

Spring 2020 Newsletter

The future of "elective" surgeries after COVID-19, health for the mind and body, to mask or not to mask, diabetic foot care during COVID-19.

As stay-at-home restrictions in some states are easing, and as non-emergency medical care is being reconsidered, how does one possibly triage the thousands upon thousands of patients whose surgeries were postponed? Instead of the term "elective," the University of Chicago's Department of Surgery chose the phrase "Medically-Necessary, Time Sensitive" (MeNTS).

This concept can be utilized to better assess the acuity and safety when determining which patients can get to the operating room in as high benefit/low risk manner as possible. And unlike in any recent time in

history, risks to healthcare staff as well as risks to the patient

from healthcare staff, are now thrown into the equation.

The <u>work</u> was published in the April issue of the *Journal* of the American College of Surgeons.

The authors of the study created an objective surgical risk scoring system, in order to help hospitals across this country, as well as others across the world, better identify appropriate timing regarding which surgeries can go ahead sooner rather than later, and why. They factored several variables into their equation, to account for the multiple potential barriers to care, including health and safety of hospital personnel. They created scoring systems based on **three** factors:

Disease:

- Is non-operative treatment available?
- Would the outcome of the illness be impacted with a 2-week delay?
- What about a 6-week delay?

Patient Issues:

- How old is the patient? (under 20 years is lowest risk; over 65 years is highest risk)
- Do they have breathing issues like lung disease or sleep apnea?
- Do they have heart disease?
- Are they diabetic?
- Do they have a weakened immune system?
- Do they have signs of an acute respiratory illness?
- Do they have known Covid-19 exposure in the past 2 weeks?

Procedure:

- How long is the surgery?
- Will the patient need an ICU bed after surgery?
- How much blood will be lost during surgery?
- How many surgeons and nurses are needed in the operating room?
- Will the patient need a ventilator during or after the surgery?
- Is the surgery in the abdomen (lower risk) or in the airway/lungs (higher risk)?

Each patient would receive an overall conglomerate score, based on all of these factors, with the lower risks giving them more favorable scores to proceed with surgery soon, and the higher risks giving patients a higher score, or higher risk regarding proceeding with surgery, meaning it may be safest, for now, to wait.

TO MASK OR NOT TO MASK

There's an important question on many people's minds right now when they contemplate going outside:

How do you run errands while staying safe from the virus?

The CDC recommends wearing a mask when outside, including when exercising.

Running may be the ultimate exercise during the COVID-19 crisis. It has a way of airing out one's mind and providing some of the perspective that's so easily lost during stressful times.

You can safely enjoy the benefits of open space, fresh air, and vitamin D from the sun.

Orthotics can be also tremendously helpful to runners with or without plantar fasciitis, and with or without the perfect running pattern by helping the foot and lower body stay in alignment, helping the plantar fascia absorb impact, and cushioning the foot while running on hard surfaces.

<u>Q&A</u>

Q. Can you safely reuse a non-cloth mask that you can't wash, like a disposable mask?

A. Yes, you can, says Dr. Joseph Vinetz, an infectious diseases professor at Yale School of Medicine. To disinfect masks that you can't wash, Vinetz recommends leaving them in a clean, safe place in your home

for a few days. After that, it should no longer be infectious, as this coronavirus is known to survive on hard surfaces for only up to three days.

You can reuse cloth masks, too. Just machine wash them between each use on a high-heat setting. Learn more about which masks you shouldn't buy and how you can make your own (without having to sew) here.

Q: How do I protect myself from contracting coronavirus in the health-care setting?

APMA recommends you prepare following the CDC advice:

Although you may not currently be experiencing COVID-19 exposure issues in your practice setting, now is the time to prepare for it. Start by familiarizing yourself with these infection control practices in the event you encounter someone with symptoms:

- Don N95 respirator masks
- Don full personal protective equipment (PPE), including protective eyewear
- Doff PPE responsibly as you would for exposure to any infectious disease
- After doffing equipment, decontaminate hands with an ETOH-based gel

Diabetic Foot Care during COVID-19

During the COVID-19 pandemic, diabetes patients may be wondering how to take care of diabetic foot wounds. Right now, it's important for people to prevent injuries and stay out of already-burdened emergency rooms and hospitals, which could increase their own risk of exposure to COVID-19.

Here are a few preventative measures for diabetic foot care:

1.Don't walk barefoot at home.
Gym shoes are better than house shoes or slippers to keep feet protected.

