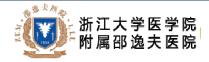


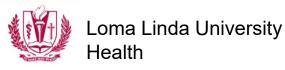
Prevention and Treatment System against COVID-19 by Whole-process Management and Innovation —SRRSH Experience

Xiujun CAI, MD, FACS, FRCS

President, SRRSH





















Overview

of the campaign against the virus in SRRSH



Early Stage of Epidemic:

Prepared for action



Outbreak Period:

First-level Response to

Major Public Health

Emergencies



Post-Pandemic:

Restoration and

Precaution

Management of Severe and Critical Patients:

The experience from

frontline teams

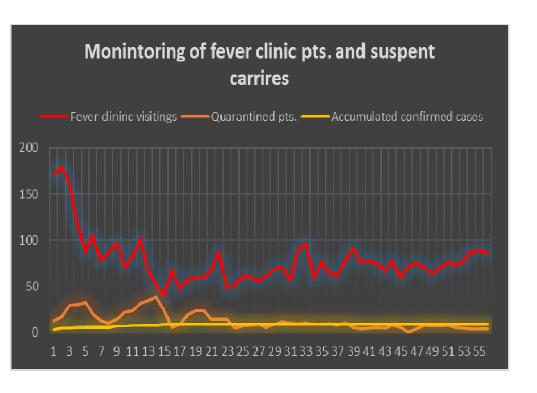








Overview of the Campaign



- No. of pts. with fever clinic visiting: 4,659
- No. of suspected carriers isolated: 328
- No. of pts. diagnosed: 9
- No. of sample tested: 1,350
 - Positive with COVID-19: 9
 - No. of staffs engaged in the frontline: 13,860
- No. of pts. hospitalization/surgical procedures:

16,075 / 2,641

Duration: From Jan. 14 to Mar. 19 (65 days)

NO DEATH, NO HOSPITAL INFECTION!



















Rapid Response of Leadership



2020 Jan 14

First coordination meeting for prevention and control planning

 Leading group for prevention and control of COVID-19 infection 2020 Jan 18

Experts and rescue team for COVID-19 infection









ERP and Workflows

THE HOSPITAL LEVEL

- ✓ ERP for acute infection diseases (updated)
- ✓ ERP for prevention and control of COVID-19 infection
- ✓ Workflows for surgical procedures during the period
 of COVID-19 epidemic
- ✓ ERP for inpatients wards during the period of COVID-19 epidemic
- ✓ Workflows for fever clinic and quarantine wards
- ✓ Guideline for quarantine wards remodeling
- ✓ Guideline for clinical sampling and inspection of Suspected carriers
- **√**

THE DEPARTMENT LEVEL

- ✓ Workflows for radiology
- ✓ Workflows for ultrasound
- ✓ Workflows for EKG
- ✓ Workflows for DSA room.
- ✓ Workflows for Hemodialysis center
- ✓ Workflows for Endoscopic center
- ✓ Workflows for Clinical laboratory
- ✓ Workflows for nuclear medicine department
- ✓ Workflows for COVID-19 infection with ACS.
- **√**









COVID-19 related Training & Evaluation









Training for physician, nurse, and rescue team



Guidelines and workflows are available online









Mandatory online test for each medical staff









Hardware Preparation for Quarantine



Assigned work space

✓ Assigned work space was prepared in Radiology and laboratory system



Wards remodeling

- ✓ 4 units were remodeled for quarantine of suspected carriers
- ✓ 2 units were remodeled as fever clinic
- ✓ 1 negative pressure room in ICU was prepared for severe or critical case of suspected carrier
- ✓ Emergency quarantine room in each inpatient floor was prepared





✓ Medical transferring system, including transportation, for the confirmed cases was set up



COVID-19 alert and

report system

✓ Established a hospital-wide COVID 19 alert and report system.





