Special Care for Special Populations

Family Survive & Thrive Guide™

Immunocompromised

Seniors

Our Children













Coronavirus Care
Community of Practice

Bystander Rescue Care CareUniversity Series

Welcome



Charles Denham, MD

Chairman, TMIT Global Founder Med Tac Bystander Rescue Care

Med Tac Bystander Rescue Care October 7, 2021

CareUniversity Webinar 169

MED TAC

Coronavirus Care
Community of Practice

Bystander Rescue Care CareUniversity Series

Our Purpose, Mission, and Values



Our Purpose:

We will measure our success by how we protect and enrich the lives of families...patients <u>AND</u> caregivers.



Our Mission:

To accelerate performance solutions that save lives, save money, and create value in the communities we serve and ventures we undertake.

CAREUNIVERSITY®

Our ICARE Values:

Integrity, Compassion, Accountability, Reliability, and Entrepreneurship.



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Disclosure Statement

The following panelists certify that unless otherwise noted below, each presenter provided full disclosure information; does not intend to discuss an unapproved/investigative use of a commercial product/device; and has no significant financial relationship(s) to disclose. If unapproved uses of products are discussed, presenters are expected to disclose this to participants. None of the participants have any relationship pharmaceutical or device companies discussed in their presentations. The funding of the program is from the Denham Family fund of TMIT Global, a 501c3 Medical Research Organization

- John Nance JD has nothing to disclose.
 Christopher Peabody MD has nothing to disclose.
 Gregory H. Botz, MD, FCCM, has nothing to disclose.
 William Adcox has nothing to disclose.
- Jennifer Dingman has nothing to disclose.
 Randy Styner has nothing to disclose.
 Heather Foster has nothing to disclose.
- · David Beshk has nothing to disclose.
- Paul Bhatia has nothing to disclose.
- · Charlie Denham III has nothing to disclose
- Pavita Singh has nothing to disclose.
 Gunita Singh has nothing to disclose.
- · David Grinsfelder has nothing to disclose

Charles Denham, MD, is the Chairman of TMIT Global; a former TMIT education grantee of CareFusion and AORN with co-production by Discovery Channel for Chasing Zero documentary and Toolbox including models; and an education grantee of GE with co-production by Discovery Channel for Surfing the Healthcare Tsunami documentary and Toolbox, including models. HCC is a former contractor for GE and CareFusion, and a former contractor with Siemens and Nanosonics, which produces a sterilization device, Trophon. HCC is a former contractor with Senior Care Centers. HCC is a former contractor for BoyPalmate, a producer of sanitation devices for multiple industries. He does not currently work with any pharmaceutical or device company. His current area of research is in threat management to institutions including conflict of interest, healthcare fraud, and continuing professional education and consumer education including bystander care. Dr. Denham is the developer and producer of CareUniversity™, the learning management system providing continuing education materials for TMIT Global.



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Voice of the Patient



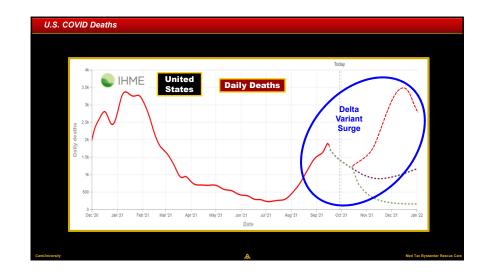
Jennifer Dingman

Founder, Persons United Limiting Substandard and Errors in Healthcare (PULSE), Colorado Division Co-founder, PULSE American Division **TMIT Patient Advocate Team Member** Pueblo, CO

