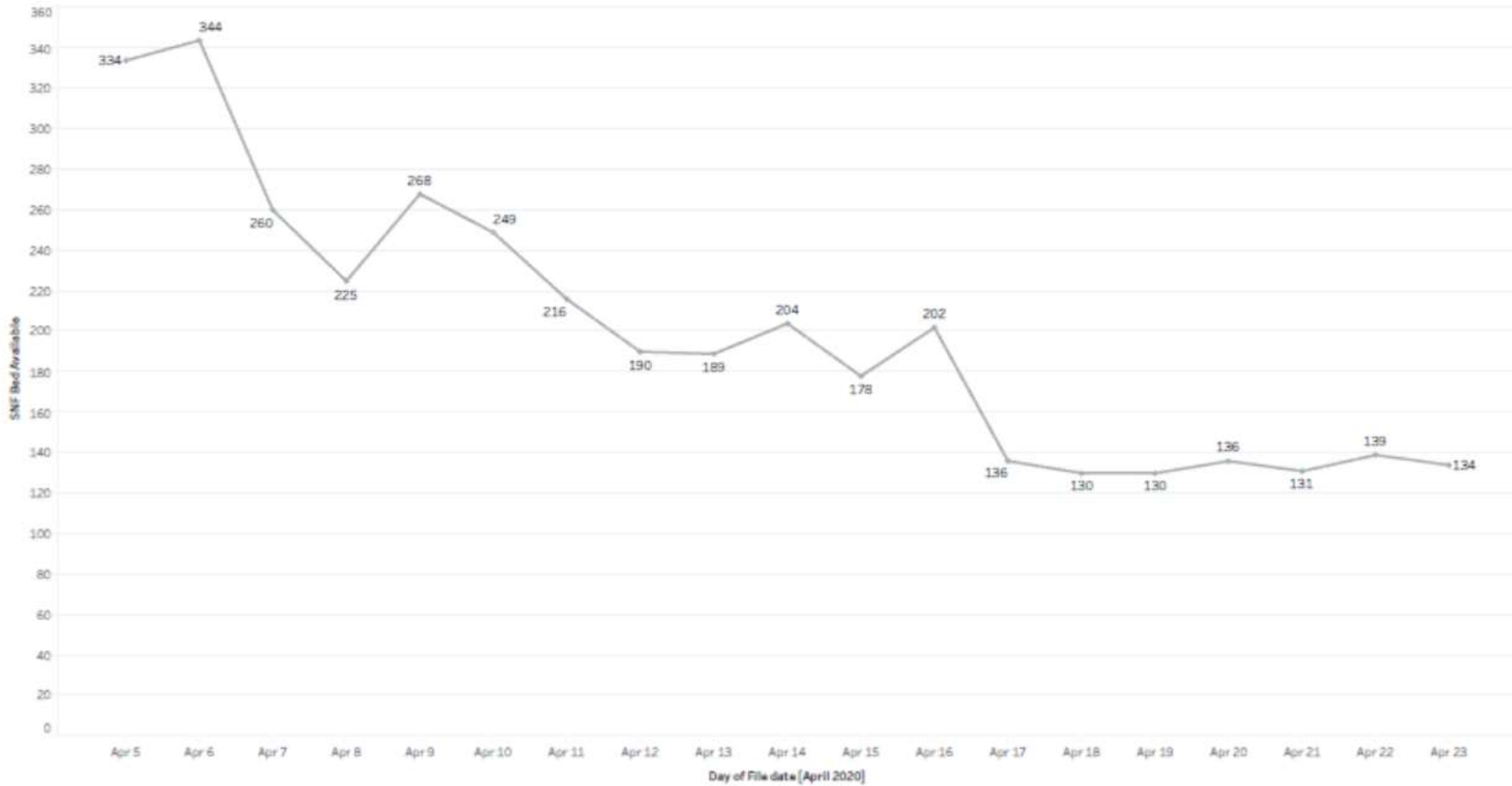
The trend of sum of Covid positive for File date Day. The marks are labeled by sum of Covid positive.