2. Check your feet every day.

What you're looking for is anything red, hot, swollen or painful. These are all signs of infection. If something is draining, that's also a sign that you have either an open sore or some type of blister. If you have problems with vision due to your diabetes, hold each foot up to a mirror, or have someone in your house look at your feet for you.

3. Put lotion on your feet daily.

Use lotion on your feet every single day but don't put any between the toes. Make sure to keep your feet nice and moisturized with lotion or Vaseline or whatever you have at home. It's OK put on lotion and then cotton socks. It helps the lotion absorb, and it prevents the dry skin and cracking you can get in the heels.

4. Wash your feet daily.

Make sure to shower and wash your feet every day, and then dry them well before putting on your socks and shoes. Good hygiene is extra important.

5. Move

It's very important, not just for your circulation and your diabetes, but for your mental health, to move, move, move. There are free videos online you can exercise with, from yoga to tai chi to stretching or cardio. Don't take on anything you've never done before, and start slowly. You can march in place while you're watching a half-hour TV show.

6. Try to keep your toenails cut

own toenails, get a black emery board and at least file them down a little bit. If you have a family member you trust, they can help. Don't use any sharp objects on your feet. If you have painful calluses, thick lesions on the bottom of your feet, or corns on your toes, do not take razor blades or knives to cut those. That's very dangerous.

If you're having a problem with longer nails, and you can't actually cut your

pumice stone with some lotion. When you can get to your doctor's office, they can take care of these things for

You're at risk for infection. All you can do on those is a

you.

7. Watch for red spots or bleeding under callouses.

If you notice any bleeding underneath the callouses on your feet, or if you see some red spots underneath, reach out to your doctor. All the podiatrists in the area use virtual visit tools like Telehealth, or you can take photos and email them to your doctor

8. Take extra care of active wounds.

Always call your doctor if you have an active wound, because those need to be taken very seriously.

9. Make sure your wound is not getting worse.

If your wound is getting worse, you'll notice increased draining, an odor, redness or warmth in the area. These are all signs that you need to contact your doctor right away.

If the wounds are on the bottom of the foot, you need to keep sitting with your feet up. However, you can stretch and do sitting exercises. You can write the letters of the alphabet with your feet. It is important to move. Just don't put any kind of pressure on those wounds, so they can heal. A lot of wounds will start building up some calluses around the area. You can put a little bit of lotion or Vaseline on those areas — just don't put it on the wound.

10. Control your blood sugar.

Your wounds won't heal if your blood sugar is not controlled. This is a good time, for many, many reasons, to keep your blood sugar controlled.

11. Don't hesitate to call your doctor.

If you're unsure about something, it's always better to call your doctor than to take things into your own hands. (512) 593-2949.

North Austin Foot and Ankle Institute during COVID-19

At this time, we are continuing to see patients with urgent and acute foot and ankle issues and follow up care while following all CDC recommendations to help prevent exposure and spread of the virus. Our goal remains to reduce the burden placed on Hospitals and Emergency Rooms by continuing to address foot and ankle issues that can be adequately dealt with in the outpatient setting.

- Our office continues to see patients who need time-sensitive urgent or acute foot and ankle care and follow up visits. This includes patients with acute injuries, fractures, traumas, ulcers/wounds, infections and patients with rapidly deteriorating symptoms. It also includes patients in early stages of post-operative care.
- Patients will be scheduled with enough time between appointments to limit the number of people in each facility at one time as well as increased cleaning and sanitation protocol for treatment rooms.
- We will continue to pre-screen patients, including measuring temperatures and questionnaires, before an appointment takes place.
- Patients will be limited to one individual guest and they must be necessary for assistance during the office visit. Guests that are nonessential for the office visit will be asked to wait outside of the North Austin Foot and Ankle Institute office.
- To prevent congregation within waiting rooms, patients will be asked to call the office upon arrival while continuing to wait in their vehicle.

• Patients will be called when it is their turn to come into the office and will be immediately taken to a treatment room.

In addition, if you have recently traveled to, or been in close contact with someone who has traveled to one of the high-risk areas as defined here; and have a fever, cough, or shortness of breath – please contact us to reschedule your upcoming appointment or surgery. If you believe you have been exposed to COVID-19, the CDC recommends you contact your primary health care provider.

Most importantly, please protect yourself by washing your hands frequently with soap and water, covering your mouth when coughing or sneezing, and avoiding close contact with anyone who has a fever or cough.

Please feel free to call our office with any questions you may have. (512) 593-2949