COVID-19 will generate large numbers of critically ill patients with pulmonary failure. To prepare for the expected surge in ICU patients, tertiary facilities in Michigan have been gathering lessons learned and best practices from intensivists in other locations (China, Italy, Seattle, New York) that have cared for large numbers of COVID patients.

As the number of critically ill COVID patients in Michigan surges, normal channels for transferring patients to Michigan’s tertiary facilities for escalated critical care will be overwhelmed. Physicians, nurses, respiratory therapists and other care providers at many hospitals will have to care for much sicker patients than they are used to. The resilience of Michigan’s hospitals (and especially the ICUs that will be the clinical care bottleneck) will be enhanced by improved education, coordination and communication.

Objective: Link ICUs and providers throughout Michigan in a virtual collaborative network to facilitate

- Personnel preparedness (SME-vetted educational and reference materials)
- Clinical situational awareness (local, regional, state)
- Compliance with best practices (workforce protection, latest clinical protocols)
- Coordination of care (transfer for higher level of care, advanced ICU support)
- Professional support and communication
- Optimal patient outcome

Necessary Steps:

1) Identify Michigan ICU personnel
   - ICU Medical Directors
   - ICU Nursing Supervisors/Directors
   - ICU Respiratory Therapists
2) Link ICU personnel electronically
3) Create Web-based platform accessible to all members to facilitate communication and dissemination of educational and clinical care materials. (e.g. www.MichiganBurn.org)

Michigan Medicine will function as the Coordinating Center for this state-wide collaborative of medical centers and the Bureau of EMS, Trauma & Preparedness (BETP) at MDHHS

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