## Open for Admissions(Facilities)



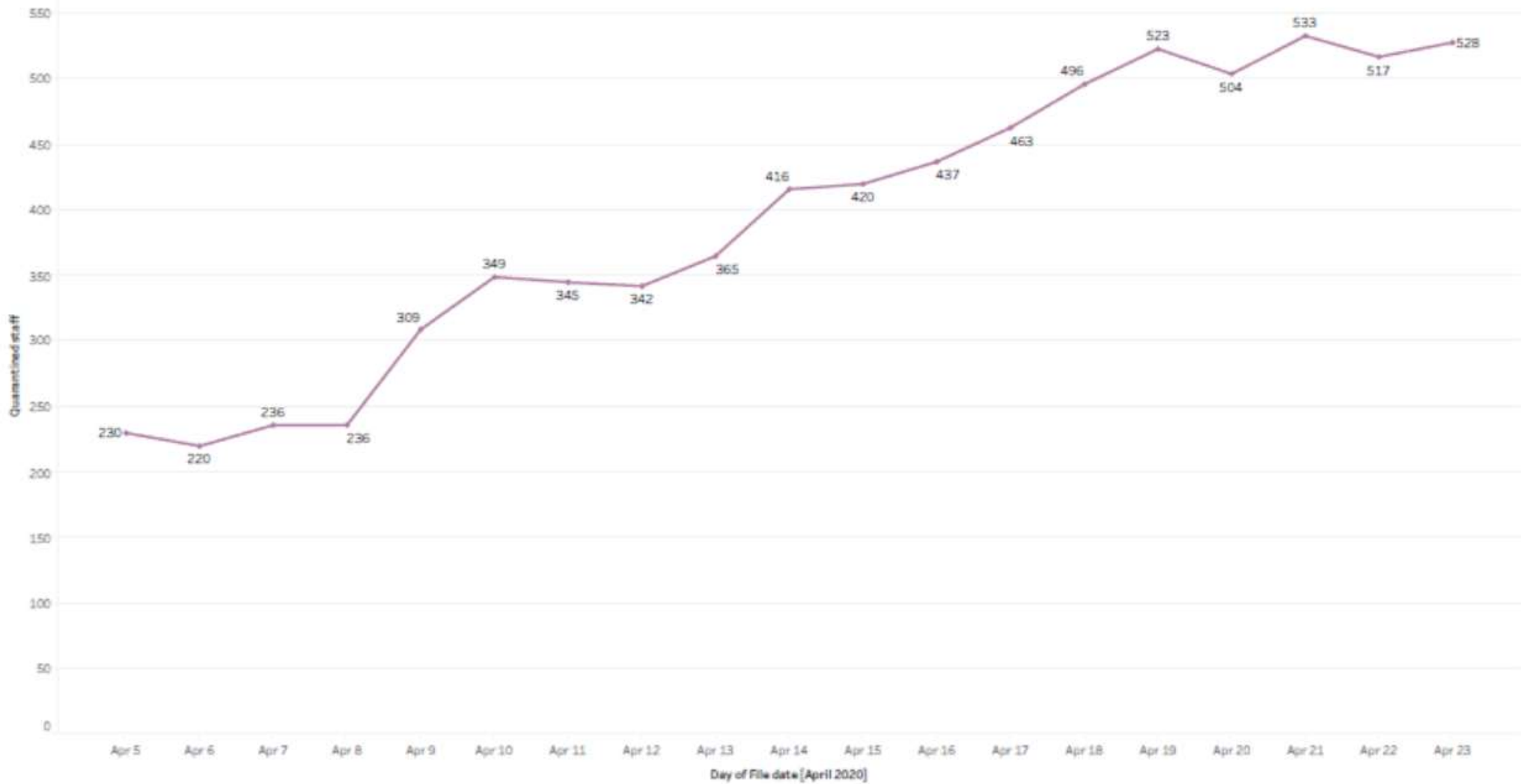
The trend of sum of Open For Admits for File date Day. The marks are labeled by sum of Open For Admits.