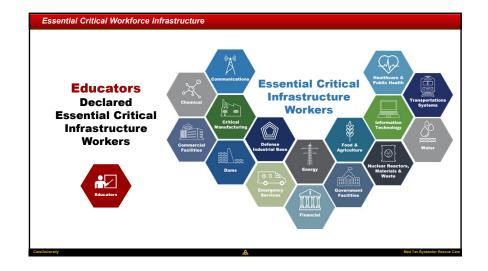


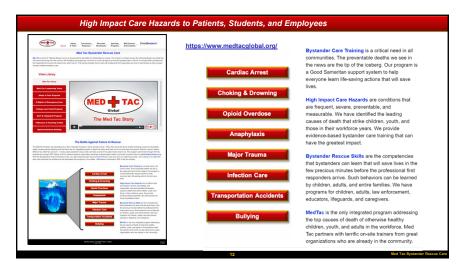




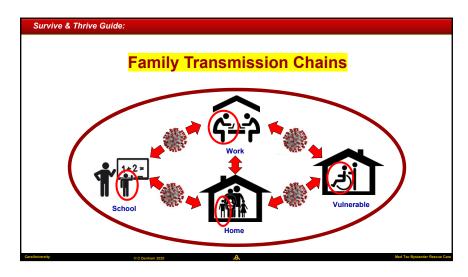


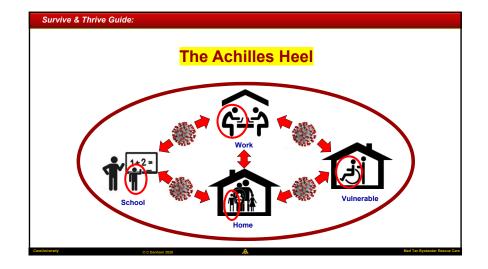


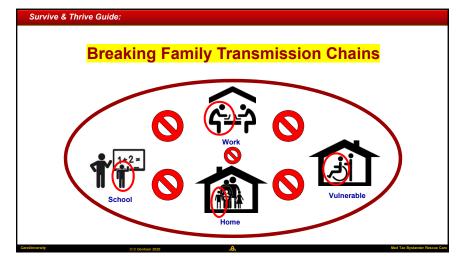


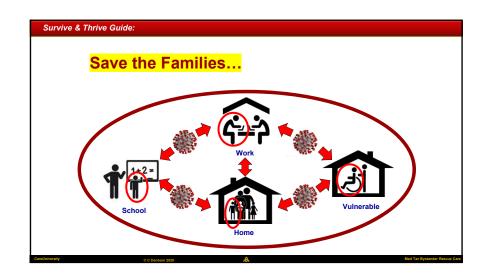






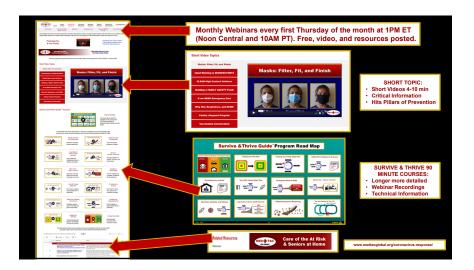




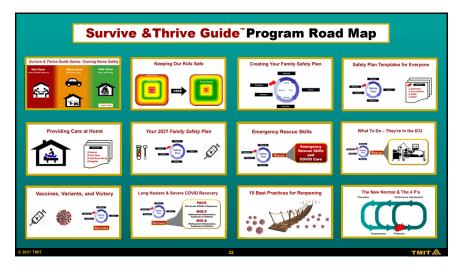




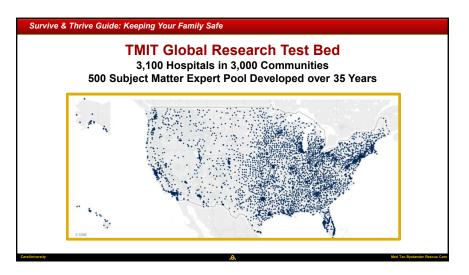








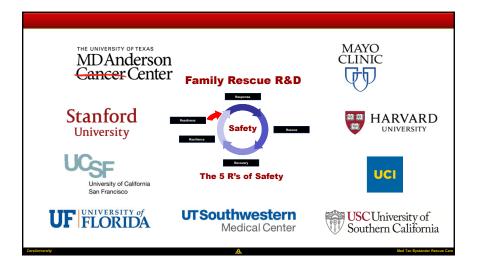




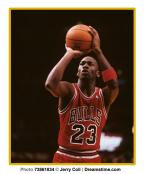








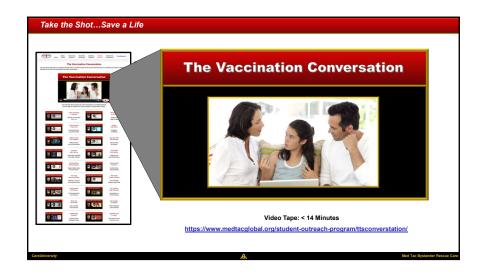
Take the Shot - Save a Life.



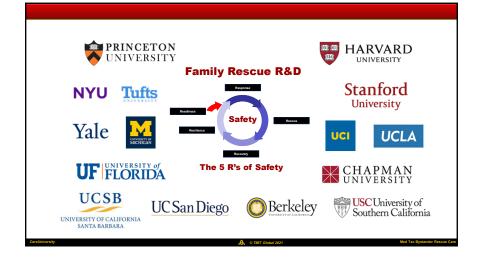
The Vaccination Conversation

- Why Vaccinate?
- Why You?
- Why Now?

