

Bill has Covid-19...



"This graphic novel highlights best practices for when supporting someone who has COVID-19. In addition to regularly contacting Public Health and the doctor of the person supported, each staff reading the novel should follow their own agency's specific policies and guidelines. This graphic novel includes a lot of typical medical advice for COVID-19 – but does not replace getting specific medical advice for the person being supported. This graphic novel is the second in the series, following "Bill Has Symptoms..." It is based on the 'COVID-19 Health Monitoring & Supportive Care in Home and/or Developmental Services Residential Care Settings' created by the SPPI Outbreak Management Working Group.

Bill gets diagnosed



Michelle learns that Bill's COVID-19 test is positive. She shares this news with Bill's physician. Michelle contacts Public Health or ensures public health is notified.



With Bill being positive, everyone in the house will comply with the guidelines outlined by Public Health, such as heightened cleaning efforts and wearing full PPE when within 6 feet of anyone probable or positive.

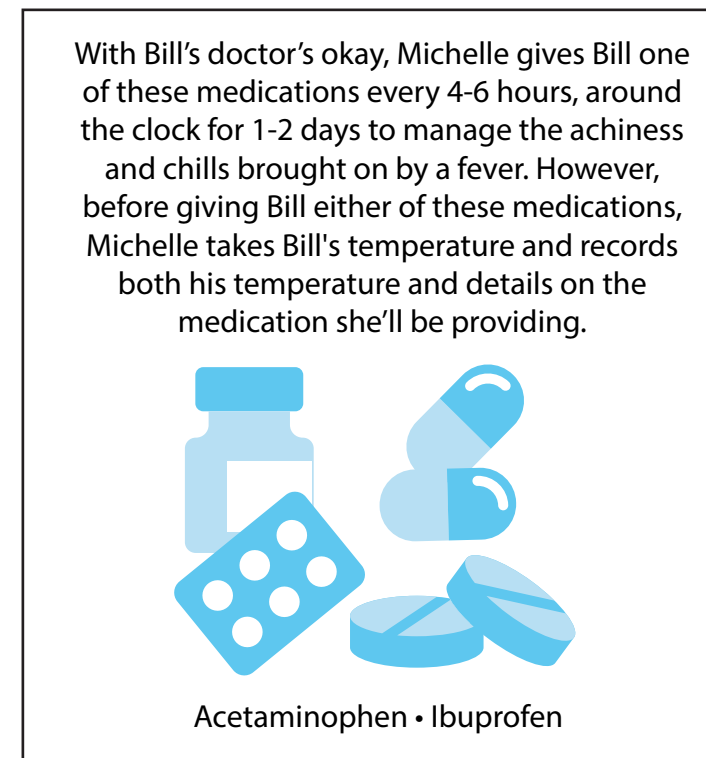
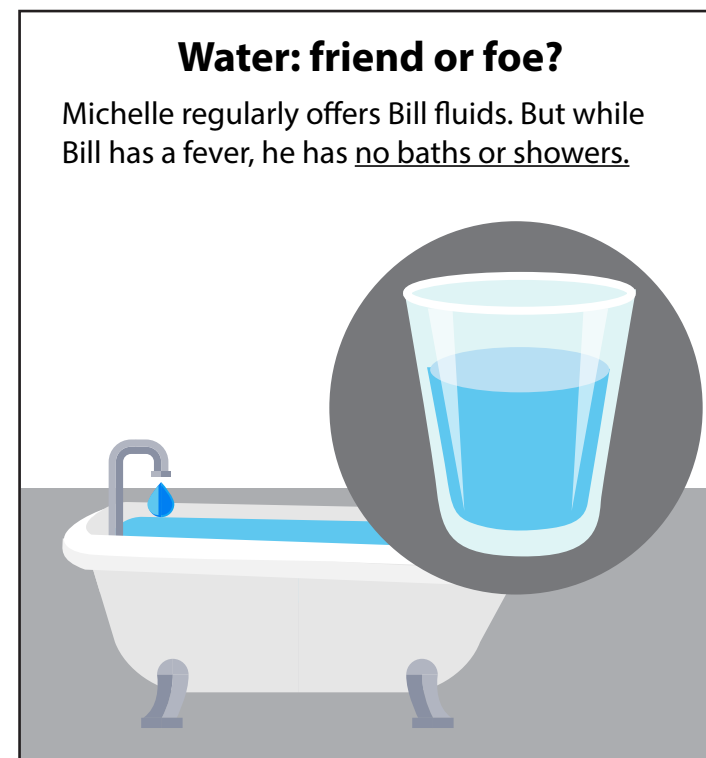
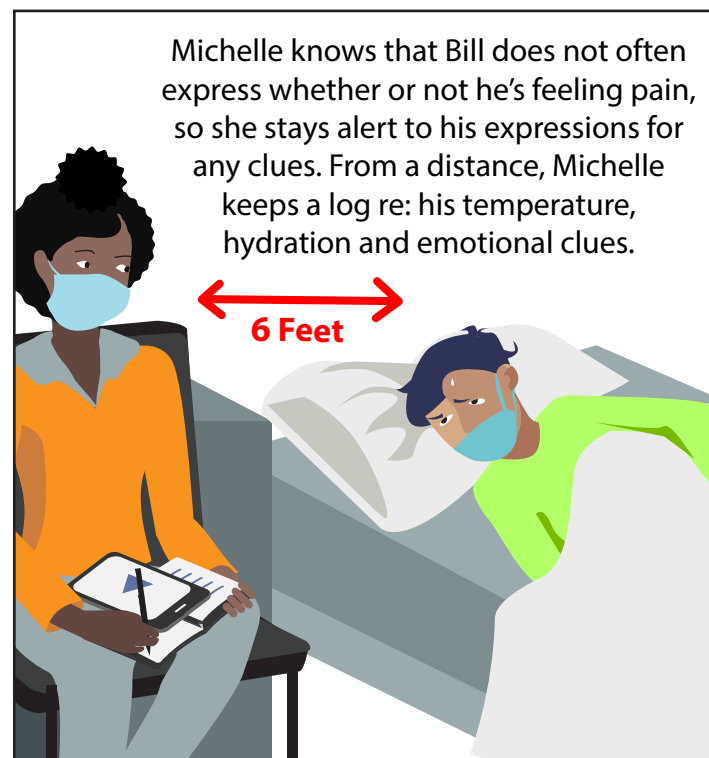
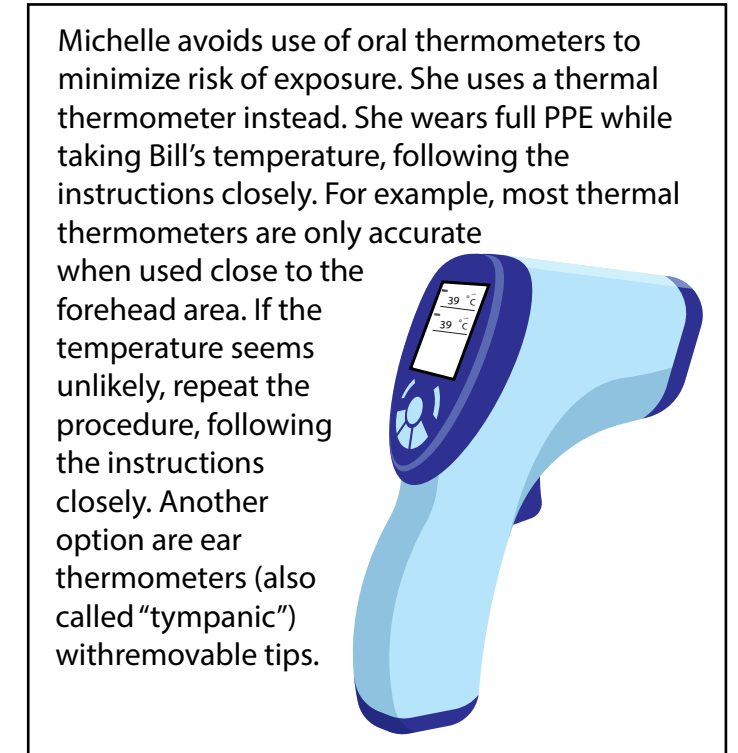
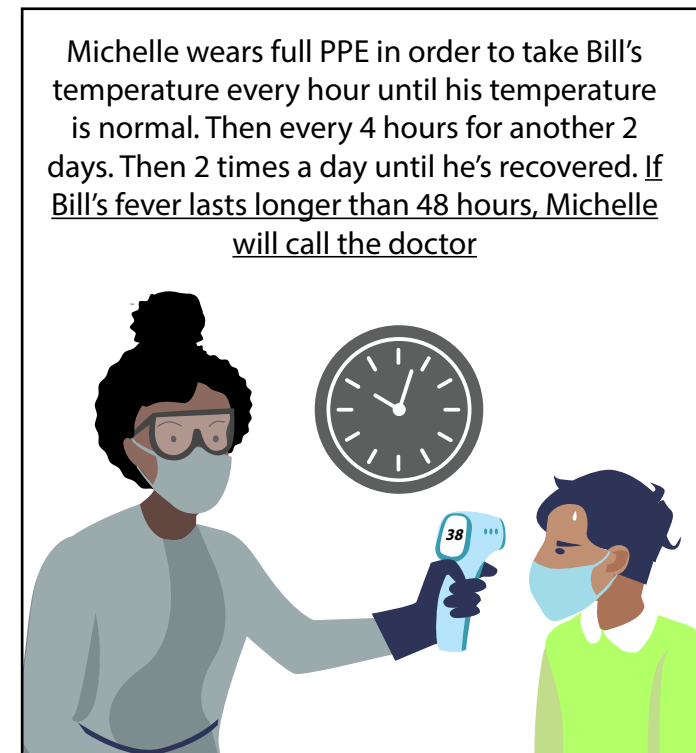
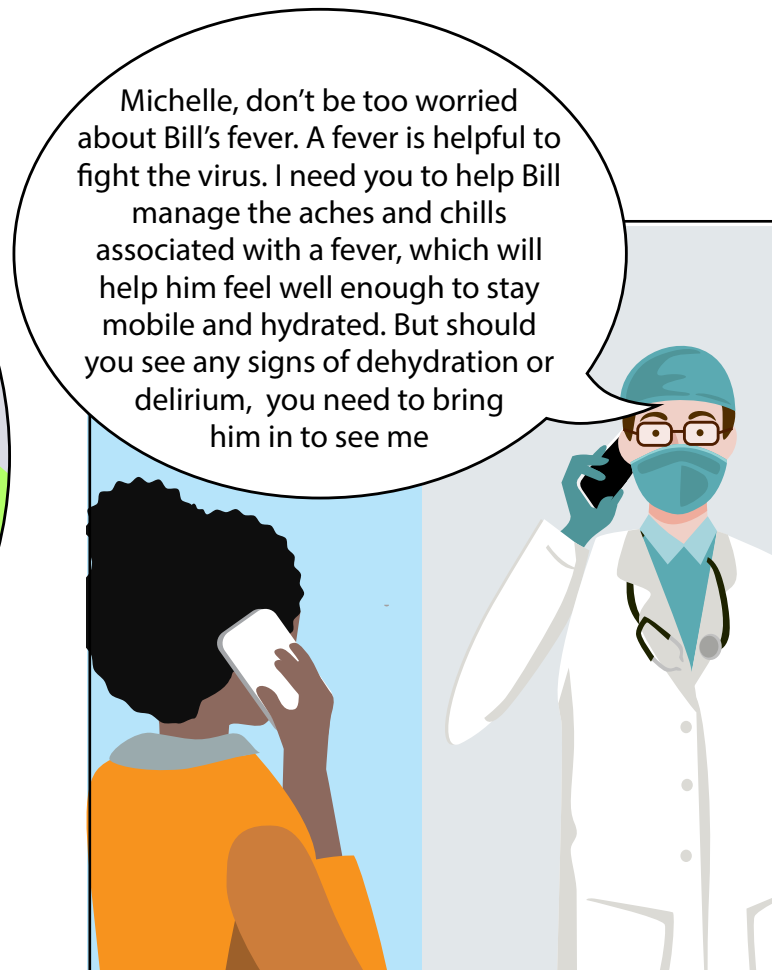
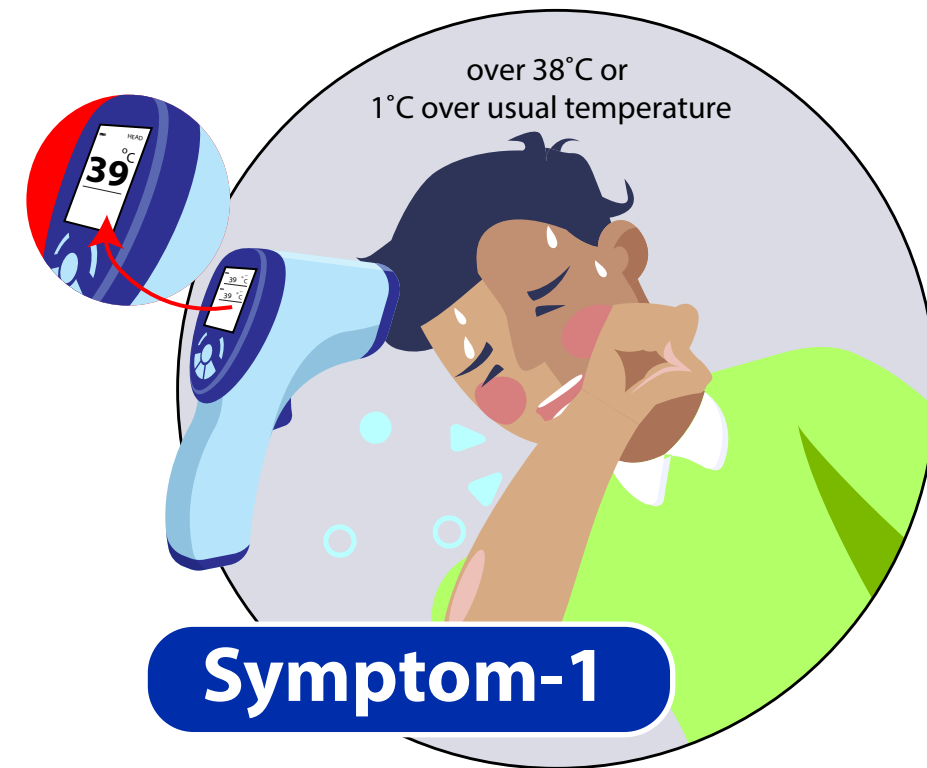


