

COVID-19 Cardiac Stakeholder Forum #1

MEETING SUMMARY NOTES

DATE: March 19, 2020 | 8:00-9:00 AM

DISCLAIMER: The information in this document represents a high-level summary to capture the discussion at the point of time of the meeting and is NOT general guidance.

GROUPS REPRESENTED: 114 people joined the call with representation from cardiac medical directors, program administrators, cardiac interventional cardiologists, cardiac members of CorHealth's Clinical Advisory Committee, Cardiac Leadership Council, CritiCall, Ontario Base Hospital – MAC, and the Ministry of Health.

HIGHLIGHTS

- Weekly forum is a good way to share what is happening at the local level
- Need for smaller groups that can work on solutions for the key areas discussed
- Discussion focused on:
 - Variation of approach for elective and non-emergent procedures
 - Need for guiding principles but ultimately, the decisions will be made with program priorities in mind
 - Hospitals geographically close should have similar approaches to support the public
 - Supporting documents being circulated (HHS approach, Memo from Peter Munk Cardiac Centre, ACC SKY)
 - Deferring elective cardiac surgery cases
 - Leverage common guiding principles
 - Keeping high-risk outpatients out of the hospital wherever possible
 - Electrophysiology
 - Primary prevention ICD was noted as needing guidance – great variations from site to site
 - Ablations are being shut down for the most part – needing guidance on symptomatic AFib
 - Supporting documents are also being circulated
 - Echocardiography

- Need guidelines for triaging outpatient cases
- PPE guidance required for TEE (due to the aerosolization potential)
- STEMI
 - Consideration for EMS services COVID-19 screening en route to the hospital so the lab knows how to prepare
 - Need updated EMS protocols because patients with shortness of breath are being brought in for STEMI but that may not be the case
 - Need to have a provincial approach to balance the safety of healthcare workers and patient outcomes
 - Need a consistent approach on how to treat unknown and confirmed positive cases needing intubation
- Document sharing required
 - CorHealth is working on a solution to centralize documents being circulated
 - Versioning and date/time indications will be important
 - Suggestion of a Cloud-based DropBox
- Comments made in the chat box that were not addressed:
 - Regarding cardiac rehab which apart from CR services also provides “early-warning” system for symptomatic pts & fact that likely 100+ pts on wait-lists at most centres so can CorHealth help q-back call with CR programs to discuss & share strategies:
 1. regarding non-medical virtual intake / virtual CR / virtual exit,
 2. strategies for centres that provide medical care during CR
 - Need for guidance about drip and ship STEMI patients - Is it appropriate for remote centre to give lytic and hold until lab available or next day and only send immediately if rescue, failed lytic
- Need for a regular meeting of this group
 - Submit questions/topics in advance

NEXT STEPS

- CorHealth reaching out to smaller groups to confirm next steps for:
 1. STEMI Guidelines
 - STEMI System of Care Stakeholder meeting TBD
 2. Electrophysiology Guidelines
 - Dr. Atul Verma leading EP meeting March 20th
 3. Echocardiography Approach
 - Dr. Anthony Sanfilippo and Dr. Howard Leong-Poi and March 20th
- CorHealth scheduling regular touchpoints for the COVID-19 Cardiac Stakeholder Forum – next one will be Thursday, March 26, 2020