MIT Global 2021 Med Tac Bystando

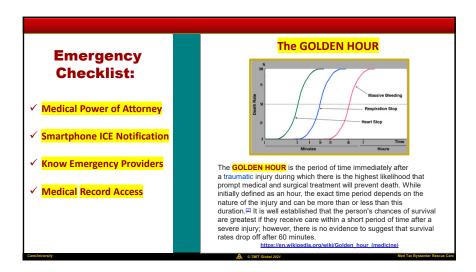














Dealing with Delta



After Her Son's Death, Mom's Mission Is To Prepare College Kids For

Emergencies "Corey Hausman was just 15 days into his freshman year of college when he was in a skateboarding accident on campus that left him with a severe head injury.

Corey was speaking after the fall and a teacher's assistant called 911, but he later went into a

"We got a call that our son was 2,000 miles away from home in a hospital," said Nanette Hausman, Corey's mother.

"We didn't know who was taking care of him. We didn't know anything that had happened. Then, we got a call from a doctor suggesting that we let

Source: www.today.com/parents/what-do-emerg.himogo-because2there was no chance for a



Go to https://college911.net/

If your son/daughter needs Emergency Care (911) on-campus, what happens? How about off-campus? Please find out & consider:

How will be notified?
Which hospital will they likely be taken to? Does this hospital warva Level 1 Trauma Center? When does transport to this highest level of care occur?
What medical rights to have once they turn 18?
Dol have easy access to my sondaughters medical release (eIR)A4 and/or Mathicane Power of Altmey (HoPCA) froms needed to allow me to share ther medical information & make medical decisions of they are not allow 15.

College911.net™ Medical Emergency Checklist

- HIPAA can allows access to your Medical/Mental Health records.
 HCPOA (Healthcare Power of Altorney) allows assigned guardians to make your Healthcare decision if you are not able to.
 Add & keep current emergency contacts (EC's) in college portal.
- ☐ ID. Insurance Card. Medical & Medic Alert Card including EC's. Set-up your smartphone Health APP - research your models instructions.
- ☐ Update Medical ID & allow emergency access (without a code)
 ☐ Add emergency contacts they are automatically contacted with your location if emergency assistance is called from your phone

medical occasions it mely are not alone land.

Asking for committee/parents contact information.

Visiting the campus medical center & read reviews online.

Who to call on campus in case an emergency happens at he
and my son/daughter can't be reached?

Are rails supplied for foll/futur bede? How to find out?

https://linearistTheDanget.org has done the research. If a **friend** needs urgent care, call for assistance from **their** phone

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The ICE Checklist: In Case of Emergency The Clinical Perspective



Gregory H. Botz, MD, FCCM

Professor of Anesthesiology and Critical Care UT MD Anderson Cancer Center, Houston, TX Adjunct Clinical Professor, Department of Anesthesiology Stanford University School of Medicine, Stanford, CA



Heather Foster RN BSN

Frontline Nurse Infection Prevention Advisor Patient Safety Advocate Dolores Colorado



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Be Your Family Lifeguard The Family Huddle Checklist



Charles R. Denham III

High School Student Co-founder Med Tac Bystander Rescue Care Program Co-lead Lifeguard Surf Program Junior Med Tac Instructor Certified Lifeguard



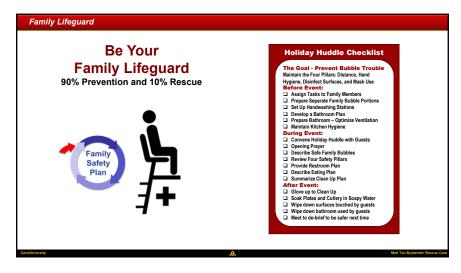
David Beshk

Award Winning Educator Med Tac Master Instructor Eagle Scout Advisor Merit Badge Counselor

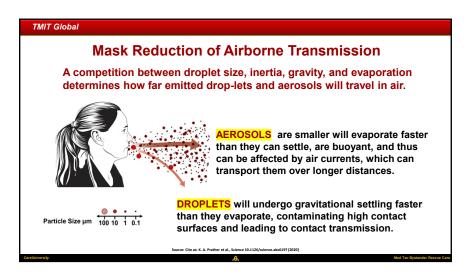




















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Essential Workers Toolbox A Survive & Thrive Guide™





