

COVID-19 Quick Reference for Primary Care Providers in Family Practice

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Objective: This quick reference provides guidance on ensuring the safety of patients, protection of providers, and reducing community spread of COVID-19.

When the Patient Phones your Practice

1. Screen by phone.
 - Ask patient if they have a fever $>38^{\circ}$ or feel feverish **OR** have a new onset or worsening cough **AND**
 - If they have traveled outside of Nova Scotia in the past 14 days **OR** have had close contact (within 2 meters) with
 - someone with confirmed COVID-19, **OR**
 - a person with fever or a new onset (or exacerbation of chronic) cough who travelled outside of Nova Scotia within 14 days prior to their illness onset.
2. **If no**, proceed with booking appointment (phone, in person, etc.) based on urgency and importance.
3. **If yes**, then ask the patient to self-isolate and:
 - Refer patient to call 811 **OR**
 - The primary care provider conducts follow-up call with patient if time and capacity exists. Reaffirm COVID-19 criteria and [fax referral form](#) to the nearest [assessment centre](#).

When the Patient Presents in your Practice

1. Where possible, maintain spatial separation of 2 meters.
 - Ask patient if they have a fever $>38^{\circ}$ or feel feverish **OR** have a new onset or worsening cough **AND**
 - If they have traveled outside of Nova Scotia in the past 14 days **OR** have had close contact (within 2 meters) with
 - someone with confirmed COVID-19, **OR**
 - a person with fever or a new onset (or exacerbation of chronic) cough who travelled outside of Nova Scotia within 14 days prior to their illness onset.
2. **If no**, proceed with appointment based on urgency and importance.
3. **If yes**, ask them to wash their hands. Provide patient with a mask (as available), and maintain spatial separation of 2 meter distance. Minimize contact. Confirm patient contact information and request patient return home and self-isolate.
4. Then either:
 - Refer patient to call 811 **OR**
 - The primary care provider conducts follow-up call with patient if time and capacity exist. Reaffirm COVID-19 criteria and [fax referral form](#) to the nearest [assessment centre](#).
5. Staff to follow area wipe-down procedure:
 - [NSHA Primary Health Care Infection Prevention and Control Guidance Document](#)
 - [CPSNS Standards and Guidelines – Infection Prevention and Control in the Physician’s Office](#)

When the Patient is with you for an Appointment

1. Ask patient **AGAIN**:
 - If they have a fever $>38^{\circ}$ or feel feverish **OR** have a new onset or worsening cough
AND
 - If they have traveled outside of Nova Scotia in the past 14 days **OR** have had close contact (within 2 meters) with
 - someone with confirmed COVID-19, **OR**
 - a person with fever or a new onset (or exacerbation of chronic) cough who travelled outside of Nova Scotia within 14 days prior to their illness onset.
2. Ask them to wash their hands. Provide patient with a mask (as available), and maintain spatial separation of 2 meter distance. Minimize contact. See note below if patient requires care.
3. Request patient return home and self-isolate.
4. Complete and [fax referral form](#) to the nearest [assessment centre](#).
5. Staff to follow area wipe-down procedure:
 - [NSHA Primary Health Care Infection Prevention and Control Guidance Document](#)
 - [CPSNS Standards and Guidelines – Infection Prevention and Control in the Physician’s Office](#)

Note: If you feel your patient needs direct care, please be mindful that this will require following IPAC guidelines (i.e. immediately place patient in a clinic room and initiate droplet and contact precautions. Provider to wear PPE including gloves, gowns, procedure/surgical mask and eye protection/face shield or mask with visor on entry to clinic room). If you are unable to meet those guidelines, we recommend you refer the patient to seek treatment at an alternate location.