

U.S. hospitals brace for 'tremendous strain' from new virus

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This Friday, March 13, 2020 photo shows tents set up outside the Lexington Medical Center hospital in West Columbia, S.C. U.S. hospitals are setting up tents for testing, canceling elective surgeries, calling on retired doctors for help and confronting the possibility they will have to ration treatment as they prepare for an expected onslaught of coronavirus patients. (AP Photo/Sarah Blake Morgan)

U.S. hospitals are setting up circus-like triage tents, calling doctors out

of retirement, guarding their supplies of face masks and making plans to cancel elective surgery as they brace for an expected onslaught of coronavirus patients.

Depending on how bad the crisis gets, the sick could find themselves waiting on stretchers in emergency room hallways for hospital beds to open up, or could be required to share rooms with others infected. Some doctors fear hospitals could become so overwhelmed that they could be forced to ration [medical care](#).

"This is going to be a fairly tremendous strain on our [health system](#)," warned Dr. William Jaquis, president of the American College of Emergency Physicians.

The United States is still facing an active flu season, and many hospitals are already running at capacity caring for those patients. The [new virus](#) will only add to that burden, said Dr. Bruce Ribner an infectious-disease specialist at Emory University's medical school.

To keep suspected [coronavirus](#) patients from mingling with others in the ER, the Central Maine Medical Center in Lewiston, Maine, set up a tent in the parking lot where people with respiratory symptoms are diverted for testing. Lexington Medical Center in West Columbia, South Carolina, did the same outside its emergency room.

In Seattle, hit by the nation's biggest cluster of coronavirus deaths, most of them at a suburban nursing home, UW Medicine set up drive-thru testing in a hospital parking garage and has screened hundreds of staff members, faculty and trainees, with nurses reaching through car windows and using swabs to collect specimens from people's nostrils . Drive-thru testing is expected to be offered to patients as soon as Monday.

At Spectrum Health Gerber Memorial Hospital in Fremont, Michigan, Robert Davidson, an emergency medicine doctor, said hip and knee replacement surgery and other operations that aren't emergencies will be postponed if a coronavirus case is diagnosed in the area. Authorities in New York state and Illinois are talking about doing the same.

If an outbreak hits, "things that don't need to be done right now won't be done right now," said Dr. Raj Govindaiah, chief medical officer for Memorial Health System, which runs hospitals in Springfield, Lincoln, Decatur, Jacksonville and Taylorville, Illinois.

Govindaiah said the hospitals are also hiding the freebie surgical masks usually offered to visitors in the lobby, so that doctors and nurses can use them instead if supplies run tight. At Blue Ridge Regional Hospital in the small mountain community of Spruce Pine, North Carolina, respirator masks are locked and under video surveillance.

"We've really got to ... expect that this is going to be bad," said Blue Ridge Regional's Dr. Dr. Gabriel Cade. "The situation in Italy is a huge eye-opener."

In New York state, hit by the largest U.S. cluster of cases, the Health Department is accelerating regulations to get nursing students certified to work more quickly and is asking retired doctors and nurses to offer their services, Gov. Andrew Cuomo said.

This week, the American Hospital Association, American Medical Association and American Nurses Association asked for a presidential emergency declaration that would allow doctors and nurses to work across state lines and would waive certain rules to free up hospital beds. Similar declarations were issued during Hurricane Katrina and the swine flu outbreak.

President Donald Trump was expected to make that declaration Friday.

How bad U.S. hospitals will be hit is unclear, in part because bungling on the part of the government in ramping up widespread testing for the virus has left public health officials uncertain as to how many people are infected.

Officially, the number of those infected in the United States was put at around 1,300 Friday, with at least 41 deaths. Experts fear that when the problems with testing are resolved, a flood of patients will hit the nation's emergency rooms.

But that will also give health authorities a clearer picture of the outbreak, enabling them to allocate resources where they are needed.

"What's most important now is that we get the testing done," said Richard Pollack, president of the American Hospital Association.

In hard-hit Italy, doctors have been forced to make agonizing decisions about which critically ill patients receive care. Doctors fear that could happen in the United States, too.

"Studies predict that a moderate outbreak could result in 200,000 patients needing intensive care," said Dr. Leana Wen, an emergency medicine specialist at George Washington University. "The U.S. only has 100,000 intensive care beds, and most are already occupied. If tens of thousands become sick at once, people will simply not receive the care that they need."

That would affect not only coronavirus patients but also trauma victims and people suffering heart attacks or strokes, Wen said.

In Wuhan, China, where the outbreak originated in late December,

patients died because they couldn't access care. "We are at risk of that happening in the U.S., too," Wen said.

Seattle-area scientists are working to estimate how soon infections will overwhelm [hospital](#) beds there. Under the worst-case scenario, the number of active infections will exceed the number of beds by a large margin in the next two weeks, the Institute for Disease Modeling in Bellevue, Washington, said in a report this week.

For most people, the virus causes only mild or moderate symptoms, such as fever and cough. For some, especially older adults and people with existing health problems, it can cause more severe illness, including pneumonia. Most people recover from the virus in a matter of weeks, as has happened in mainland China.

Reacting to reports of dwindling supplies of respirator masks, the federal Centers for Disease Control and Prevention posted relaxed recommendations this week for protective gear and said looser-fitting surgical masks are OK for doctors and nurses to wear when treating patients who may be sick from the coronavirus.

In another change, the CDC said coronavirus patients can be cared for in single-patient rooms with the door closed and do not need to be placed in specialized airborne-infection isolation rooms.

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