Med Tac Master Instructor Award Winning Educator Lower School Science Teacher



Med Tac Bystander Resc





Bystander Rescue Care CareUniversity Series

Break the ICE Barrier : The In Case of Emergency Checklist

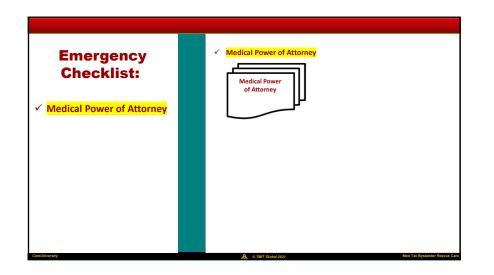


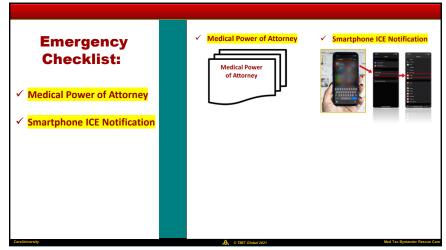
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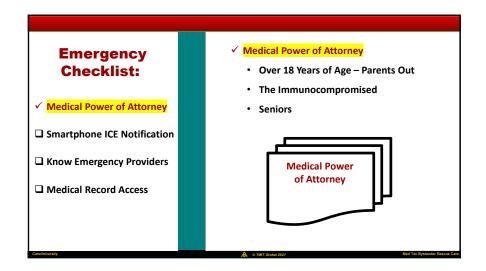
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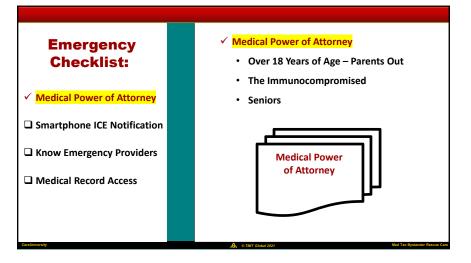




