

## CPR & Emergency Cardiovascular Care

Video: COVID-19 Impact on an Italian ICU

Recording Date: May 1, 2020

Speakers: Becky Lehotzky, PhD; Simone Peruzzi, MD

Summary: Dr. Simone Peruzzi, a senior specialist in anesthesia and intensive care, shares local strategies used in ICU and pre-hospital settings in Central Italy to address challenges associated with the COVID-19 pandemic.

Potential learning objectives

- Review potential strategies for the management of increased number of patients requiring intensive care during the COVID-19 pandemic.
- Describe clinical management issues associated with the care of patients with suspected or confirmed COVID-19 in the ICU.
- Consider the importance of social distancing, but also the critical need for community members to seek emergency medical attention when needed.

Intro

Voice (pre-taped): Welcome! This video is brought to you by the American Heart Association's Emergency Cardiovascular Care team.

Interviewer: Hello and thank you for joining us. I'm Becky Lehotzky and I'm an Advisor for Science & Health Advancement in the Emergency Cardiovascular Care department of the American Heart Association. As COVID-19 began spreading around the world, Italy became an early epicenter of the pandemic. Today, Dr. Simone Peruzzi is joining me to share his experience on the frontlines. Dr. Peruzzi is a senior specialist in anesthesia and intensive care at Hospital San Giuseppe in Empoli, near Florence. He's also AHA Regional Faculty for ACLS, a PALS instructor and an ambulance volunteer. Dr. Peruzzi, thank you for being on the podcast.

### QUESTIONS:

- 1.) We've been watching the development of the COVID-19 pandemic in Italy. As the number of cases was increasing, how did you handle the surge of patients needing treatment in the ICU?
  - What were the main criteria you used for admitting patients to the ICU?
  - How was pre-hospital care affected? Did the criteria change for transporting patients to the hospital?
- 2.) As the numbers of cases grew, and some healthcare providers had to be quarantined due to exposure, how did this impact your workforce?
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# ECC Podcast/Video Series Script



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- What strategies were used to address staffing needs when this happened? (e.g., recruitment of retired physicians or providers from other specialties)
- 3.) How were hospital beds, ventilators, being managed?
  - Did space become an issue at your hospital and, if so, what did you do when you no longer had space to care for patients in the hospital?
- 4.) What clinical management issues have you observed related to airway and ventilator management for patients with respiratory failure due to coronavirus?
- 5.) Italy has seen decreasing numbers of COVID-19 cases and deaths. What changes have you observed in the ICU?
  - What changes have you observed in your work on the ambulance?
- 6.) Public health experts have warned that we may see additional spikes in COVID-19 cases until we reach herd immunity or a vaccine is developed. What steps are being taken in your unit to prepare for a possible second wave?
- 7.) Other emergencies, like heart attack and stroke, still happen. What would you say to community members who may delay treatment due to COVID-related concerns?
- 8.) Are there any actions or key takeaways you would like to leave with our audience?

Interviewer: Dr. Peruzzi, thank you again for taking the time to share your experience for the benefit of everyone listening.

Voice (pre-taped): Views expressed in this podcast do not necessarily reflect the official policy or position of the American Heart Association and American Stroke Association. For transcripts of this video and more information about the American Heart Association Guidelines on ECC and CPR visit [cpr.heart.org](http://cpr.heart.org)