

# US Medical Staff Unprotected from COVID-19

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*If large numbers of doctors, nurses, and other medical staff become ill from COVID-19, who'll be there to treat patients infected with the virus and all other medical conditions.*

A shortage of personal protective equipment (PPE) exists in US hospitals nationwide. Nor are there enough isolation rooms to prevent COVID-19 patients from spreading their disease to others.

According to the National Institute for Occupational Safety and Health (NIOSH), N95 respirator face masks provide at least 95% filtration effectiveness against non-oil based particles.

National Nurses United calls them “the minimum personal protective equipment necessary for health care workers to remain safe.”

Yet the CDC told US hospitals that doctors, nurses, and other medical staff don't need protection that N95 respirators provide when treating patients.

National Nurses United executive director Bonnie Castillo RN called this action “outrageous,” stressing:

“(I)t is imperative for Congress to act immediately to include” proper protective gear for medical staff in further COVID-19 related legislation.

“When nurses and doctors get sick from this virus, who is going to be left to take care of the public,” she asked?

“If they don't want the entire health care system to collapse, Congress must act immediately to protect the frontline healthcare providers.”

On Monday, Castillo expressed outrage over mistreatment of nurses by hospital administrators, saying:

They're being “disciplined for just trying to protect patients from COVID-19.”

They're enduring “interrogations, harassment, hostility, accusations of insubordination — even threats of termination (for) dar(ing) to question...backwards personal protective equipment (PPE) and infection control policies” of US hospital administrators.

Castillo slammed the American Hospital Association (AHA) for failing to mandate PPE for all

medical staff at a time of spreading COVID-19 outbreaks.

Hospital medical staff are on the front lines of dealing with this crisis. They above all others require maximum protection from infection.

On Sunday, Medicine Net.com reported that “upper management patrolled the halls at one hospital in California, telling staff they could be fired on the spot for wearing N95 masks brought from home.”

A nurse remaining anonymous for self-protection said one of her “biggest concerns is the nontransparent way management is addressing these issues,” adding:

“If we don’t start treating healthcare workers as adults, providing us with honest information, adequate protection, and supplies, I am terrified that this current situation will quickly escalate, not just with viral spread, but with staffing shortages through contagion and/or the ‘rats off a sinking ship’ scenario.”

Many medical professionals believe their safety is being jeopardized, clearly an untenable situation.

Facebook, Twitter, and other social media have countless numbers of accounts by medical professionals, explaining an unacceptable situation likely to worsen ahead without swift remedial action.

Dr. Ali Haider tweeted the following:

“I’m tired of hearing stories of docs and nurses getting reprimanded by the ‘suits’ for wearing a freakin surg mask when they are on the unit because it looks bad.’ ”

“Do you know how many HCP (health care providers) are admitted in the US? Are you on the wards? I say F that. Protect yourselves. #COVID19.”

In Chicago, a medical worker wearing a P100 mask from home was told by a hospital staff member that it’s not permitted in hallways because it “scare(s)” patients.

A Maryland ER physician was told he was “not setting a good example for other staff members” by wearing PPE gear.

“I’m angry just talking about this and almost want to disclose the hospital (but naming it) would be certain termination for me,” he said.

A nurse at an Oklahoma hospital was fired for wearing a surgical mask while inserting an IV line in a patient.

He removed the mask as ordered but after complaining to human resources, he was dismissed on the spot.

National Nurses United and the California Nurses Association said Kaiser Permanente staff

were told they'd be immediately fired for wearing their own N95 masks for protection.

Ascension Health in Michigan issued a memo to medical staff, saying:

“All associates and clinicians in care settings outside (designated ones) should not be using scarce PPE resources, such as standard surgical masks, N95 masks, gowns, goggles and face shields.”

Claiming this practice scares patients or other phony excuses is the last refuse of hospital administrators who fail to uphold the Hippocratic Oath of doing no harm.

The Phoenix New Times reported that Arizona-based Banner Health medical staff had masks pulled off their faces. They were reprimanded for wearing them and told only to use hospital supplied PPE as instructed.

A statement by the American Academy of Emergency Medicine said it supports ER doctors who are threatened or fired for wearing their own PPE, adding:

“(A)assistance (will be provided to) file an OSHA (Occupational Health and Safety Administration) complaint and pursuit of litigation for wrongful termination.”

The Boston Globe reported that city-based Partners HealthCare requires medical staff to wear protective face masks at all times on duty, an exception to the rule policy that should be standard practice in medical facilities everywhere, along with use of other PPE.

Yet shortages of everything needed to protect medical staff aren't being adequately addressed.

An unnamed Los Angeles ER physician said PPE is in short supply, including face masks, goggles, face shields, gloves, and disinfectant wipes.

“We're using diluted bleach and a spray can instead (that's) not as effective,” the unnamed doctor added.

Epidemiologist Saskia Popescu stressed that large-scale outbreaks in “New York (are) a warning for” all medical professionals.

Through Monday, the state has 66,497 of 164,610 US infections, including 1,218 of 3,165 deaths nationwide.

Weeks earlier, Bloomberg News reported that a “top coronavirus (intensive care) doctor in Wuhan, China” warned that “(p)atients with hypertension appear to be at a higher risk of dying from” COVID-19.

According to the American Heart Association, about 100 million Americans have high blood pressure, making them more vulnerable to contracting the virus if the above assessment is right.

Coalition for Epidemic Preparedness Innovations' Dr. Richard Hatchett said COVID-19 “is the

most frightening disease I've ever encountered in my career, and that includes Ebola... MERS (and) SARS."

"(I)t's frightening because of the combination of infectiousness and a lethality that appears to be manyfold higher than flu."

Clearly extra precautions are warranted for protection against contracting the disease.

Despite dire predictions by some experts, it's unknown to what extent and for how long outbreaks may occur and spread.

At all times it's far better to be safe than sorry, especially at times like now.

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