

ACOG 2020 DISTRICT II VIRTUAL ANNUAL MEETING Junior Fellow Research Day Oral Presentation and iPoster Session Contests

RESEARCH ABSTRACT FORM

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RESEARCH TITLE: Healthcare Providers' Attitudes Toward Patients with SARS-CoV-2 Infection in the United States

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INTRODUCTION:

Early in the SARS-CoV-2 pandemic, before the routine availability and/or use of personal protective equipment, healthcare providers were understandably concerned. Our aim was to explore healthcare workers' attitudes towards patients infected with SARS-CoV-2 at the time of the nation's first surge in two highly affected hospitals in New York.

METHODS:

We performed a cross-sectional, self-administered survey study of a convenience sample of healthcare providers. The survey consisted of 17 multiple-choice questions including demographic information, ethics and willingness to care for patients with SARS-CoV-2 infection. Subgroup analyses were performed using Fisher's exact test.

RESULTS:

Of 340 healthcare providers approached, 338 (99.4%) consented to the survey; 163 (48.7%) were nurses and 160 (48.3%) lived with family and children. While 326 (97.3%) providers were concerned about putting their family/coworkers at risk of infection after caring for a patient with SARS-CoV-2, only 30 (8.9%) were unwilling to treat a patient with SARS-CoV-2 infection.(Table 1) Nurses were more likely than other health professionals to think it was ethical to refuse care for SARS-CoV-2 infected patients, worried more often about contracting infection, and felt that SAR-CoV-2 added to their stress level (p = .022, p = .006, p < .001, respectively). A similar contrast was seen when comparing providers who live with family and children with those that did not. (Table 2)

CONCLUSIONS:

Levels of stress and concern were extremely high. In spite of that, the overwhelming majority of providers were willing to treat patients with SARS-CoV-2 infection. Nurses and healthcare providers who live with children were more likely to think it is ethical to refuse care for SARS-CoV-2 infected patients.

Table 1: Demographics and perspectives of healthcare providers

Demographics	Number (Percentage)		
Occupation			
Attending physician	50 (14.9%)		
Resident physician	61 (18.2%)		
Nurse	163 (48.7%)		
Others	61 (18.2%)		
Department			
Anesthesiology	30 (9.1%)		
Emergency Medicine	5 (1.5%)		
Internal Medicine	37 (11.2%)		
Obstetrics and Gynecology	164 (49.6%)		
Pediatric	49 (14.8%)		
Surgery	32 (9.7%)		
Living situation			
Not living with family	78 (23.6%)		
With family—no children	90 (27.2%)		
With family—with children	160 (48.3%)		
Perspective Questions			
How often have you worried about contracting COVID-19 from a patient?			
Never/Once in a while	73 (21.6%)		
Quite often/All the time	265 (78.4%)		
as a result of patient care added to your stress level? Not at all/Very little	63 (18.9%)		
Quite a bit/A lot	271 (81.1%)		
If you had provided care to a patient with	271 (01.173)		
COVID-19 infection and you were currently			
asymptomatic, how concerned would you be			
that you would put your			
family/friends/coworkers at risk of COVID-19			
infection?			
Not at all concerned	9 (2.7%)		
Somewhat concerned/Very concerned	326 (97.3%)		
How willing would you be to provide care for a			
patient with COVID-19 if the care required by			
the patient is in your field of expertise?	200 /20 20()		
Always/somewhat willing to treat	268 (79.3%)		
Neutral	40 (11.8%)		
Somewhat/very unwilling to treat	30 (8.9%)		
Think it is ethical to refuse to provide care for COVID-19 infected patients	37 (11.1%)		
Think it is ethical to refuse to provide care for	27 (8.0%)		
patients with HIV/AIDS	27 (0.0%)		
Think it is ethical to refuse to provide care for	27 (8.0%)		
patients with influenza			

Table 2: Healthcare providers' attitudes between healthcare providers who live with children versus without children

Perspective questions	Living with children	Living alone or without children	ρ
How often have you worried about contracting COVID-19 from a patient?	137 (85.6%)	119 (70.8%)	0.001
Has the concern of acquiring COVID-19 infection as a result of patient care added to your stress level?	139 (88%)	124 (74.7%)	0.003
Think it is ethical to refuse to provide care for COVID-19 infected patients.	24 (15.1%)	12 (7.2%)	0.033
Think it is ethical to refuse to provide care for patients with HIV/AIDS	17 (10.6%)	9 (5.4%)	0.102
Think it is ethical to refuse to provide care for patients with influenza	16 (10.1%)	10 (6%)	0.22