

Caring for You During the COVID-19 Pandemic

To all our patients –

As we are all aware, we are facing uncharted territory in the history of viruses in the United States. We have all seen many different recommendations and suggestions on how to stem the COVID-19 virus.

We at Foothills Urogynecology want you to know we are open and still here to take care of you!

We are providing telemedicine care for our patients who are at risk and for those able to come to the office, we are accepting appointments. We always do extra sanitizing by the very nature of our practice. We all care deeply about you and want to ensure that you can safely visit our medical office. **If you are sick, we are asking that you stay home.**

Below is an article I believe is the most thoughtful response, that I have seen to-date. While it's a bit lengthy, I believe it is worth reading to gain some perspective, understand how the disease spreads and ways that you can help in the prevention of further cases. We've highlighted a few lines for emphasis.

Just like usual, we'll be keeping up with our patients, but feel free to call the office 303-282-0006.

Should you have any questions, worries, we remain here to keep you healthy. Take heed of the advice noted here and know that you can contact us should you need further assistance.

Dr. Terry Dunn & the Foothills staff

COVID-19...You Asked For It...

*By Mia A. Taormina, DO, FACOI
Infectious Disease Specialist*

All – I truly appreciate all of the texts and check-ins over the last couple of weeks and I am truly humbled by the number of friends, colleagues, and family members that have sought my input regarding this pandemic. I have stayed relatively quiet online simply because I have been exceedingly busy working with an incredible team staying ahead of constantly changing patient care and testing guidelines. Ready for my take? Here we go!

COVID-19 is the real deal. At the time of this writing there are nearly 157K cases worldwide and we will go over 3000 cases in the US in the next few hours. It is a once in a lifetime pandemic and has dramatically changed our day-to-day in unprecedented ways. Coronaviruses belong to a family of viruses that most commonly cause common colds and upper respiratory infection symptoms. Most of us have had coronaviruses at some point in our lives. Occasionally, strains of coronaviruses cause more serious infections such as MERS, SARS, and now COVID-19. As with many new strains of respiratory illnesses, the elderly and those with underlying health issues remain our most vulnerable patients. As with common cold viruses, however, the MAJORITY of those who become infected with this virus will experience MILD symptoms only and will FULLY recover.

There is a difference between making preparations at this time to work from home and/or arrange childcare when the kids are off and clearing the shelves of household items and hoarding "supplies." The latter is irresponsible and reprehensible when we are running out of hand sanitizer and gowns and have a critical shortage in some of our masks. STOP IT.

*This week this pandemic will bring our healthcare system to the brink. We already have states with hundreds of cases and will likely have commercial testing for COVID-19 increasingly available leading to an exponential rise in case counts. We are very much aware of the horrifying conditions in China and Italy in addition to other areas with significant community transmission of this. **It is not too late to combat this on the home front if we all do our part.** Stay home if you are feeling unwell. Wash your hands – a LOT. Sanitize your phone with disinfectant wipes. For the love of God, stop touching your face! If you have the option to work from home, do so. Carefully consider your travel plans and the health of your family. Understand the closing schools and cancellation of large public events is an attempt to limit congregation and movement of people.*

Each individual infected with COVID-19 will likely infect 2-3 additional people. This virus spreads by DROPLETS so you have to be in close physical contact with someone actively coughing/sneezing to get exposed. Close contact is defined as within 6ft of someone. While this virus can be shed in someone not yet showing symptoms – it is FAR more likely to be shed by someone who is. **By limiting large groups in close physical contact, we can slow the roll of this pandemic.** Want to have dinner with a small group or have some kids get together during this time off? Are you healthy and not showing any symptoms? Then it's totally reasonable! You don't have to dig a bunker in your yard to socially distance – but keep the hand sanitizer out and anyone feeling unwell should take a pass. There is NO reason to wear a mask if you are not experiencing symptoms, and never a reason to wear a N95 respirator unless you are a provider and have direct, close patient care with these individuals.

