



How Think Research Can Contribute to Canada's Acute Care Response to COVID-19

Key Highlights

- COVID-19 is present in Canada with nearly 100 confirmed cases.¹ Canadian hospitals, public health agencies, and health ministries are playing key roles in managing the disease and limiting transmission.
- Think Research specializes in implementing up-to-date, evidence-based best practices via standardized clinical tools. Our standardized, actionable clinical content and tools for COVID-19 may help hospitals in their efforts to effectively respond to the disease.
- This package supports the consistent early identification of cases and will be updated as new information emerges on a 72-hour cycle, and even sooner for more urgent updates.
- Updated content will be disseminated digitally or on paper. Our clinical library includes screening assessment tools, checklists, care protocols and orders, and is accompanied by training videos.
- Our team is available to support you through the implementation process as required.

Problem: Ensuring a Standardized, Evidence-Based Response to COVID-19

With the WHO's formal declaration of COVID-19 as a pandemic, we understand that this is a very challenging time for you, your staff and your patients. The number of confirmed global COVID-19 cases has topped 100,000.² Globally, healthcare systems are working to contain local infection control and disease management, particularly for our most vulnerable people.

People with COVID-19 typically present with respiratory illness and fever. Current infection rates suggest that 16 percent of all affected patients develop serious illness.³ People over 65 and those with underlying health concerns — such as diabetes, heart disease, or lung disease — are at higher risk of developing serious COVID-19 illness.⁴ The acute care sector has a critical role in supporting effective and appropriate care for individuals with suspected and confirmed cases.

At the same time, the pandemic potential of COVID-19 is poised to overtax health systems already strained by peak flu season and system capacity. Without a systematic, agile and coordinated approach, COVID-19 may further burden under-resourced hospitals.

¹[Public Health Agency of Canada](#), March 11, 2020.

²[World Health Organization](#), March 11, 2020.

³[World Health Organization](#), March 11, 2020.

⁴[Centers for Disease Control & Prevention](#), March 11, 2020.

Think Research's existing footprint in Canada's healthcare sector offers a framework and capacity to quickly deliver updated clinical knowledge aligned to best practices and grounded in evidence.

Our tools could support COVID-19 case identification, monitoring, and appropriate treatment. To help ensure this new content is swiftly and efficiently implemented, Think Research can work with you to deploy our support tools into your existing workflows (e.g., paper-based, via .pdf or through EHR systems).

A standardized clinical approach may help to:

- Minimize the introduction of high-risk febrile respiratory illnesses into hospitals.
- Offer consistent screening and early identification of suspected infection with COVID-19.
- Consolidate key isolation information and management of patients with febrile respiratory illness that are suspected or confirmed cases.

Having these clinical support tools may help staff who provide care and interact with patients and visitors, enabling them to feel confident that they are appropriately responding to COVID-19. We are committed to releasing new COVID-19 tools on a 72-hour cycle as updates become available, and even sooner for more urgent updates.

Overview of Think Research's COVID-19 Clinical Content Library

Think Research's COVID-19 content mobilizes best practices and recommendations from Canadian public health agencies, health ministries, infectious disease experts, and their partners. To help hospitals and other healthcare organizations implement these best practices, we have developed a library of structured knowledge-based tools.

While there is no generally accepted treatment specific to COVID-19 at this time, many order sets in our clinical content library can help to effectively manage the care process and some of COVID-19's associated complications.

Existing COVID-19-related library items include:

- Emergency Department Community-Acquired Pneumonia (CAP) Order Set
- Emergency Department Community-Acquired Pneumonia (CAP) Order Set
- Community-Acquired Pneumonia (CAP) Admission Order Set
- Critical Care Community-Acquired Pneumonia (CAP) Admission Order Set
- Critical Care Non-ventilated Admission Order Set
- Critical Care Ventilation Admission Order Set
- Critical Care Ventilation Order Set
- Critical Care Acute Respiratory Distress Syndrome (ARDS) Order Set
- Critical Care New Onset Sepsis Order Set
- Critical Care Sepsis Admission Order Set
- Emergency Department Sepsis Order Set
- ER Ventilation Order Set

We are also rapidly developing these additional tools to help you manage patients presenting with febrile respiratory illness or COVID-19. Concurrently, we are building training modules to ensure your staff are appropriately resourced and comfortable with the COVID-19 library.

| COVID-19 Tool | Description | Benefits |
|--|---|---|
| 1. Entry Screening Tool for Patients/ Visitors/Volunteer | Series of best practice questions screening for any new COVID-19 symptoms | Clerks, Hospital Staff, Nurses |
| 2. Isolation Checklist | Checklist of isolation precautions required, recommended optimal use of PPE | Nurses, Care Support Staff, Allied Health Professionals |
| 3. Hospital Readiness Checklist | Checklist to support staff readiness to effectively manage COVID-19 activities | Hospital Leaders |
| 4. Emergency Department Febrile Respiratory Illness Care Medical Directive | Medical directive for emergency care priorities and diagnostic testing | Emergency Department Staff |
| 5. Febrile Respiratory Illness Care Protocol | Evidence-based information on diagnostic testing, supportive care, and resident education | Nurses |
| 6. Febrile Respiratory Illness Physician Orders | Evidence-based orders and guidance for diagnostic, supportive care, and interventions | Physicians, Prescribers |

Availability Timelines for COVID-19 Library Content

Think Research will provide our new clinical knowledge tools in the following sequence: paper-based, digital and EHR integrated.

For the specific COVID-19 tools listed in the table above, paper-based versions are currently in review with leading infectious disease experts. We expect their general availability by 9 am on Thursday, March 19, 2020.

Fillable PDFs will be available by 9 am on Thursday, March 26, 2020.

We are targeting the week of April 1 for EHR integrations and will update you on publication specifics as more information becomes available.

In parallel, Think Research will develop staff training video modules to ensure staff are appropriately trained to action recommendations within the COVID-19 library in a timely manner. We understand the importance of having robust training and education services and tools to enable quick and efficient training for responding staff.

If our tools, content, or clinical support can assist your work with COVID-19 in any way, please contact us at 1-877-302-1861 or email learn@thinkresearch.com.