## Open Beds



The trend of sum of SNF Bed Available for File date Day. The marks are labeled by sum of SNF Bed Available.

## Staff Impacted



The trend of sum of Quarantined staff for File date Day. The marks are labeled by sum of Quarantined staff.



# Covid Clinical Updates

Marty Topiel, MD  
Virtua Infectious Disease  
Program Director



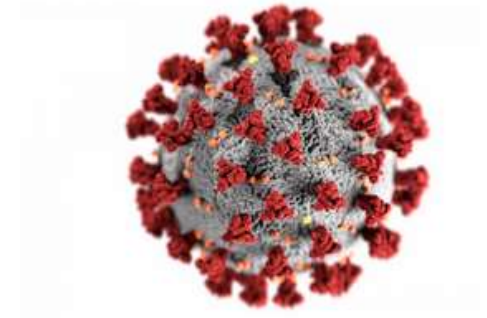


## Clinical Insights

Eric Sztejman, MD  
Medical Director – VMG  
ICU Medical Director

# COVID 19

- **SARS -CoV - novel RNA coronavirus**
- **Wuhan, China 2019**
- **Pandemic March 11, 2020**
- **Transmission droplet and Aerosolized**
- **Mean incubation time of 4 days**
- **Symptoms (hospitalized)**
  - **Fever 77-98%**
  - **Cough 46-82%**
  - **Myalgia or fatigue (11-52%)**
  - **GI Symptoms (May approach 50%)**
  - **Less common sore throat, headache, cough with sputum production and/or hemoptysis, and lower resp tract symptoms**



# COVID - 19

- Risk factors for severe illness
  - Not yet clear
  - Maybe older patients, chronic illness
- Clinical Presentation
  - Asymptomatic – to mild illness to severe or fatal
  - ½ patients with Covid Pneumonia
    - Developed dyspnea at 8 days after illness
    - ARDS developed in 17-29% of hospitalized patients
    - 20-30% required admission to the ICU