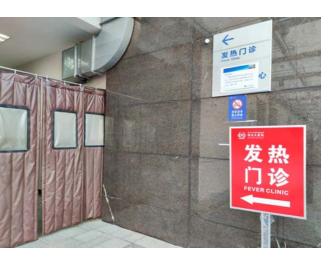






Gate of COVID-19 Control – Fever Clinic

Rational Design



Clear Signs







Designated Route to Radiology Room

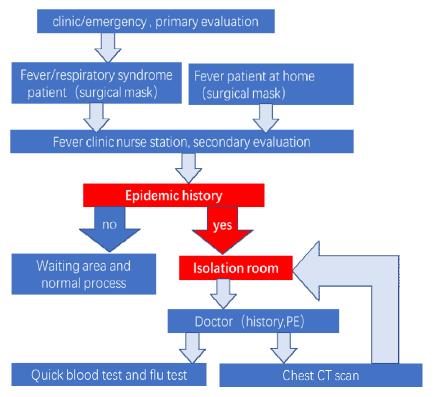


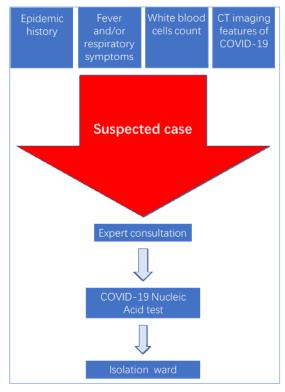






Gate of COVID-19 Control - Fever Clinic





















Outbreak Period:

First-level Response to Major Public Health Emergencies











INNOVATIONS

Upgraded Prevention and Control Procedure on Campus

- A standardized process to take care of the pts. from entrance to ward



Internet + Medical Service

- A solid AI epidemic prevention system

Integrated Medical Resource with Frontlines

- Individualized treatment for each patient













Screening
Point

Health QR Code



Yellow Color Area

Screening Point -

Temperature and epidemiological history screening at the main entrance gate

Outpatient

Health QR Code -

Based on online epidemiological questionnaires and big data (including real-time public data and the social credit system, such as travel, medical records, and Epidemiological history)

- Red Fever Clinic;
- Yellow Special outpatient area;
- Green Normal outpatient area.











Upgraded Prevention and Control Efforts on Campus

Inpatient



High selective admission (emergency/elective)

Reconfirm the epidemiological history and Health code (pts. and accompaniers)

Mandatory chest CT scan before admission

Fixed room and floor for designated physician

Informed consent for the strict hospitalization rules during the epidemic

浙江大学医学院附属邵逸夫医院。新冠肺炎防控措施住院患者及家属告知和承诺书。

尊敬的住院患者及家属:

你们好! ↓

为做好新型冠状病毒肺炎防控工作,切实保障你们的身体健康和生命安全,根据《中华人民共和国传染病防治法》、《浙江省突发公共卫生事件应急预案》,国家卫生健康委《新型冠状病毒肺炎防控方案(第四版)》和浙江省《全省强化疫情防控重点措施重要机制等工作手册及全省新型冠状病毒感染的肺炎疫情落实排查工作和隔离措施等工作量表的通知》等法律法规和相关通知文件的要求,结合目前防控形势及我院实际,现将我院有关新冠肺炎防控措施告知如下,并请各必诚实汇报,严格遵守致院相关规定;。

- 1. 请确认本次就诊时有无如下情况: ↓
 - 1) 14 天内有无发热: □ 是 □ 否。

Informed Consent









Upgraded Prevention and Control Efforts on Campus

Inpatient

- Management of inpatients' accompaniers
 - Wristband, the only identification for entrance
- Temperature and health code reporting system for pts. and accompaniers

Accompaniers Wristband



Patient Wristband











Innovative AI Epidemic Prevention System at SRRSH

Exp 1: Online promotion & education



Published 16 articles about this epidemic

More than 100 thousand PViews per article



Organized 19 online lectures on epidemic prevention

More than 10 thousand audience in one lecture



Broadcasted 14 live sessions on psychological advisory

More than 1.26 million audience cumulatively















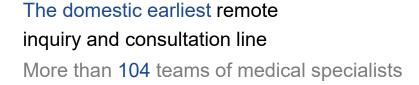
Innovative AI Epidemic Prevention System at SRRSH

