

Medical Education Update: New Safety Procedures for Events Held at the Orthopaedic Foundation BioSkills Lab, a.k.a. the CONMED Learning Center, New York, NY

Nothing is more important than the health and safety of our visitors and employees. In the wake of the COVID-19 Pandemic and in accordance with CDC guidelines, we are implementing the following additional enhanced safety procedures to protect all participants during in-person education events.

#### **Phase I: Pre-Event Procedures**

- Any event will require approval from OFALS prior to the event being scheduled:
  - The requirements will be outlined and detailed using the Request Form (included on page 3) and sent to Janine Bahar at jbahar@ofals.org.
- If the event is approved, all attendees will be required to return their filled-out Pre-Event Screening Form (included on pages 4 & 5) 48 hours prior to the event where they will confirm the following:
  - In the past 14 days, they have not had direct contact with a person who has been confirmed to be infected with COVID-19.
  - o In the past 14 days, they have not traveled outside the continental United States.
  - They are not currently, nor have they in the past 14 days, exhibited any symptoms of COVID-19.
- All support personnel will arrive for the event 1 hour prior to visitor arrival.
- All equipment and surfaces will be disinfected prior to start of the lab.

# **Phase II: During Event Procedures**

- Upon arrival, attendees will be screened for their temperature. Those with body temperatures above 100 degrees will not be permitted to enter our facilities.
- At the temperature checkpoint, a mask will be distributed to each person and must be worn at all times.
- All personnel will gown up per lab procedure prior to conducting any activity in the bioskills lab setting.
  - o Only 1 person will gown up in a restroom or locker room at a time.
  - Face masks, gloves, face shields, boot/shoe covers, and gowns will be required before participants can interact in the lab setting.
- Once fully covered in appropriate PPE, the surgeon and the first assistant are the only persons permitted to be in close proximity to one another.
- Other than the surgeon and the first assistant, no persons at the lab will be allowed to break 6-foot distancing protocol at any time (includes time prior to physical product evaluation, lab evaluation process, debrief, breakdown and shipping).
- Lab observers will always be expected to maintain their position at least 6 feet away from the operating table & visiting clinician(s).
- Movement will be strictly limited within the lab and surrounding areas, once setup is complete and participants are in place, attendees should remain in the event facility for the duration of the event.
- Post-lab debrief will continue to maintain the same level of distancing.
- Equipment tear down and disinfection will be performed by a single person per station.
- All equipment will be disinfected or sterilized between lab sessions.
- Food service and refreshments for all events will be "self-contained" as defined by caterer and only to be eaten in the building where the event is taking place. No travel to outside cafeterias, etc. Refreshments will be a self-contained lunch box. Only disposable utensils and plates will be used.

#### **Phase III: Post-Event Procedures**

• All equipment, surfaces and other trafficked areas will be cleaned and disinfected after the event according to CDC guidance on cleaning and disinfecting the workplace.

Further information and guidance will be provided for any additional travel accommodations provided by OFALS. For questions or additional information, contact <u>jbahar@ofals.org</u>.

## **Event Description and Request Form**

This document is to detail the requirements and need for an upcoming customer interaction during COVID-19. The Team Leader for the event is responsible for this form. The process for approval is as follows:

- Complete this form in its entirety
- Send completed form to jbahar@ofals.org

Event Title/Name	I	Date of Event	
Event Description			
Purpose/Outcome			
External Personnel Required and Description (Surgeon Name, City; If Out-of-Town, why no Local Surgeon Could Be Used)			
Personnel Required and Description (Note: Keep to an Absolute Minimum Required)			
Team Leader	Title	Date	

#### **Post Event Summary**

Deviations from Scope and Resources and Why (Note any deviations, areas/buildings entered, by whom and why that was different than planned)

#### **Covid-19 Site Visit Employee and Contractor Pre-Screening**

The global pandemic has resulted in changes to our pre-COVID screening criteria. Our intention is to ensure that each team member coming on site for supporting this activity is aware of the requirements prior to the event and ensure that you are comfortable with the process. **Please check each question.** 

1. Upon arrival, you will be screened for your temperature. If you have a body temperature above 100 degrees, you will not be permitted to enter our facilities.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

2. In the past 14 days, I have not had direct contact with a person who has been confirmed to be infected with COVID-19.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

3. In the past 14 days, I have not traveled outside the continental United States.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

4. I understand that while on site, I will be required to wear a mask and other PPE in our facilities.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

5. In am not currently, nor have I in the past 14 days, exhibited any symptoms of COVID-19.

Agree	Disagree
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6. I understand that I should maintain a minimum of 6 feet of distance from others while on site.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

7. I understand that participation in this activity is completely voluntary. I understand that I can decline attending this for any personal circumstance and this will not reflect negatively in any way on my performance at CONMED.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

Employee/Contractor Signature

Title

Date

Employee/Contractor Printed Name

## **Covid-19 Site Visit Protocol and Pre-Screen**

The global pandemic has resulted in changes to our pre-COVID screening criteria. Our intention is to inform you of these requirements prior to your potential visit so that we avoid any last-minute issues on site. **Please check each question.** 

1. Upon arrival, you will be screened for your temperature. If you have a body temperature above 100 degrees you will not be permitted to enter our facilities.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

2. In the past 14 days, I have not had direct contact with a person who has been confirmed to be infected with COVID-19.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

3. In the past 14 days, I have not traveled outside the continental United States.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

4. I understand that while on site I will be required to wear a mask and other PPE in CONMED facilities.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

5. In am not currently, nor have I in the past 14 days, exhibited any symptoms of COVID-19.

Agree	Disagree
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6. I understand that I should maintain a minimum of 6 feet of distance from others while on site.

Agree \_\_\_\_\_ Disagree \_\_\_\_\_

Surgeon Signature

Title

Surgeon Printed Name