Michelle will be in regular contact with a public health investigator. Michelle will follow the public health guidance on "COVID-19 case management and contact tracing" to monitor Bill's case, complete the case tracking requested (tracking all of Bill's contacts over the past 14days), and to learn of any updates from Public Health.

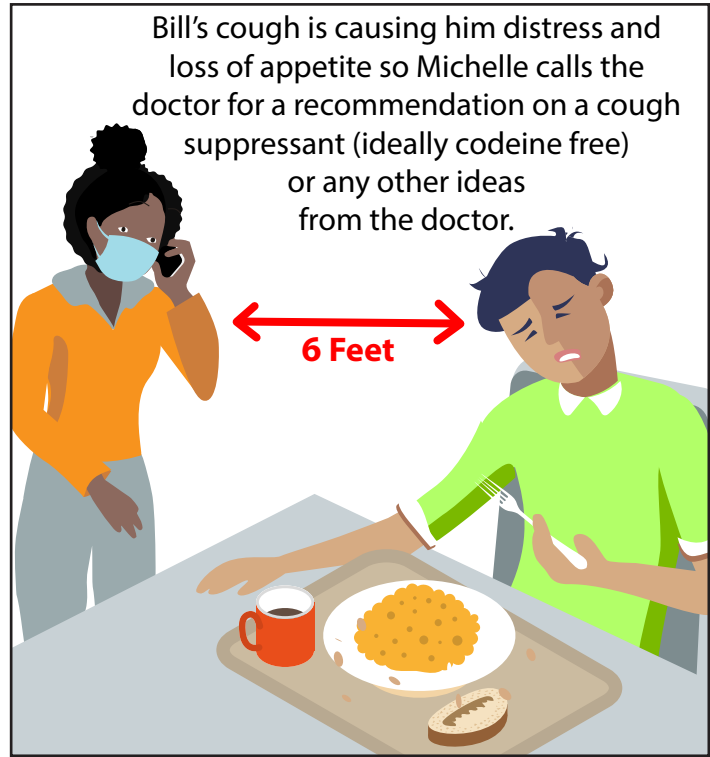
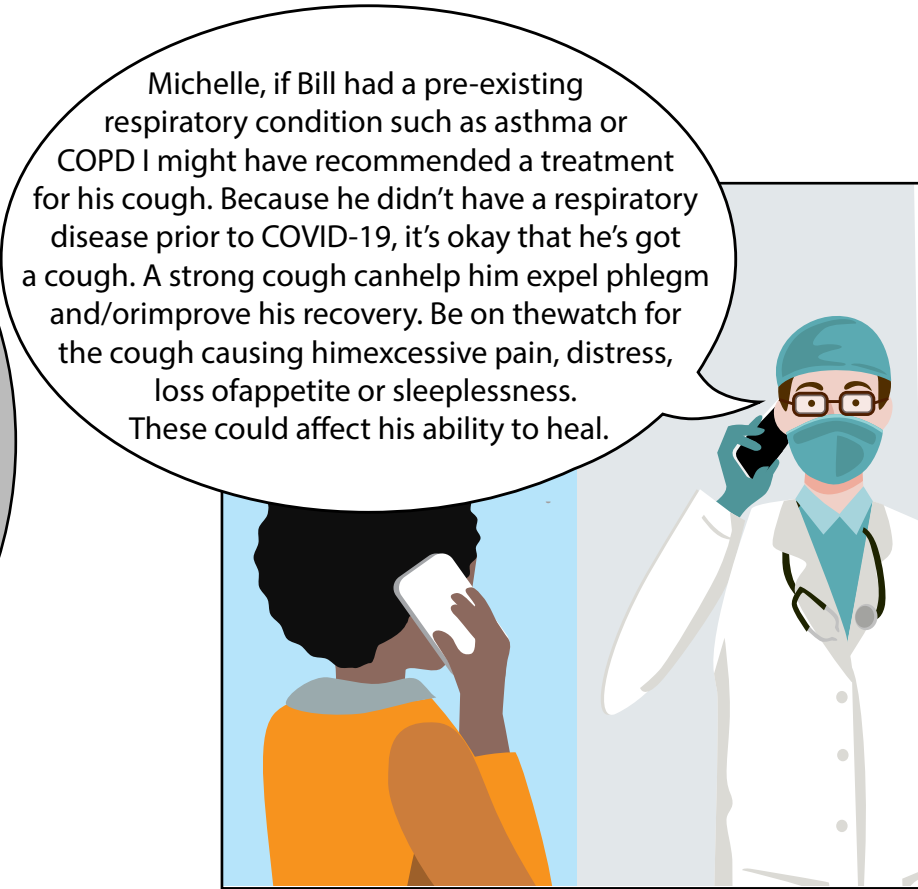