Exp 2: Remote inquiry & consultation











Serving for 32674 patients more than 168 thousand online advisory



Serving for more than 4260 residents of Wuhan online



Supporting more than 1000 people in psychological advisory online









Innovative AI Epidemic Prevention System at SRRSH

Exp 3: Online AI Self-test for COVID-19





NHC

Highly recognized and prompted



10 seconds Al risk assessment Link to remote consultation



The whole patient screening forward Treatment separately for patient at risk



Applied to more than 584 online medical institutions



16.2million

Online registered users

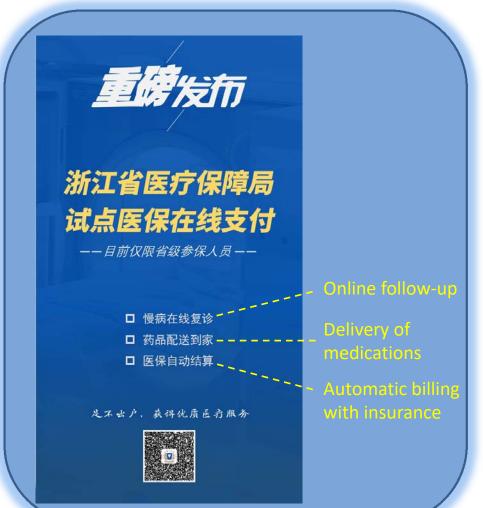








Online Prescription and Follow-up System for Chronic Disease













Integrated Medical Resource with Frontlines

MDT & Individualized Treatment

In campus specialists conducted video MDT with medical rescue teams in Wuhan and Jingmen of Hubei

Implemented individualized treatment for every single severe or critical case











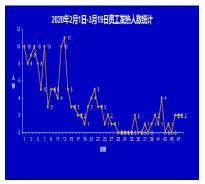
Innovative Tips for Preventing Hospital Infection

Temperature &
Symptom Monitoring
System (TSMS) for
staffs with fever and
aspiratory symptoms



Daily COVID-19
prevention and
control quality
checklist from each
staff





Changed the dinning styles: both for staffs and pts.



Meal delivery Robot in Quarantine Wards

Changed work styles: all the meetings or academic activities went online modes

















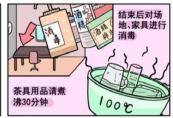


Restoration & Precaution













Restoration of medical practice

- Enlarge the admission criteria
- Re-open the reserved inpatient wards
- Re-start of scheduled surgical procedure



Efforts on local business restoration

Instructions and guideline



Strengthen innovations in the pandemic

- Health code
- Al Epidemic Prevention System
- Self checklist
 TSMS



Psychological intervention for the staffs











SRRSH

Management of Severe and Critical Patients:

Experience from Frontline Teams





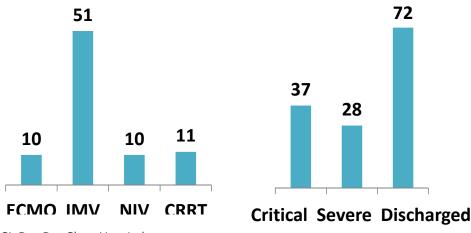




Management of Severe & Critical pts.

8 batches of rescue teams with total 189
Medical and nursing specialists (Jingmen and Wuhan in Hubei, etc)

Patient Data from Rescue Teams in Wuhan & Jingmen



Medical rescue teams from SRRSH





Taking care of severe and critical pts.













Dispatch of SRRSH Staff

142

Wuhan Union Hospital Tumor Center

5

Wuhan Puai Hospital

1

Wuhan Tianyou Hospital

1

Wuhan Fangcang Hospital









Hospitals in Jingmen



Hospitals in Shaanxi



First Affiliated Hospital, Zhejiang University School of Medicine

Fourth Affiliated Hospital, Zhejiang University School of Medicine









Management of Severe & Critical pts.

- Characteristics of severe respiratory failure
- Ventilation support recommendations
- 3 Treatments
 - Antiviral Treatment
 - -Supportive Treatment
 - Corticosteroids: controversial for the dose and duration

4

To be continued from our infection disease specialists on Q&A



The virus has been beyond borders, and the collaboration as well!

