

**PLEASE SAVE A COPY OF THIS DOCUMENT, ANSWER QUESTIONS, AND EMAIL ME AT
GUI@IMAGINATIONFABRICATION.COM**

Thank you for agreeing to do this, I really appreciate your input. My current goal here is to get as holistic a picture of the COVID19 patient and healthcare provider experience from as many sources on the ground as possible, and to understand the various processes in layman's terms that can turn into engineering requirements. Once I've synthesized this medical data, I intend to create an open source requirements document that outlines all the needs of medical hardware, and then design open source medical supplies so that local DIY/maker/fabrication communities can produce emergency supplies if needed.

I am familiar with healthcare organization rules restricting social media commentary from medical professionals, and I will not be attributing any medical professional I contact. I would prefer to directly post your answers to the questions below, but I am also willing to summarize them and post the summary if you would prefer.

- Where are you?
- What is your relevant medical background?
- When were you trained in COVID19 response?
- If you can share, what organization provided the training? More-generic and non-specific answers ("A research university on the West Coast of the US") are fine.
- Have you been directly treating COVID19 patients? If so, what stages of COVID19 hospitalization have you been treating?
- What condition is a patient in when they arrive at the hospital with COVID19?
- How are patients treated during early stages of the disease?
- How do you determine if a patient is worsening into critical condition? How long does it usually take?
- What do you do when a patient becomes critical?
- How long is a patient in critical condition?
- What specific medical equipment/supplies are used to treat COVID19, in both non-critical and critical cases?
- What specific PPE is used by healthcare workers tending COVID19 patients, in both non-critical and critical cases?
- What does a day in the life of a healthcare worker attending COVID19 patients look like in the best case?
- What does a day in the life of a healthcare worker attending COVID19 patients look like in the worst case?
- What relevant medical supplies (broadly defined, including PPE, respirators/ventilators, oxygen generators, sensors, etc.) are you already short on?
- What relevant medical supplies do you expect to run out of soon?
- What relevant medical supplies are you NOT short on, or are not worried about?

- What could you imagine patients (and/or their loved ones) doing for themselves at home in the WORST CASE SCENARIO in which they get turned away from a hospital? Assuming they had full access to medical supplies, improvised or otherwise?
- What is the intake/acquisition process for medical equipment? Have you ever heard of ways to get non-FDA-approved supplies through your process? At what societal point do you expect that would change?
- What am I forgetting to ask (and what is the answer)?
- If you had three wishes for supplies that could get restocked by local communities in a dire emergency, what would they be?