

POST HOSPITAL CARE OF VENTILATOR-DEPENDENT COVID PATIENTS

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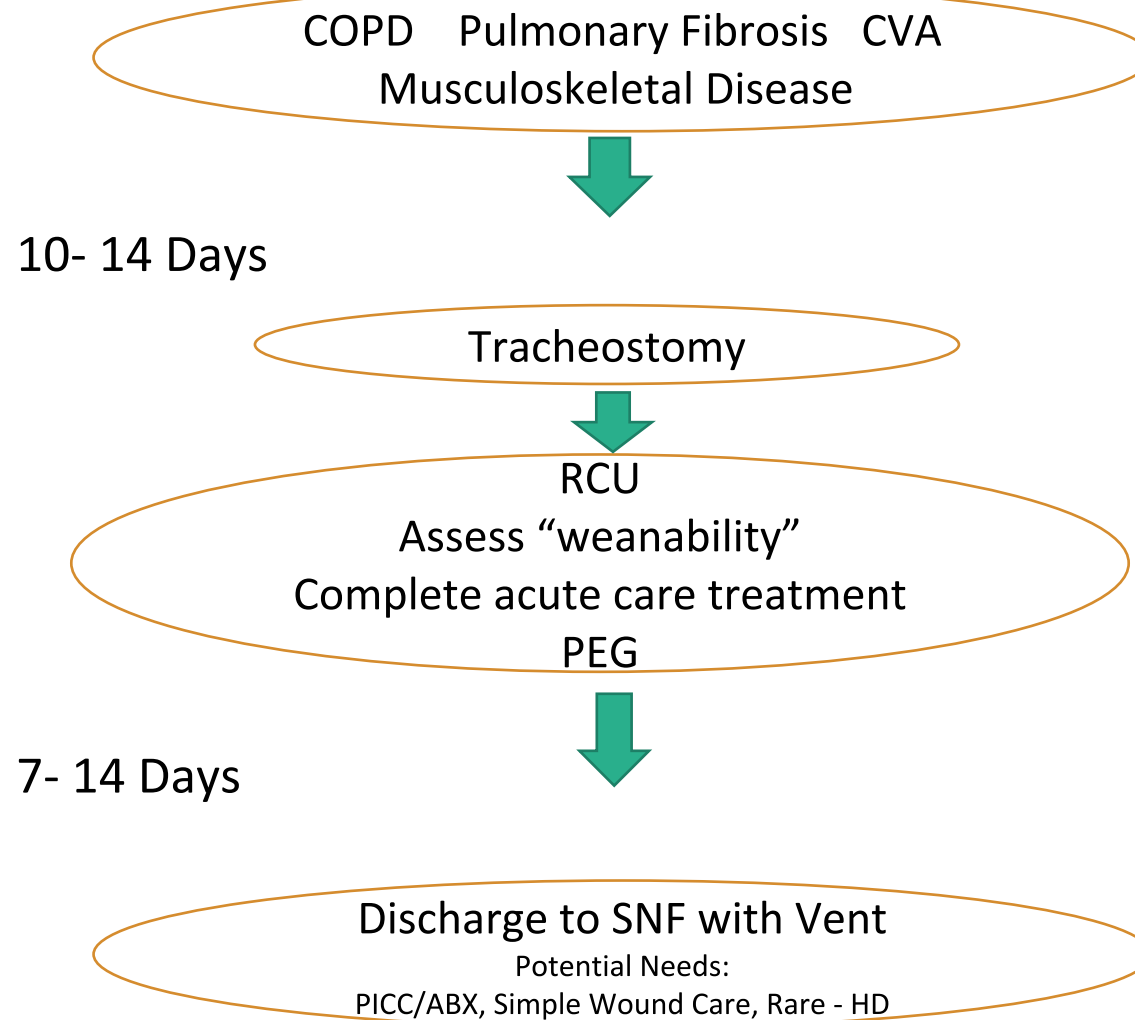
Assistant Professor of Medicine

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Goals

- Safely transfer ventilator-dependent trached patients to a facility with appropriate level of care for their complex needs
- Transfer patients in a timely manner, once they no longer require inpatient hospital care
- Create capacity in our hospitals to be ready for a potential second wave, particularly during the Fall viral season
- Protect patients currently residing in ventilator facilities from potential exposure to COVID

Previously “Typical” Patient



COVID PATIENT

- TRACHEOSTOMY – Consider Day 14-21, or longer...
 - Transfer to Negative Pressure RCU Room
 - Complexities: HD
 - Risk of Barotrauma
 - Hypercoagulable
 - Hospital Acquired infection – prolonged hospital course
 - Neurologic, Cardiac, Anticoagulation, Bleeding
 - Delays in PEG
 - Facility Requirements – negative COVID tests
- PROLONGED LOS IN RCU
CAN SNF with Vent meet the medical needs?
Only a handful SNF with vent and HD

OPTIONS

- In-Hospital Chronic Ventilator Units

- SNF with Ventilator Facility

- LTAC

? Designated units for POST COVID only patients?