



Dear Colleagues,

The COVID-19 pandemic has truly brought out the best within our department. Throughout the past week, we have witnessed outstanding professionalism and many “random acts of kindness.” We thank our colleagues who are working in intensive care units (ICUs) and operating rooms and those who are being asked to help with intubations during the pandemic. Here are a few specific examples. Dr. Andrew Baker is helping with health service planning at the provincial level. Dr. Julian Wiegelmann worked post-call, long into the night post-call to develop a survey that will help locate anesthetic gas machines at out-of-hospital surgical sites. On the lighter side, Dr. Lisa Roberts took time away from her role as a leader of obstetrical anesthesia to offer up her “potpourri” of travel soaps for post-intubation showers. We applaud our site chiefs who are working very hard in trying circumstances. We have an amazing department. Thank you for caring for each other and our patients.

PPE and Airway Management

The Canadian Anesthesiologists’ Society hosted an excellent Town Hall Webinar on [PPE and airway management for COVID-19 patients](#). I encourage you to listen (or re-listen) to this webinar. Central themes included the need to conduct simulations for the proper use of PPE, the need for safety coaches or observers, and the importance of pre-planned protocols for airway management. [Learning points from the webinar](#) have been summarized by Dr. Jonathan Kong.

We need more ventilators

As the need for ICU ventilators increases, anesthetic gas machines may come into use. Anesthetic gas machines are not intended for long-term use as ICU ventilators. New guidelines have been produced by the ASA/APSF entitled, [“Guidance on Purposing Anesthesia Machines as ICU Ventilators”](#). These guidelines have been modified to create a version specific to the Canadian setting entitled, [“Canadian Guidance on Purposing Anesthetic Machines as ICU ventilators”](#) thanks to Dr. Richard Cooper and Mr. Elihu Henry. Strategies to protect anesthetic gas machines from contamination are available on the [Anesthesia Patient Safety Foundation website](#).

Health Canada has established a policy regarding the purposing anesthetic gas machines as ICU ventilators. The Health Canada document refers to [FDA guidelines](#) and is available as a reference for hospitals and physicians. [Notice: Importation or Sale of Ventilators- Use of FDA Guidance and Canadian requirements for Authorization under the Interim Order.](#)

At the more practical level, a working group has been set up to create a central registry of out-of-hospital anesthetic gas machines in Ontario. With remarkable cooperation from GE Healthcare, Draeger Medical Canada, and the CPSO, the MOHLTC is now developing this registry. The MOHLTC sent requests for Information about anesthetic gas machines in out-of-hospital surgical settings via the CPSO and the various dental and veterinary colleges. Thank you to the members of the working group: Drs. Robert Byrick, Richard Cooper, Brian Rittenberg and Julian Wiegmann and Mr. Elihu Henry and Mr. Philip Lau.

Innovation during the pandemic

A strategy to support multiple COVID-19 patients with a single ventilator is under development by Drs. Azad Mashari, Jay Han and Joe Fisher. A brief summary of the team effort can be viewed on our website by clicking [here](#).

To address longer-term issues, Dr. Haibo Zhang is now the principal investigator of a study that will develop molecular and cellular therapies targeted against COVID-19 using angiotensin-converting enzyme 2. Haibo's grant application scored first in a CIHR call for COVID-19 related proposals. He will receive \$1,000,000 over 2 years.

I also encourage you to consider participating in intubatecovid.org. The goal of this global registry is to track occupational exposures and health outcomes for anesthesia providers who perform airway management procedures for patients with COVID-19 illness. As explained on the website, the goal is to reduce the transmission of COVID-19 to anesthesia providers and other clinicians and to improve critical public health services. Beyond the current pandemic, we know that other viral illnesses will continue to arise in the future. This effort will help us to be better prepared to protect healthcare workers during these future pandemics. Wondering how to get started? You can join the registry by clicking here intubatecovid.org.

Finally, our [department website](#) remains a source of current information and protocols related to the pandemic thanks to Drs. Vincent Chan, Matteo Parotto, Laura Bosco and Naveed Jivraj.

Please stay informed, stay calm and stay safe.

Best wishes,

Bev

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