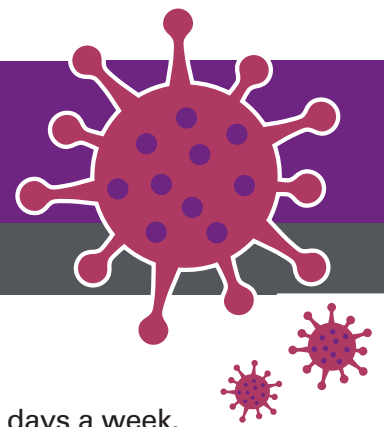


FREQUENTLY ASKED QUESTIONS FOR PROVIDERS

CORONAVIRUS DISEASE 2019 (COVID-19)



How has Trinity Health Of New England prepared for COVID-19?

- We have established a Regional Incident Command Center that is operational 7 days a week.
- We have asked all leaders to be available to support our colleagues as they continue to care for our communities.
- We are releasing, in Tiers, the departments and colleagues who will be encouraged to work from home.
- We are collaborating with local government and agencies to address colleague childcare needs.
- We are conducting free webinars for our colleagues and communities on what individuals need to know about COVID-19. Learn more or register at www.TrinityHealthOfNE.org/webinar.
- We are actively preparing for, and expecting to, reach medical surge capacity
- We will continue essential elective surgeries until nearing a surge capacity.
- We will be providing drive-up COVID-19 testing for individuals with a valid physician order and proper identification.

If I have questions, what resources are available?

We have established a COVID-19 hotline to help answer your questions and our patients' questions. The hotline is available from 8 am-8 pm, 7 days a week. The hotline number is 1-888-786-2790

If you need additional assistance, please contact your local hospital Chief Medical Officer or local MGPS Medical Director.

How is Trinity Health Of New England prepared for an influx of patients?

We are actively preparing for, and expecting to, reach medical surge capacity. We are continually assessing COVID-19 activity, as well as hospital capacity. The Trinity Health Of New England Incident Command Center is in regular communication with hospital administration and public health officials to address capacity issues.

What are the current visitor restrictions at Trinity Health Of New England Hospitals?

As a result of the evolving health concern of COVID-19, all Trinity Health Of New England hospitals have implemented new restrictions on visitation. These restrictions are in place for the protection of our patients and colleagues.

All hospitals will be closed to visitors, with the exception of compassionate visits, which are limited to one visitor per patient.

Compassionate visits include:

- Labor and Delivery
- Hospice Care
- Pediatric Care
- A companion for outpatient surgeries, procedures, and facilitation of care

We recognize that the care and support of loved ones is important. As caregivers, we will work with our patient's loved ones to ensure we are communicating with them as frequently as possible.

Continued ▶

FREQUENTLY ASKED QUESTIONS FOR PROVIDERS (continued)

Are essential elective surgeries still taking place as scheduled?

Essential elective surgeries and procedures should take place as scheduled. Given the uncertainty around the length of the COVID-19 pandemic and the impact on access to care afterwards, it is important that surgeries remain as scheduled, so we can continue to care for our patients. Additionally, below are some important facts to keep in mind when talking to your patients:

- The Operating Rooms are clean, controlled environments, that are terminally cleaned every day
- We are pre-screening surgical patients to ensure they are not experiencing symptoms of influenza or COVID-19
- To help with social distancing, we are removing chairs from the surgery waiting rooms
- As an exception to our visitor restrictions, surgical patients can bring a companion with them for their procedure

You should use your clinical judgment and the following list (as an example) should help guide your decision-making:

- Diagnostic or therapeutic procedures involving a diagnosis of cancer, other than non-melanoma skin cancer
- Procedures to treat intractable pain
- Procedures to treat active infection
- Procedures to treat impending or ongoing functional impairment or neurologic injury
- Procedures to prevent the risk of near-term future harm (e.g. carotid endarterectomy for symptomatic high-grade stenosis)

For the Cardiac/Vascular Cath Lab:

- Treatment of limb-threatening ischemia
- Procedures to treat unstable arrhythmias or prevent worsening congestive failure
- Procedures which cannot be safely put off for greater than a few weeks, such as device generator replacement

For Endoscopy:

- Urgent therapeutic and diagnostic procedures (e.g. treatment of choledocholithiasis, or investigation of iron-deficiency anemia)

For Interventional Radiology:

- Procedures necessary to initiate or continue necessary therapy for any of the diagnoses or clinical situations above (e.g., biopsy of a solid tumor, or stent or drain exchange)