Now, from the frontlines. I am the chair of the Infection Control Task Force for my organization. It is most certainly NOT a one (wo)man show – we have a massive conglomeration of physicians, leaders, nurses, suppliers, laboratory specialists, managers, and others meeting for several hours each day (yes you read that right – that's why I'm not able to readily text back) since mid-January when this virus reached the US. I initiated testing last week on the first positive case in my county. I have personally cared for this patient and I will see many, many more. Patients requiring hospitalization are sick. Very sick. The course of this virus is such that most show symptoms 5-6 days after exposure and nearly all who are going to become symptomatic will do so by day 11 after exposure. Once infected, the virus can shed for a month or more. Symptoms most commonly include high fevers (>100.4F), dry cough, and shortness of breath. In contrast, seasonal influenza has similar symptoms but often with headaches, body aches, and malaise/fatigue. As of tonight, there have been 60 total deaths from COVID-19 in the US. In contrast there have been ~50,000 influenza related deaths. COVID-19 is more life threatening than seasonal flu if infected, but we are no stranger to viruses that wreak havoc on our most vulnerable patients year after year. Get your damn flu shots. Every year. Everyone. It's not too late.

Ok. So listen up. DO NOT go to the hospital if you have mild symptoms. If you're sitting at home with a dry cough and low-grade temp – yep – you absolutely could have COVID-19. Or flu. Or some other viral infection. So STAY HOME, supportive care, there is no immediate need to have a test PROVE this fact. Why? Because we need our providers to focus their attention on those who may require intervention or are at high risk of worsening. 15% of those who become infected who are older, have other medical issues, or are immunocompromised are at risk for serious complications and death. It is our responsibility to not crowd these individuals out of the vital services and testing they need.

As chair of the task force I have the final say as to who can be tested for COVID-19 within our organization. This is not something I decide out of thin air – we have spent weeks making complex algorithms to assure we are testing those who really need to be tested. The number of phone calls I receive from people “demanding testing” because of mild symptoms or “needing a test so they can go back to work” is absurd. Just STOP. Also, the utility of this test in someone not showing symptoms at all is not known. We will NOT test patients without symptoms. If you are at home because you have had a known CLOSE exposure (this does not include being in a workplace where it is rumored someone is being tested or being in contact with someone who lives with someone who just returned from Italy or working with Chinese people...STOP IT), listen up. If you are asymptomatic, there is NO reason for your household contacts to also quarantine. Socially distance within the home, separate sleeping arrangements if your bed partner is being observed for symptoms, WASH your hands, and clean shared surfaces frequently. We know COVID-19 can live on surfaces for several days.

I have never been more proud of those I am working with day and night 24/7 on what has become the most significant epidemic/pandemic in my career thus far. We have come together during this time not because we have to, but because we truly want to share our talents and step up even if it is not asked of us to be a part of this mitigation response. It is an honor to be an infection specialist at this time. Please stay calm. Check in on your friends and neighbors and make sure your family members with comorbidities and of a certain age have what they need to lay low. Fortunately, our children who get exposed to this virus have done exceptionally well if they become infected. There have been virtually no deaths in young people. We may be ready to wring their necks after the next 2-3 weeks at home with them – but that's an entirely different topic.

This too shall pass. While this a huge freaking deal, it is not "the big one." There exists the possibility of something as widespread as COVID-19 but with a mortality of 100x that of this pandemic. I am fully anticipating several rough weeks ahead followed by a downturn as the weather warms up and hopefully a pandemic that is fading into the summer months. It is possibly by the end of this 50-70% of the entire population of the world could become infected. Nonetheless, we will all get to go on our vacations soon enough. 9mo from now I will be enjoying the holidays and my colleagues in OB/GYN can take over the chaos. **Be smart. Don't panic. Wash your hands. Staycation. We've got this.**