While sick, Bill may need support with different symptoms:

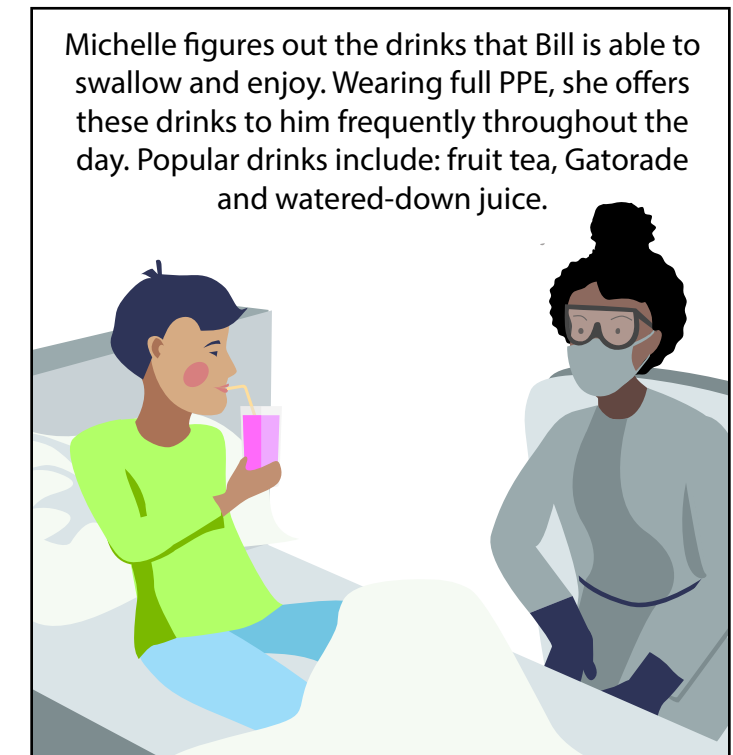
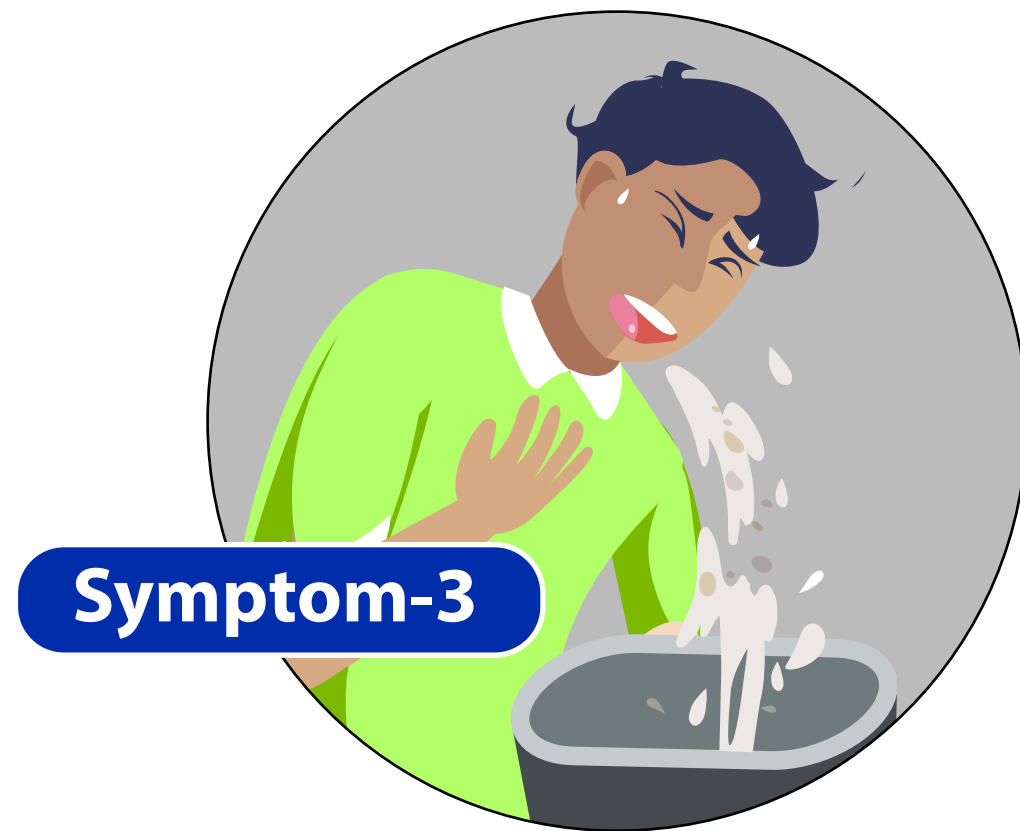
Fever



Cough or Shortness of Breath



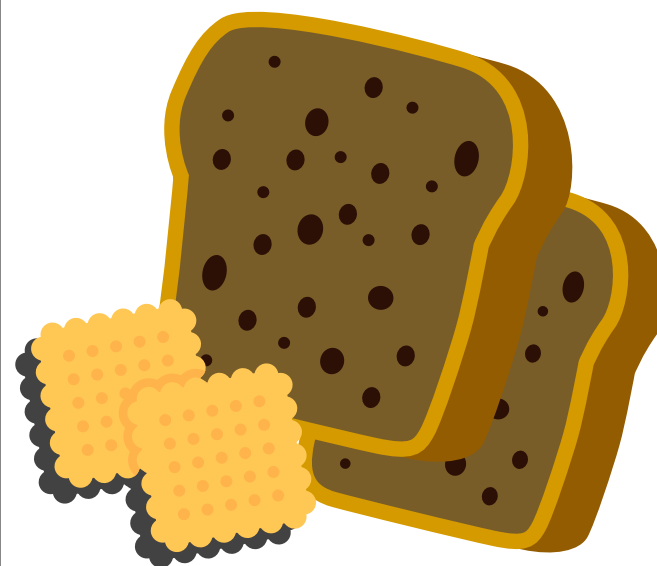
Nausea or Vomiting



If Bill starts refusing drinks, it might be because he's nauseous. Michelle checks with Bill's doctor. He prescribes Bill to have Gravol. Based on the doctor's instructions, Bill uses it for 1-2 days, when awake, followed with a glass of water when the Gravol starts to settle his stomach. (approx. 40 minutes). Gravol may make Bill drowsy and tired.