# Clinical Course

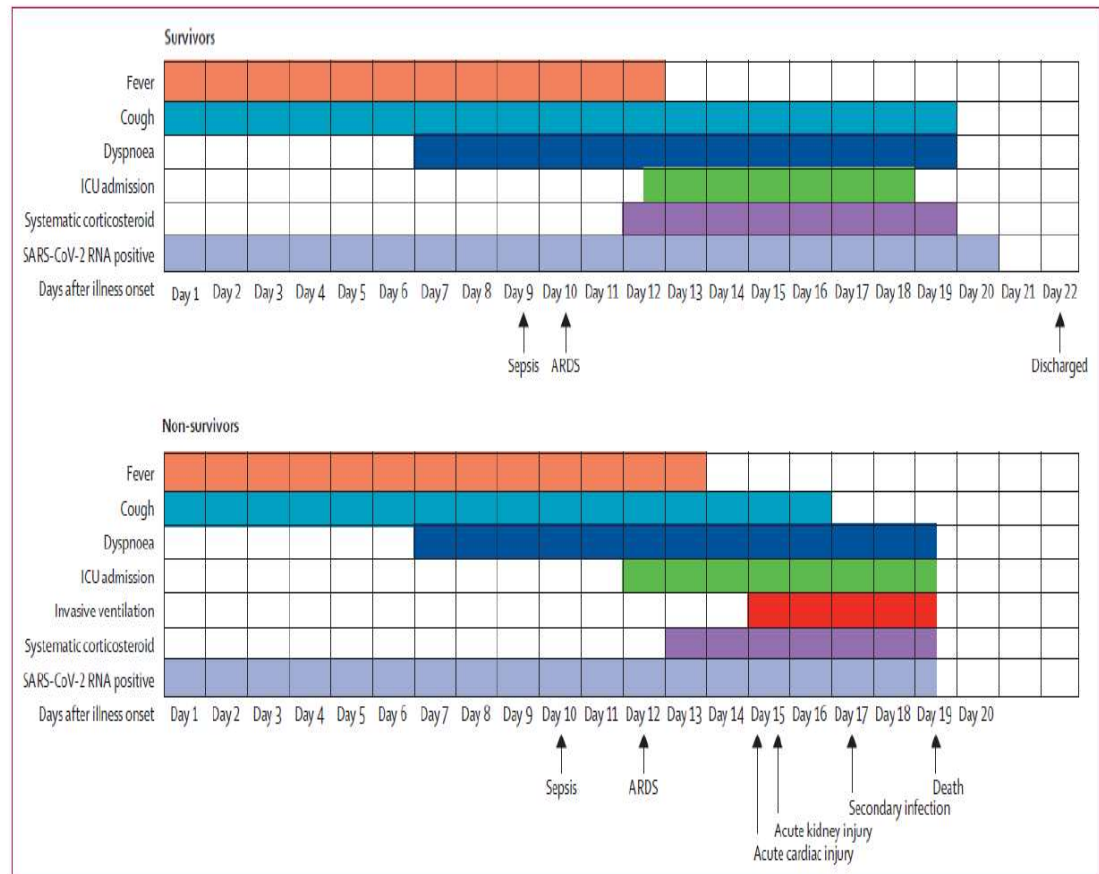


Figure 1: Clinical courses of major symptoms and outcomes and duration of viral shedding from illness onset in patients hospitalised with COVID-19. Figure shows median duration of symptoms and onset of complications and outcomes. ICU=intensive care unit. SARS-CoV-2=severe acute respiratory syndrome coronavirus 2. ARDS=acute respiratory distress syndrome. COVID-19=coronavirus disease 2019.

Figure 1. Clinical Courses of Major Symptoms and Outcomes and Duration of Viral Shedding [from Zhou, et al.; Lancet (2020)].(4)

# COVID- 19 Management Mild Disease

- Mild Disease (81% or higher)
  - Supportive Care
  - Self quarantine
    - Minimize transmission risk in the home
    - Face mask / gloves
    - Progression to hospitalization median 7-11 days
    - Close follow into the second week
      - Age > 60
      - Males
      - Underlying comorbidities
        - Chronic Liver, Lung, Heart, Kidney
        - DM
        - Immunocompromised and Cancer
        - Pregnancy

# Supportive Care

- Access to food and liquids
- Support services in the home and the care facilities
- Acetaminophen
- Oxygen
  - Over 4 liters/min t/c hospitalization
- Concerns
  - ACE and ARBS – should be continued but not started
  - NSAIDs deemed safe by WHO
  - NO Steroids (unless on chronically)

# Covid 19 Lab and Study Considerations

- CBC with diff
- CMP
- CPK

## On admission

- SARS-CoV-2 test
- D-dimer / PT/ PTT, Fibrinogen
- Ferritin / CRP / ESR
- LDH
- IL-6
- Troponin
- ECG
- CXR
- Blood cultures / Sputum /

# Covid -19 Moderate / Severe

- Oxygen
  - 4 l/min should consider hospitalization
  - Pulse ox goal > 90
  - NO NEBS
  - NO BIPAP / CPAP /Trilogy
- Medication regiment
  - No FDA approved treatments
    - Hydroxychloroquine
      - off-label
      - Increased QT interval (would not start if QTC >480 and may need to monitor)
    - Azithromycin
      - Off label
      - Increased QT interval (would not start if QTC >480 and may need to monitor)



# Covid - 19 Moderate/Severe

- IL-6 Monoclonal Antibody
  - Not FDA approved
  - Tocilizumab
  - Sarilumab
- Antivirals
  - Remdesivir
    - Not FDA approved
    - Research Study for intubated patients
    - Compassionate use for pregnancy



Questions?

# Clinician Survey

- **COVID-19 Survey – Share Your Opinion**

Our team is working to ensure our clinicians feel informed and supported during this unprecedented time. Please take this quick [3-minute survey](#) to allow us to learn more about how we can help you in your practice.

- Survey link available directly from Clinician Update on 411
- The survey closes Friday April 24 at 5 p.m.