

REPORT FROM NORTHWELL-LONG ISLAND JEWISH MEDICAL CENTER

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At Long Island Jewish Medical Center- Northwell Health we have implemented a two attending in-house, two attending remote model. Overall, we are trying to reduce the number of direct patient contact experiences and at this point are not directly seeing any COVID positive or PUI patients. The two attendings working remotely are following up their own patient panel, calling the teams, obtaining collateral, and trying to do as much as possible without asking the onsite members to see the patient. When clinically appropriate, the remote team will speak to the patient telephonically, and if possible may use ZOOM or a different video platform to see the patient. Under certain circumstances, the remote team may ask the onsite team to physically see the patient. Currently, the onsite team is taking all of the new consults. We are minimizing consults that are deemed to not be "urgent/emergent," and overall it appears that at least for this week, consult numbers have decreased. We continue working on setting up an efficient method for tele-video CL and as I get more details about how we are actually doing this, I will share. Our hope is that this model will both help preserve staff, decrease potential vector spread, and maximize PPE utilization for the hospital system.

With regard to our residents on service, our team has been in frequent talks with residency training leadership as well as our actual residents. We generally have two residents on at a time- each resident working with one attending. Now we are rotating the resident each week, one resident remote and one resident onsite. At this point in time, the remote resident is performing chart reviews, obtaining collateral, calling in recommendations and writing chart notes while staying in close contact with the primary CL attending of their patients. The resident that is onsite is working half days each day and is working closely (not physically closely) with the onsite attendings with regard to patient care. The resident is not seeing any COVID positive or PUI patients.

This plan is somewhat dynamic (as I imagine most of our plans are these days) and is subject to change.