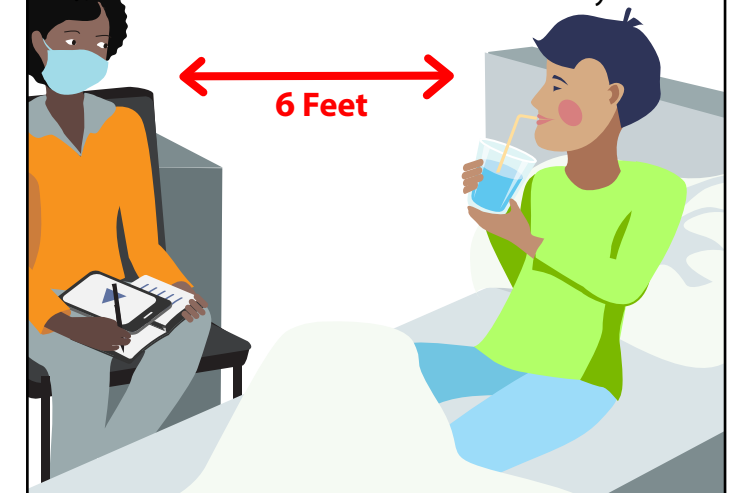
Michelle offers Bill dry crackers and toast to help ease his nausea and keep him nourished.



Michelle, wearing full PPE, stays close beside Bill because he seems more drowsy and wobbly due to vomiting and/or not eating as much as usual.



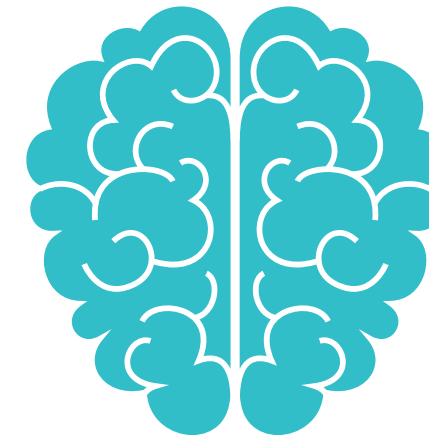
Michelle monitors from a distance how often Bill's vomiting, drinking fluids and the elasticity of his skin. If Bill's skin is jigglier or seems to hang, that can be a sign of dehydration. If Michelle saw this, she would contact Bill's doctor immediately.



Severe weakness or worsening of balance



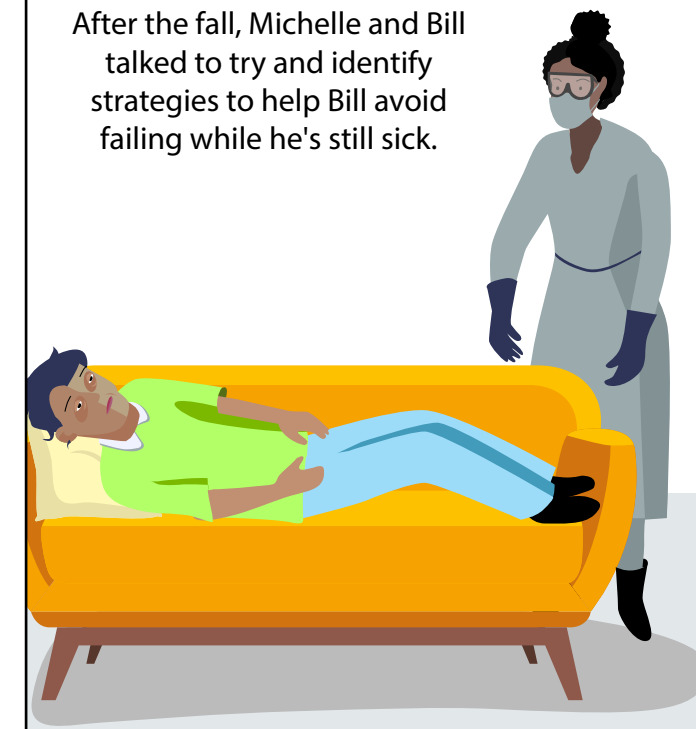
People who have a neuromuscular disorder (e.g., spasticity, ataxia, poor balance) may experience weakness while they are COVID-19 positive. Anticipate this for everyone who has a neuromuscular disorder and is able to walk.



Bill fell but knew, based on Michelle's coaching, that this was to be expected. Bill also knew to call for help in getting back up. Once Michelle arrived in full PPE, she called for help to assist Bill to get up. Before Bill is helped up, everyone checked with Bill to see if there were any injuries. Bill should not try to get up on his own. If Bill has a hooyer lift, Michelle can use the device to assist Bill to get up.