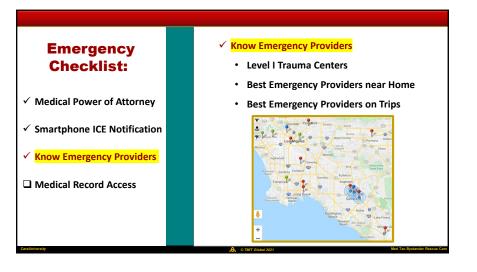


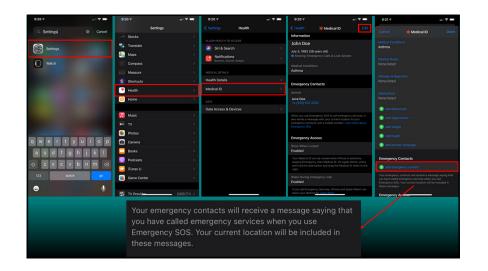




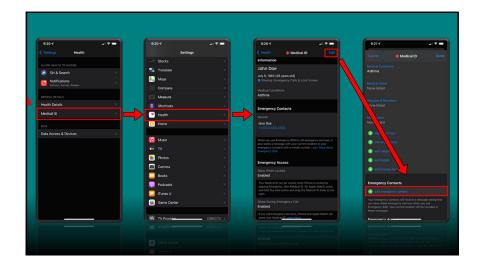


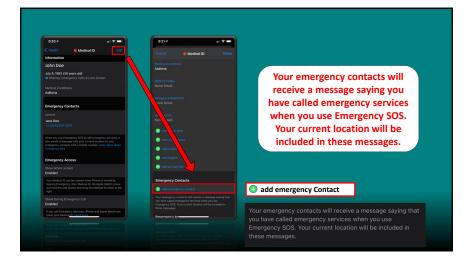


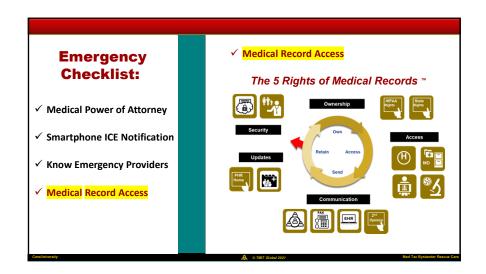


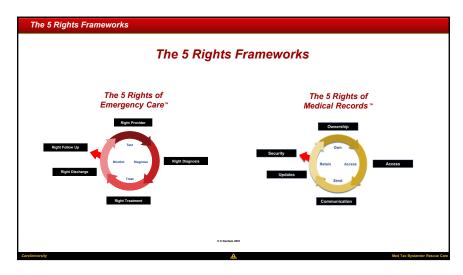


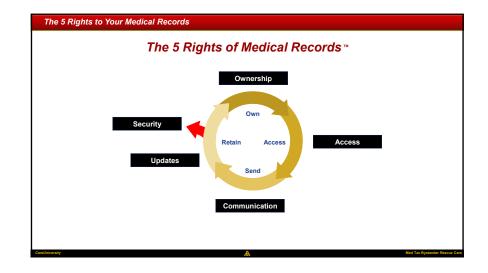




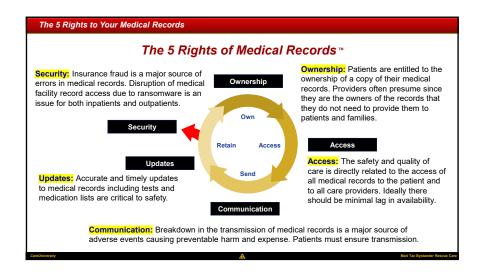


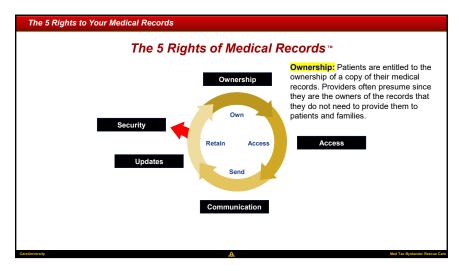


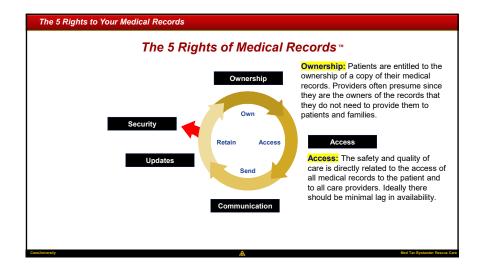


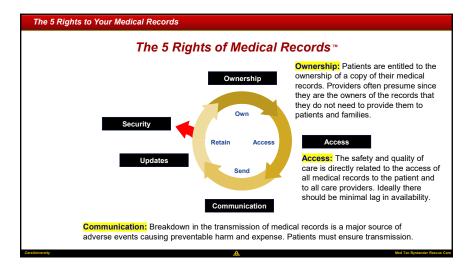


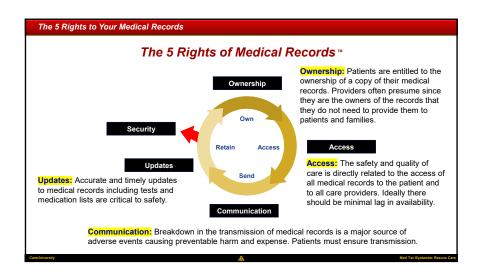


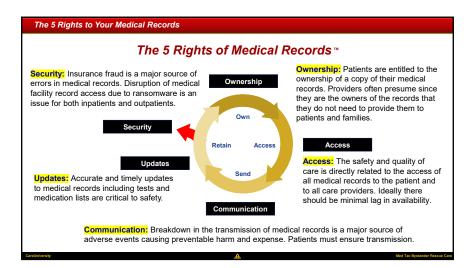




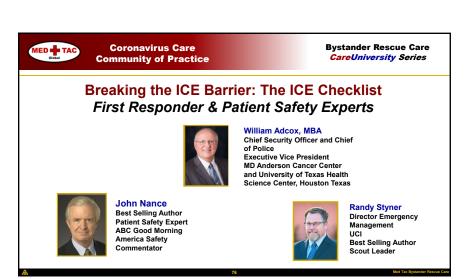














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Breaking the ICE Barrier: The ICE Checklist Young Adult and Student Outreach



Pavita Singh MPH Executive Director of Girls Health Ed International Best Selling Author



Paul Bhatia, EMT Pre-med Student President EMT Association at University of California Irvine Med Tac Instructor



David Grinsfelder Business Affairs Amazon Media Med Tac Student Outreach Team

Med Tac Bystander Rescue Car



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The Immuno-compromised, Seniors, and Children A Survive & Thrive Guide™

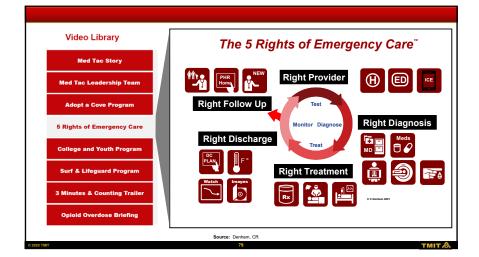


Christopher Peabody, MD, MPH

Associate Professor, Emergency Medicine Director Innovation Center University of California, San Francisco UCSF



Med Tac Bystander Rescue



High Vulnerability

- 1. Immunocompromised
- 2. Seniors
- 3. Children

1. Immunocompromised

Who is Moderately to Severely Immunocompromised?

