OMA Ontario Medical Association

Novel Coronavirus (COVID-19)

Physicians and Primary Care Providers in a community setting should:

PREPARE

CONSIDER
- which patients or conditions will require in-person visits, e.g. prenatal and newborn care, Pap smears, biopsies, etc. (OCFP's Considerations for Family Physicians)
- patient preference and context may mean that in-person care is preferable (e.g. patient age, language or communication barriers)

IMPLEMENT processes to reduce exposure risk:
- Screen: staff (daily) and patients at every visit, flag suspected cases
- Apply IPAC measures and procedures
- Set up physical space to maximize physical distancing
- Recommend vaccination of office/clinic staff and consider implementing vaccination policies; discuss vaccination with patients, and where possible, offer vaccination >>

- Require all patients to wear a mask and perform hand hygiene; be prepared to provide masks if needed
- Optimize ventilation to maximize airflow within the office/clinic

ENSURE your practice has safety precautions in place, including appropriate PPE and appropriate cleaning procedures, and that staff are trained on how to use PPE safely

APPLY Routine Practices and Additional Precautions, including:
- **With suspected COVID patients:** fit-tested N95 respirator (if not yet fit-tested, then a non-fit-tested N95/KN95 respirator or well-fitted procedure mask), eye protection, gown, gloves
- **With all other patients:** procedure mask or fit-tested N95 respirator, and if patient is unmasked, eye protection

For all patients, perform hand hygiene before and after contact with the patient and the patient environment, and after removing PPE.

UNDERSTAND how to advise patients regarding testing and isolation requirements

SCREEN

- By phone (if applicable)
- At entrances via signage, including at your clinic entrance and at the building entrance (if your clinic is in a shared building)
- At reception via questionnaire. Consider using rapid antigen testing as an additional layer of screening with staff.

Access provincial screening guidance here.

IN PERSON	REMOTELY
• Patients should not require a negative COVID-19 test prior to an in-person visit • A virtual visit is not required before an in-person appointment	**ASSESS** • Assess the patient for COVID-19 symptoms and risk factors (e.g. exposure) • Do not delay assessment and treatment of issues that have symptoms which overlap those of COVID-19 (e.g. COPD exacerbation, sinusitis)
EXAMINE • Assess the patient for COVID-19 symptoms and risk factors (e.g. exposure) • Do not delay assessment and treatment of issues that have symptoms which overlap those of COVID-19 (e.g. COPD exacerbation, sinusitis).	
TEST (OPTIONAL): If you have capacity to do so, and if the patient is eligible, collect specimens and submit them to a lab providing COVID-19 testing, **OR** *Access provincial testing guidance here.*	**REFER** Based on your clinical assessment, if appropriate, refer them to either:
REFER Based on your clinical assessment, if appropriate, refer them to either: • Local COVID-19 Assessment Centre for testing • COVID Clinical Assessment Centre for testing and evaluation for treatment • Emergency Department for severe symptoms	• Local COVID-19 Assessment Centre for testing • COVID Clinical Assessment Centre for testing and evaluation for treatment • Emergency Department for severe symptoms

NOTES: • Primary care providers are not required to conduct testing; if testing in-office, ensure swab is labelled and is sent with a completed requisition.
• All patients MUST wear a mask; medical masks are preferred over cloth masks. Patients who are symptomatic or have had a recent exposure MUST wear a procedure mask or N95 or KN95 respirator.
• After seeing a patient who screened positive, disinfect patient-contact surfaces, including all horizontal surfaces and equipment used, before another patient is brought in.

REPORT

Call your local public health unit to report the suspected case according to the case definition of a probable case

≸OMA Ontario Medical Association

How to respond to suspected cases of COVID-19 in community-based practices

If a patient screens positive by phone

> Advise the patient to self-isolate
> AND
> Schedule a same-day virtual or telephone visit

1. **ASSESS:** Assess the patient's COVID-19 symptoms and risk factors (e.g. exposure).
2. **TREAT:** Do not delay assessment and treatment of issues that have symptoms which overlap those of COVID-19 (e.g. COPD exacerbation, sinusitis).
3. **REFER:** Based on your clinical assessment, if indicated, refer the patient to the most appropriate place.
4. **REPORT:** Call your local public health unit to report the suspected case according to the case definition of a probable case.
5. **FOLLOW-UP:** Arrange follow-up for patients at high-risk of severe disease to monitor for deterioration.***

Places to refer or divert the patient, if appropriate:

Assessment Centre: for COVID-19 testing.

Clinical Assessment Centre: for testing, evaluation, and if appropriate, access to treatment.

Emergency department: for severe symptoms, or if urgent care is required.

If a patient screens positive at the office

> Your clinic has safety precautions* in place:

1. **ISOLATE:** Isolate the patient in a room with a closed door upon arrival. If no exam room available, ask patient to wait outside or in car, and call/text them when room becomes available.
2. **PROVIDE MEDICAL MASK:** if the patient is wearing a non-medical mask, offer them a procedure mask or a non-fit-tested N95/KN95 respirator. Anyone accompanying them also needs a procedure mask or N95/KN95 respirator.
3. **EXAMINE:** Examine and assess the patient for COVID-19 symptoms and risk factors (e.g. exposure).
4. **TREAT:** Do not delay assessment and treatment of issues that have symptoms which overlap those of COVID-19 (e.g. COPD exacerbation, sinusitis).
5. **TEST (OPTIONAL):** If you have the capacity to test and if the patient meets the eligibility criteria, you may do so.**
6. **REFER:** Based on your clinical assessment, if indicated, refer the patient to the most appropriate place.
7. **REPORT:** Call your local public health unit to report the suspected case according to the case definition of a probable case.
8. **FOLLOW-UP:** Arrange follow-up for patients at high-risk of severe disease to monitor for deterioration.***

AND _____

> Your clinic does not have safety precautions in place:

1. **DIVERT** care as necessary, or if appropriate, defer visit.
2. **REPORT:** Call your local public health unit to report the suspected case according to the case definition of a probable case.
3. **FOLLOW-UP:** Arrange follow-up for patients at high-risk of severe disease to monitor for deterioration.***

Medical notes: Medical notes are NOT required for return to school, child care or the workplace. You may refer patients to the OMA COVID-19 attestation package.

* Safety precautions for the management of COVID-19 include access to PPE suitable for droplet/contact precautions (gown, gloves, fit-tested N95 respirator, eye protection) and appropriate cleaning procedures in place See OMA summary of PPE recommendations and Public Health Ontario's Best Practices for Environmental Cleaning for Prevention and Control of Infections.

** Primary care providers are not expected to conduct testing for COVID-19; however they may do so if prepared and have the capacity to conduct the test and send specimens to a lab providing COVID-19 testing.

***For a tool to help determine risk level, refer to the Ontario COVID-19 Science Advisory Table's clinical practice guideline summary.

Reference: COVID-19 Guidance: Primary Care Providers in a Community Setting