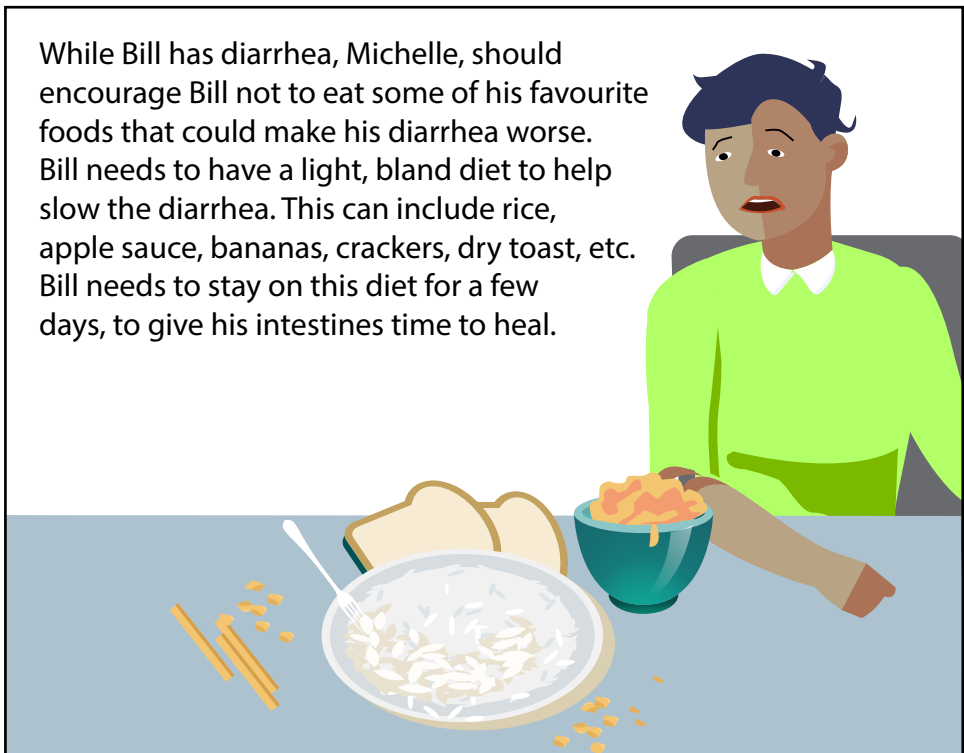
After the fall, Michelle and Bill talked to try and identify strategies to help Bill avoid failing while he's still sick.



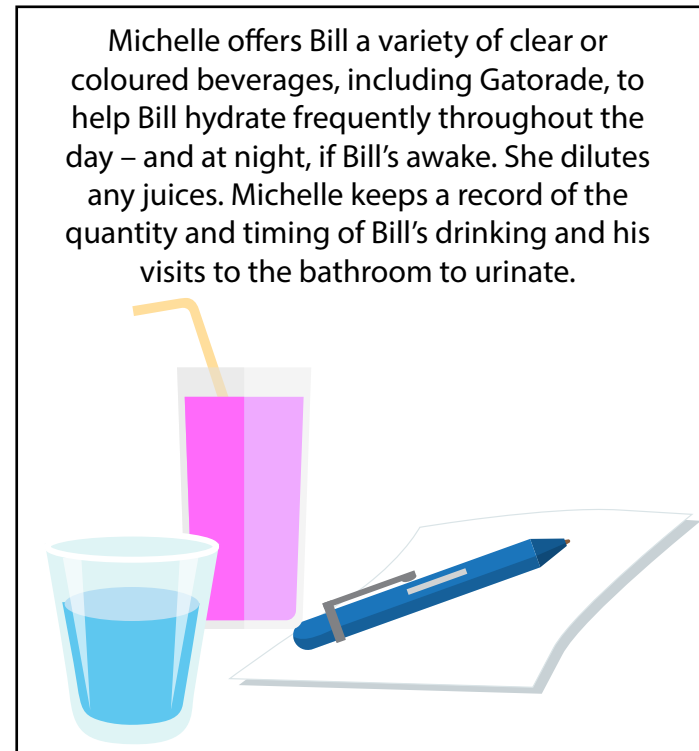
Diarrhea



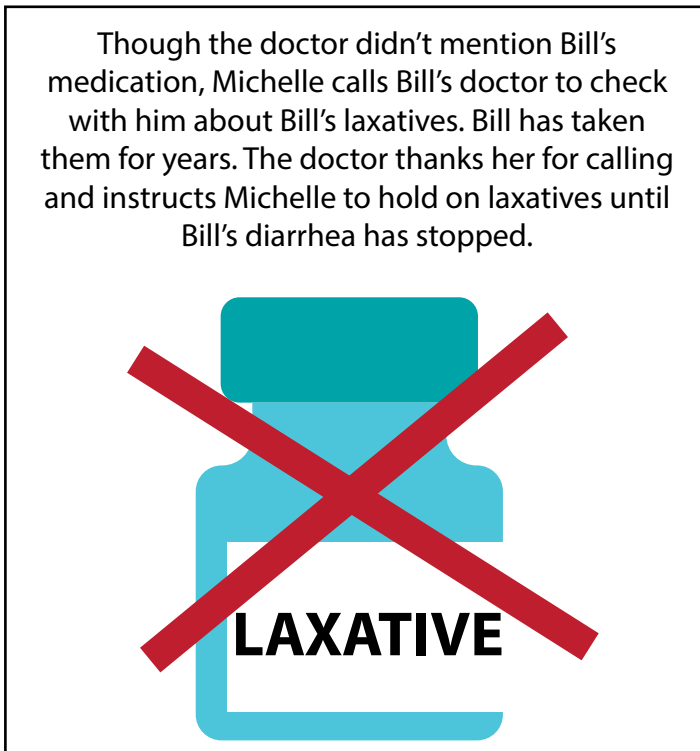
Symptom-5



While Bill has diarrhea, Michelle, should encourage Bill not to eat some of his favourite foods that could make his diarrhea worse. Bill needs to have a light, bland diet to help slow the diarrhea. This can include rice, apple sauce, bananas, crackers, dry toast, etc. Bill needs to stay on this diet for a few days, to give his intestines time to heal.