Currently, CDC is recommending that moderately to severely immunocompromised people receive an additional dose. This includes people who have:

- Active treatment for solid tumor and hematologic malignancies
- · Receipt of solid-organ transplant and taking immunosuppressive therapy
- Receipt of CAR-T-cell or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy)
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids (i.e., >20mg prednisone or
 equivalent per day), alkylating agents, antimetabolites, transplant-related
 immunosuppressive drugs, cancer chemotherapeutic agents classified as
 severely immunosuppressive, tumor-necrosis (TNF) blockers, and other biologic
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CDC Identified Immunocompromised Patients

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Med Tac Bystander Rescue Can

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High **Vulnerability**

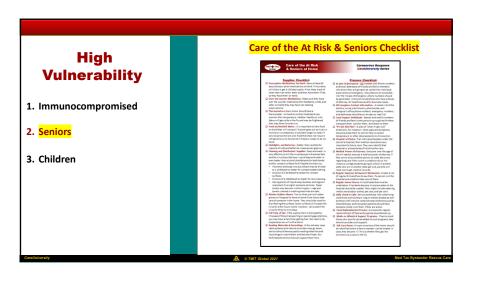
- 1. Immunocompromised
- 2. Seniors
- 3. Children

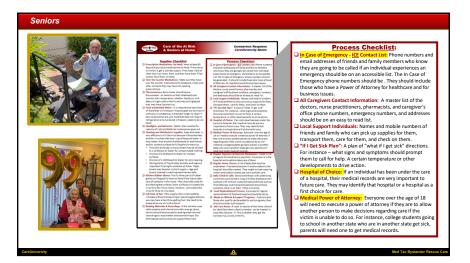
2. Seniors

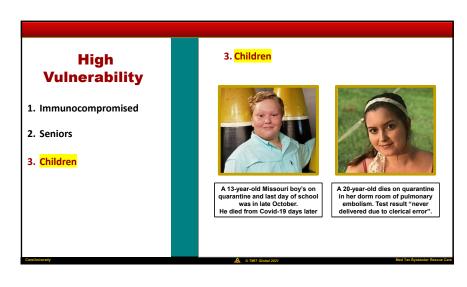




Seniors are at greater risk with reduced immune response AND are more likely to have comorbidities increasing risk.

