

Critical Shortage of Ventilators and Protective Gear Persists

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Governor of hard-hit NY state Anthony Cuomo stressed that if a patient “needs a ventilator” and they’re all in use because of an insufficient supply, “the person dies” from suffocation.

That’s the disturbing reality of a critical national shortage at a time when they’re vitally needed.

As daily COVID-19 infections increase exponentially in the US, numbers on Friday will way exceed 250,000 by day’s end.

Medical workers on the front lines of treating the sick are most vulnerable to become infected.

On Thursday, National Nurses United (NNU), the nation’s largest RN union, addressed Trump by letter, saying the following:

“Across the nation, our health care workforce does not have the personal protective equipment it needs to safely care for patients without risking exposure to the virus,” adding:

“As a result, health care workers are at risk of illness and death, which puts our entire health care system at risk of collapse.”

“Further, when health care workers are exposed to the virus, they risk transmitting the virus to their families, patients, and communities.”

“If our country fails to immediately protect our health care workers, we will fail to contain the COVID-19 pandemic.”

By invoking the Defense Production Act, Trump can order companies to produce ventilators, personal protective gear, and whatever else is needed for medical staff to treat COVID-19 patients.

He barely used it. Last Friday for the first time, He called on General Motors to produce ventilators, what it’s gearing up to do anyway.

For the most part, he chose to let the private sector decide how and to what extent it’ll deal with the COVID-19 crisis to produce equipment, gear, and medications needed.

True enough, factories can’t covert from producing cars or appliances to medical supplies overnight.

During WW I and II, US auto makers shifted from passenger cars to aircraft, tanks and guns to support the war effort.

A similar approach is needed now to wage war on and defeat COVID-19.

It includes mass-producing COVID-19 test kits, providing medical staff with needed supplies, treating infected individuals, feeding the hungry and food insecure, and providing households with helicopter money to get by.

Instead of a national coordinated effort to deal with the public health crisis, directed by the Trump regime, governors in the 50 states are left to cope with it on their own.

They're forced to compete for scarce supplies, trying to outbid each other to get what's needed, an untenable situation.

National Nurses United called for the Trump regime to order mass production of essential equipment and supplies needed to wage war on COVID-19 — as authorized under Title III of the Defense Production Act.

NNU also urged the White House to immediately release and distribute from the strategic national stockpile large numbers ventilators, PPE, testing equipment, and life-support ECMO machines that are used for patients with life-threatening conditions like severe lung damage from infection.

On Wednesday, Bloomberg News reported medical staff on the frontlines of treating COVID-19 patients are “frustrated that they're being sent into a deadly battle without the protective gear they need for themselves and their patients.”

Things are especially dire in NYC where over 90,000 infections were reported and over 1,000 deaths, including seven medical workers.

American College of Emergency Physicians board member Dr. Ryan Stanton expressed frustration, saying:

“We are the richest country in the world, and yet we can't protect our health-care providers when fighting the deadliest virus we've dealt with in most of our lifetimes,” adding:

“There's a significant level of distrust with physicians and nurses and others because we feel the requirements and suggestions for PPE are being downgraded because of availability and not because of science.”

While most Americans shelter in place at home, medical staff show up daily on the job to treat sick patients.

On Tuesday, executive director Henry Garrido of District Council 37, representing emergency medics, nurses' aides, respiratory therapists and other NYC public workers, said the following:

“Our members are exhausted. They are scared. (But) (t)hey continue to soldier on.”

NYC registered nurse Karine Raymond said because conditions are worsening without let-up, she's seriously thinking of writing her will.

"Nurses aren't going to walk out," she said. "We're very realistic. We're doing the best we can."

"We're trying hard to try and help these poor souls without unduly opening ourselves up to anything dangerous. If we go down, then there's nobody left to care for the patients, is there?"

According to the Association for Professionals in Infection Control and Epidemiology, around half of NYC hospitals reported that they're critically short of respirators, masks, hand sanitizers, and other essential items needed to treat COVID-19 and other patients.

Rochester, NY UR Medicine's director of infection equipment Ann Marie Pettis said

"(o)ur days are spent frantically searching for personal protective equipment," adding:

Staff is forced to re-use single use items. "(T)his goes against everything we have known from the scientific evidence and what we have always taught our staff."

Hospitals in the US nationwide face similar conditions that jeopardize medical staff and patients.

On Friday, a Lancet medical journal editorial slammed the US healthcare system, saying:

"The USA is a stark reminder of the divide that exists in countries without a universal health-care system."

"For people who do not have private medical insurance, (the COVID-19 crisis) might see them face the choice of devastating financial hardship or poor health outcomes, or both."

During 2009 H1N1 swine flu outbreaks in the US, "individuals with poorer health outcomes were those in the lowest socioeconomic groups."

"This same group of vulnerable people have now been caught in the middle of a major health emergency as a result of long-standing differences in affluence."

America's poor and low-income are most vulnerable to be harmed economically, financially, and health-wise at all times in the US, especially at times like now.

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