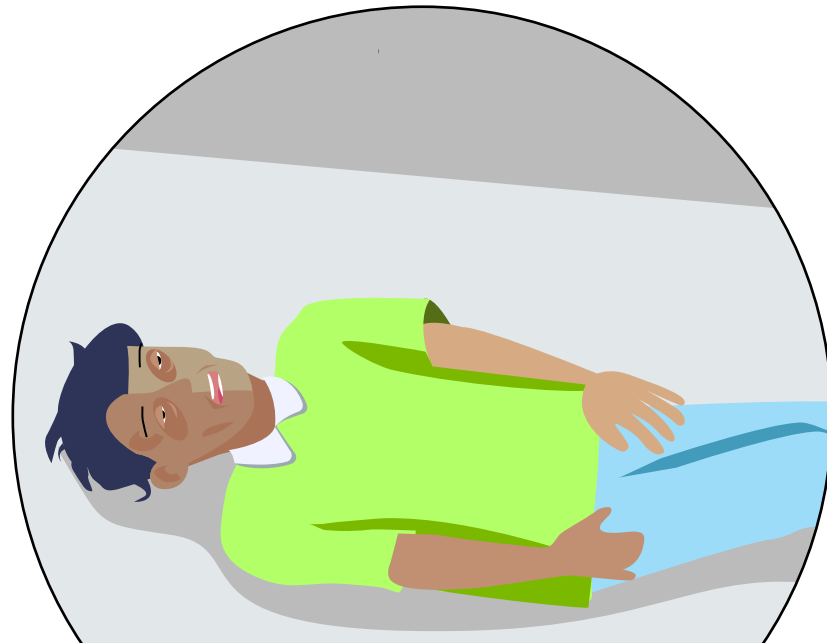


Michelle offers Bill a variety of clear or coloured beverages, including Gatorade, to help Bill hydrate frequently throughout the day – and at night, if Bill's awake. She dilutes any juices. Michelle keeps a record of the quantity and timing of Bill's drinking and his visits to the bathroom to urinate.



Though the doctor didn't mention Bill's medication, Michelle calls Bill's doctor to check with him about Bill's laxatives. Bill has taken them for years. The doctor thanks her for calling and instructs Michelle to hold on laxatives until Bill's diarrhea has stopped.

Impact on other diagnoses



Symptom-6

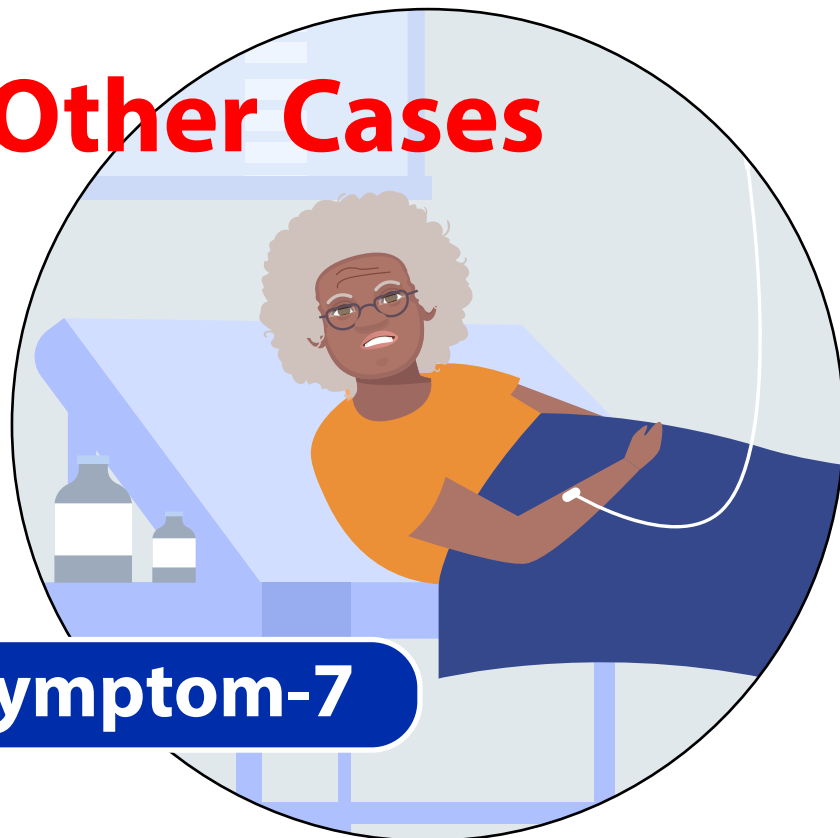
Michelle, we need to be extra careful with Bill being COVID-19 positive because it could affect his other conditions – possibly increasing his seizures or asthma flare-ups.



Bill's doctor wrote prescriptions for additional medications needed to manage possible additional issues related to Bill's other conditions. Michelle got the prescriptions filled and purchased all of the supplies recommended by Bill's doctor.



Other Cases



Symptom-7

For people supported who take a number of medications or are receiving palliative care, their doctor and pharmacist will need to review and update medications and any changes needed to their advance care plan.



Low oxygen level



I'm calling for an ambulance because I support someone who has been diagnosed with COVID-19 and they are having trouble staying awake. He's also having trouble breathing, his lips are blue and he keeps touching his chest and wincing.

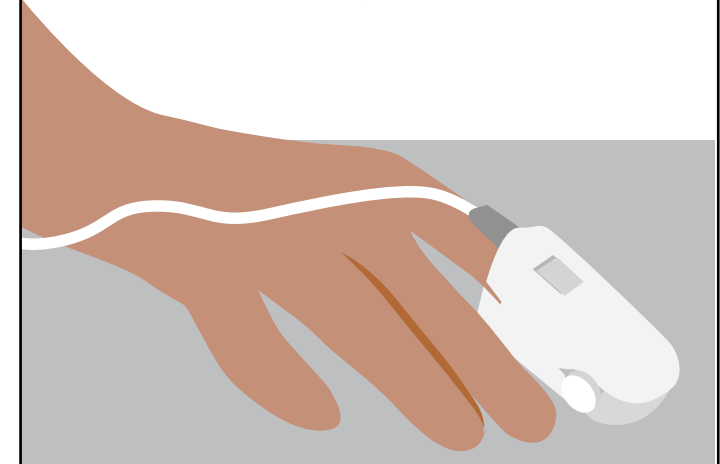


911

Bill's symptoms point to having a low oxygen level and possibly 'COVID pneumonia' or 'silent hypoxia.'



One of the ways Michelle knew Bill was in trouble was by monitoring his oxygen saturation level using an oximeter. This is helpful to spot 'silent hypoxia' – where someone has low oxygen levels but with no visible symptoms.



Michelle needs to be on the watch for any signs of low oxygen levels and immediately contact 911. Symptoms include: trouble breathing, persistent pain or pressure on the chest, new confusion, inability to wake up or stay awake, bluish lips or face. With silent hypoxia there may be no symptoms other than a low oxygen reading on an oximeter (e.g., 90% or below their normal). Once calling for the ambulance, Michelle should be sure that Bill's documentation is ready to go (e.g., OHIP card, Hospital Transfer Form). Michelle can call Bill's doctor once Bill has been admitted.