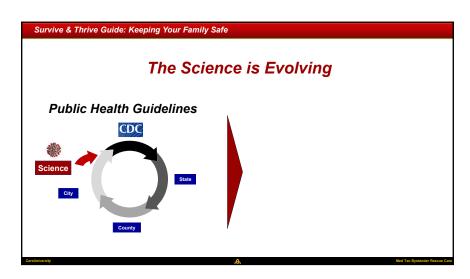


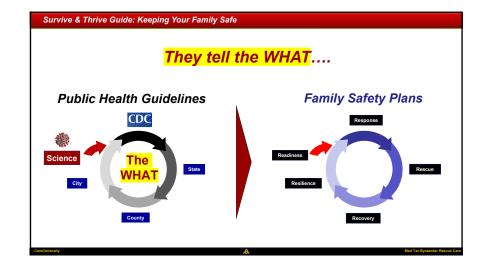


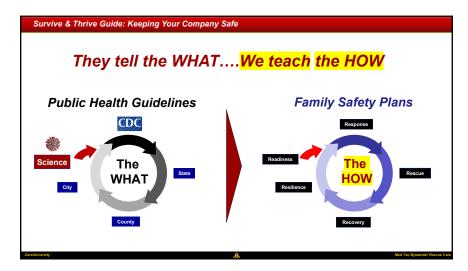


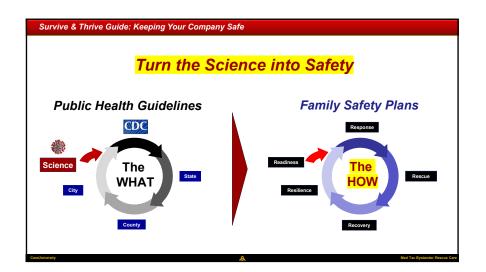


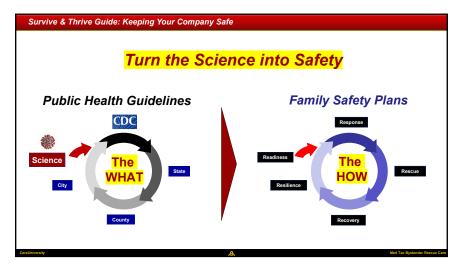




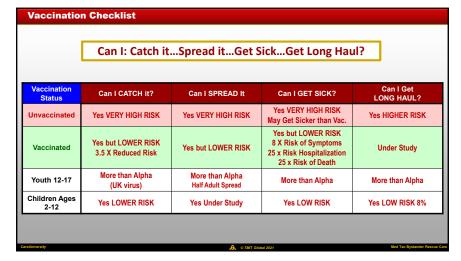


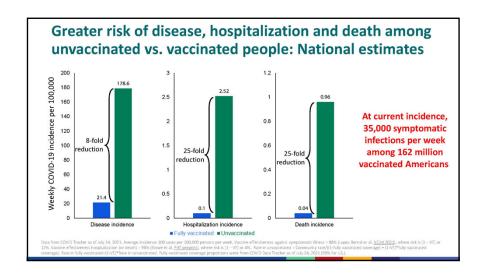


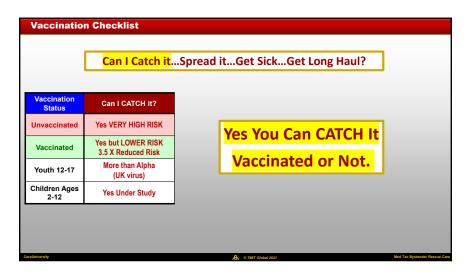


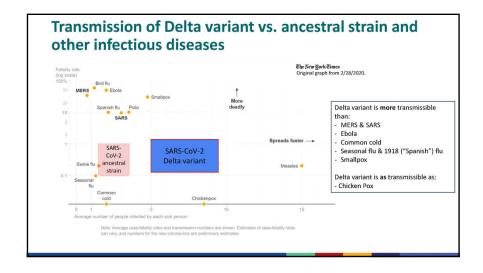


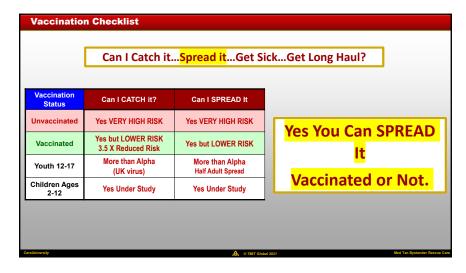


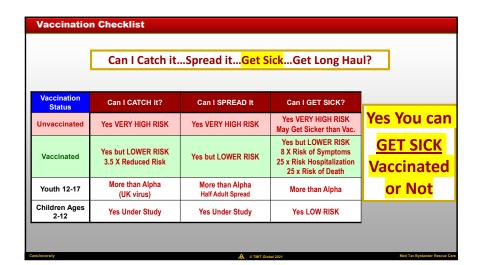


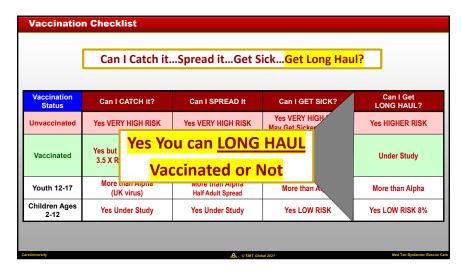




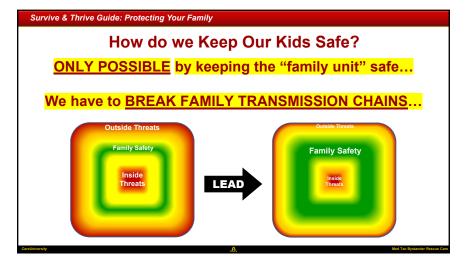


























Fight the Good Fight

Finish the Race

Keep the Faith

Additional Resources

Keeping Our Kids Safe: Steps 1-4

Keeping Our Kids Safe...by **Keeping the Unit Family Safe**



- Identify threats due to age, underlying conditions, and outside threats related to region and living conditions.





Reduce Family Vulnerability







STEP 2: Identify and Follow Local Coronvirus Threats

- · Local Community infection factors, trends, and public health guidelines will drive your behaviors and plans.
- Understand the public health processes in place where the family members will work, learn, play, and pray.

STEP 3: Develop a Family Safety Plan

· A leader or leaders of the family act as the CFO - Chief Family Officer who drives the plan: Readiness. Response, Rescue, Recovery, and Resilience.

STEP 4: Plan the Flight and Fly the Plan

The novel Coronavirus virus science, threats, vulnerabilities, and therefore the family risk changes continuously. Every airplane flight plan is modified along the route - so will your family safety plan.

