

Protect your health-care workforce, NYC: Nurses' personal plea

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Give care to the caregivers. (Angus Mordant/for New York Daily News)

As nurses, we know that our most important job is to protect and advocate for our patients and communities. That's why it sickens us to know that we're not equipped to protect you.

Imagine you're the nurse for a patient with confirmed COVID-19. Minutes into your shift, an alarm sounds for your patient's dangerously low oxygen levels. You have to act fast, but you can't find a gown. You see one on a chair, but is it clean? Do you go with a potentially contaminated gown? Or continue to look knowing every second is critical? This happened to one of us the other night, and these harrowing scenarios are regularly playing out in NYC hospitals.

Nursing is a high-touch profession. We rely on personal protective equipment (PPE) to keep ourselves and our patients safe. Amidst the COVID-19 crisis, nurses and health-care workers remain in grave danger due to the [critical shortages in PPE](#). [More than 9,000](#) health-care workers have already been infected, and even while writing this article, one of us fought to recover from COVID.

The ongoing shortage of PPE not only endangers health-care workers, but the general public. It slows down efficient care because of new burdensome bureaucracies. Here's how things work these days for most of us. We record our names and date in a logbook in order to get a mask that we'll reuse for multiple shifts. To get a new mask, we have to return the old one, and there is no guarantee if we ask too soon.

Shifting supplies between hospitals can help but is time-consuming. When a new N95 brand became available, for example, thousands of personnel had to be refitted. [Since fit is essential](#) to masks working effectively, switching brands on the fly can impede care.

Mask distribution is wildly inconsistent across hospitals. Our ICU colleagues in other states report they get one mask for the week while working a "clean" (not COVID) unit. COVID testing is not foolproof, and people who test negative yesterday can be positive today. It's terrifying when our "COVID negative" patients have classic coronavirus symptoms and all we have is a worn-out mask and [the possibility of retribution](#) if we speak up. PPE shortages convert hospitals into infection nodes, making them unsafe for all patients who need urgent medical attention.

We know that plenty of you get it — that your safety and those of your loved ones is at risk as long as PPE shortages continue. We thank those of you who quickly became involved in 3D printing and home manufacturing. Since many of you have asked us what you can do to help, we offer these suggestions.

One, if you have PPE, get it to where it will do the most good. Donate to hospitals and health care clinics, or directly to providers by visiting [#GetUsPPE](#). Several hospitals, like [NYU Langone, have campaigns](#) for in-kind and PPE donations.

Two, participate in advocacy and policy efforts surrounding PPE, like [this petition](#) by National Nurses United, demanding hospitals to stop threatening nurses over PPE. Further, tell organizations to come together with a unified message. There are a variety of PPE practices among hospitals, but now there is a strong need for standardization.

Three, follow your state guidance. New York and the federal government have [released guidelines](#) to manufacture and [3D print PPE](#).

The lack of PPE is a crisis of our own making, and health-care workers are being asked to bear the burden of our failure as a nation to respond appropriately. The [CDC](#) now recommends that everyone wear a cloth face-covering in public. Surgical and N95 respirators should still be reserved for health-care workers.

The PPE shortage is simple economics: a massive shortage of supply disastrously met with a surge in demand. If we can't solve this urgent problem, we will all pay the price, not just in dollars, but in lives.

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