Dehydration



Emergency Symptom

Michelle, you need to be very proactive if you think Bill's getting dehydrated. You need to call me immediately if he has symptoms. He may need to go to the hospital for fluid replacement. This may involve intravenous (or "I.V.") therapy. If something worries you and my office is not available, please call Telehealth for advice.



Michelle figures out the clear drinks (coloured is okay), light meals and hydrating snacks that Bill likes best and keeps these well stocked. Michelle wears full PPE to offer fluids every hour while Bill's awake. If Bill wakes up at night, she offers fluids then too. Michelle aims for 2 litres a day. If Bill needed to use a g-tube, Michelle would consult Bill's doctor re: an easily accessible fluid or formula to use with the g-tube meal plan for when ill.



Michelle tracks the amount of liquids that Bill's having (including hydrating snacks like watermelon, tomatoes and grapes). Michelle also tracks Bill's trips to urinate.



Bill's doctor may recommend that Michelle visit a health food store to buy Bill healthier versions of electrolyte replacements than Gatorade. For example, Nuun tablets are low in sugar and can be put in a glass of water and start fizzing.



If Bill's not drinking enough or he's had diarrhea, Michelle calls Bill's doctor to get his opinion. He may instruct her to hold his 'sick day' medications.



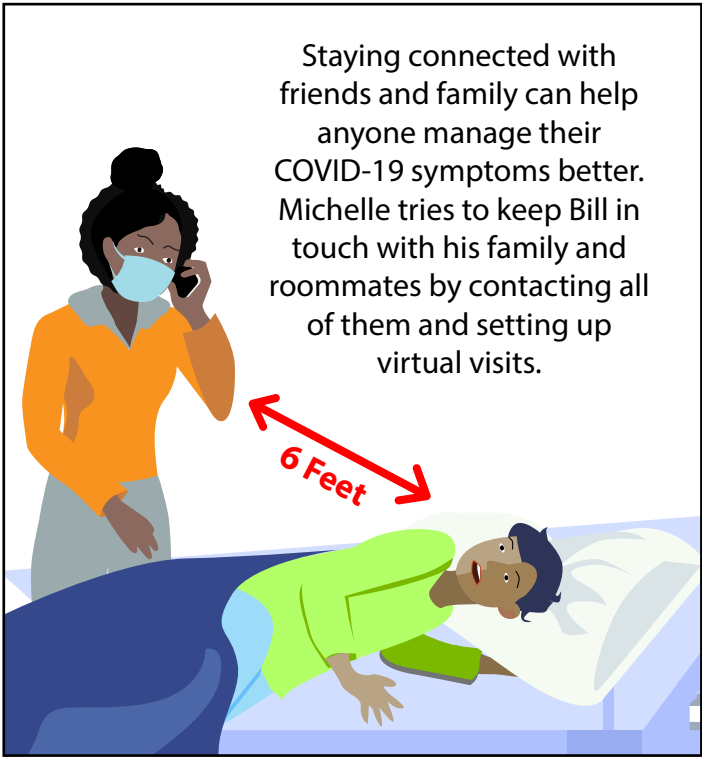
Michelle needs to be on the watch for any signs of dehydration and contact Bill's doctor (or Telehealth if Bill's doctor is not able to be immediately reached). Bill may need to go to the hospital if he gets severe dehydration. Symptoms include: fatigue, cramping, muscle weakness, difficulty walking, dizziness, confusion, forgetfulness, headaches, difficulty breathing, sunken eyes, inability to sweat or produce tears, higher temperature, elevated heart rate, low blood pressure, low urine output, dark colored urine -- or dry mouth, nose or skin.



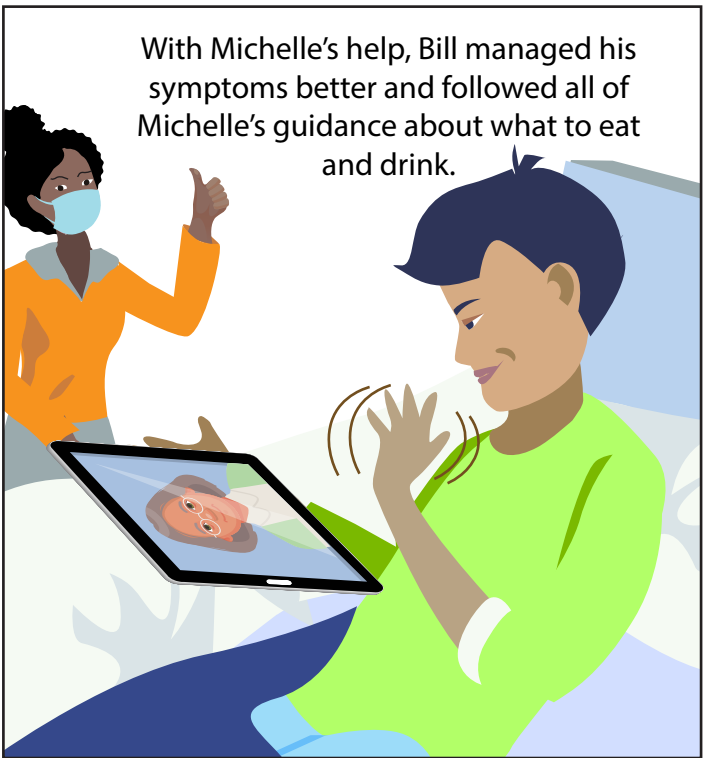
Stay connected until better



For All Symptoms



Staying connected with friends and family can help anyone manage their COVID-19 symptoms better. Michelle tries to keep Bill in touch with his family and roommates by contacting all of them and setting up virtual visits.



With Michelle's help, Bill managed his symptoms better and followed all of Michelle's guidance about what to eat and drink.

Being prepared



On her next shopping trip for supplies, Michelle purchases items Bill used while sick, such as batteries for the thermometer, 4 days' worth of Tylenol, some Gravol, clear fluids, g-tube replacement fluids, etc. This will alleviate the need to go scrambling if Bill ever has these symptoms again.

Conclusion



With Michelle's support, Bill recovered. Michelle continues to support Bill in staying safe and healthy.



The End