Survive & Thrive Guide: Protecting Your Family

STEP 1: Identify Each Family Member Threat Profile

Understanding the Threats, Vulnerability, and Risk of Harm to our Children







Family Unit Threat Profile:

- · Threats, Vulnerability, and Risk from the outside environment for each individual family member for being infected, harmed, and death.
- Threats, Vulnerability, and Risk of current behaviors.

side Threats to Family – Home and Conditions

- Threats, Vulnerability, and Risk for each family member unique to them for being infected, harmed, and death.
- Threats, Vulnerability, and Risk of current behaviors within the home and living spaces.

Survive & Thrive Guide: Protecting Your Family

STEP 1: Identify Each Family Member Threat Profile















Under 2 Years

2 to 10 Years

10 to 30 Years

30 to 50 Years 50 to 65 Years

Have been found to have certain higher risks for severe COVID illness due to pregnancy - an "inside risk" (CDC)

· Watch evolving science in this area for "inside risks".

- May have more virus in their nasopharynx than adults.
- Half as likely to get infected as over 10 years old. A rise in infection rate seen with school attendance.
- May develop MIS-C Multisystem Inflammatory Syndrome in Children. <21 years old, lab evidence of inflammation, >2 organ involvement. SEE CDC Case Description on CDC website.

- Fastest growing infection group more than 50% Super Spreaders due to social interaction
- Over 30% of COVID positive Big 10 players have cardiac inflammation on cardiac MRI. SEE Evolving CNN Reports

Rapidly growing group of infections in later surge stage. Underlying conditions including obesity a factor.

Have higher incidence in underlying conditions putting them at higher risk for infections and harm.

Age is a risk factor independent of underlying conditions and have them. Highest death rate.

Survive & Thrive Guide: Protecting Your Family STEP 2: Identify and Follow Local Coronvirus Threats High Background Community Infection Inside versus or trending with more infections. · Schools without proper Test, Trace, **Outside Threats** Treat, Isolate, and Quarantine Programs. · Group Activities and Sports without Proper Prevention - Social Distancing etc. Outside Threats Family Safety Inside Threats

OutsideThreats:

- Lack of Mask Use by all exposed to family Community without adequate public health services including Test, Trace,
- Treat, Isolate, and Quarantine Programs. Critical Essential Infrastructure Worker
- Exposure bringing virus home to family.

Inside Threats:

- · Delayed Emergency Medical Care for of Children due to fear.
- · Delayed Vaccines for Children due to fear.
- Depression in Children isolated at home.
- Threats to Immune Compromised Children.
- Inadequate Nutrition of Children.
- · Lack of Exercise of Children and Adults.
- · Adults with underlying at-risk illnesses.
- · Seniors over 65 years of age at risk due to age.
- Delayed Emergency Medical Care for Adults due to Fear.
- Delayed or absent Screening for Adults and Seniors.
- Delayed Elective Medical Procedures for adults.
- · Inadequate Disinfection of Hi Contact Surfaces.

Survive & Thrive Guide: Protecting Your Family STEP 3: Develop a Family Safety Plan nerability to OutsideThreats: Adjust behaviors depending on Assure Mask Use by all exposed to family **Background Community Infection and** Monitor public health services including Reduce local infection trends. Test, Trace, Treat, Isolate, and Quarantine Base school decisions n Test, Trace, Programs and adjust behavior to it. Vulnerability Treat, Isolate, and Quarantine Programs. Assure Critical Essential Infrastructure Avoid Group Activities and Sports Workers reduce bringing virus home. without Proper Social Distancing. Reduce Vulnerability to OutsideThreats: Produce a Medical Care Emergency Plan for the Children and Adults (5 Rights of Emergency Care). **Family Safety** Safely see Pediatricians to maintain Vaccines Combat depression in Children with activities Protect Immune Compromised Children . Protect Adults with underlying at-risk illnesses. Protect Seniors over 65 years of age. Safely Pursue Regular Screening for Adults. Weigh Risks for Elective Medical Procedures. Assure Nutrition for children and adults in isolation. Pursue Regular Exercise during isolation/quarantine. Inadequate Disinfection of Hi Contact Surfaces.

Survive & Thrive Guide: Protecting Your Family Family Health Safety Plan STEP 3: Develop a Family Safety Plan · A leader or leaders of the family act as the CFO - Chief Family Officer who drives the plan: Resilience Readiness, Response, Rescue, Recovery, and Resilience. STEP 4: Plan the Flight and Fly the Plan The novel Coronavirus virus science, threats, vulnerabilities, and therefore the family risk changes continuously. Every airplane flight plan is modified LEAD along the route - so will your family safety plan.

