

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. Schedule a virtual appointment, as appropriate.
2. If an in-person appointment is clinically warranted, ask patient if they have any of the following case definition symptoms:
 - a fever $>38^{\circ}$ Celsius or feel feverish
 - a new **or** worsening cough
 - a sore throat
 - a runny nose
 - a headache
 - a new **or** worsening shortness of breath
 - Optional: See note below about additional surveillance swabbing criteria.
3. **If yes to two** or more of the case definition symptoms, ask the patient to **self-isolate**:
 - Refer patient to call 811 **OR**
 - The primary care provider conducts a follow-up call with patient if time and capacity exists. Reaffirm COVID-19 criteria and [fax referral form](#) to the nearest [assessment centre](#).
4. **If no**, assess for the following screening risk factors:
 - **Has the patient tested positive for COVID-19 OR have a swab pending?**
 - Has the patient traveled outside of Atlantic Canada (NS, NB, PE, NL) within the past 14 days?
 - Has the patient been in close contact (within 2 meters) of a known or suspected case (symptomatic person) within the past 14 days (includes a person with symptoms who has travelled outside of Atlantic Canada in the past 14 days)?
 - Is it probable that the patient has symptoms/exposure that cannot be determined due to the physical and/or mental status of the patient?
5. **If yes** to any of the screening risk factors above, inform the patient to continue to **self-isolate** and provide a virtual care appointment.
6. **If no**, proceed with booking in-person appointment based on urgency and importance.
7. Ask the patient to complete the COVID-19 self-screen 24 to 48 hours before they arrive for their appointment. This is available online at [811.NovaScotia.ca](#).
 - Advise the patient that if they have any of the symptoms at that time, they should call 811 and notify the practice.
8. Advise the patient to wear a non-medical mask to the in-person appointment.

When the Patient Arrives at your Practice

1. Where possible, maintain spatial separation of 2 meters.
2. Ask the patient to sanitize / wash their hands upon arrival at the practice.
3. Provide the patient with a non-medical mask if they do not have one.
4. Ask patient if they have a:
 - fever >38° Celsius or feel feverish
 - new onset **or** worsening cough
 - sore throat
 - runny nose
 - headache
 - new **or** worsening shortness of breath
 - Optional: See note below about additional surveillance swabbing criteria.
5. **If yes to two** or more of the case definition symptoms, ask patient to wash their hands. Provide patient with a procedure / medical mask (as available), and maintain spatial separation of 2 meters. Minimize contact. Confirm patient contact information and request patient return home and **self-isolate**.
6. **If yes to one** or more of the case definition symptoms, either:
 - Refer patient to call 811 **OR**
 - The primary care provider conducts a follow-up call with patient if time and capacity exist. Reaffirm COVID-19 criteria and [fax referral form](#) to the nearest [assessment centre](#).
7. **If no**, assess for the following screening risk factors:
 - **Ask the patient if they have tested positive for COVID-19 OR have a swab pending.**
 - Has the patient traveled outside of Atlantic Canada (NS, NB, PE, NL) within the past 14 days?
 - Has the patient been in close contact (within 2 meters) of a known or suspected case (symptomatic person) within the past 14 days (includes a person with symptoms who has travelled outside of Atlantic Canada in the past 14 days)?
 - Is it probable that the patient has symptoms/exposure that cannot be determined due to the physical and/or mental status of the patient?
8. **If yes**, ask them to wash or sanitize their hands. Provide patient with a procedure / medical mask (as available), and maintain spatial separation of 2 meters. Minimize contact. Confirm patient contact information and request patient return home and **self-isolate**. See note below if patient requires in-person care. Otherwise, offer a virtual appointment.
9. 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](#)
10. **If no**, proceed with in-person appointment.

Note 1 – Additional surveillance swabbing criteria: Nova Scotia has [broadened symptom criteria for COVID-19 screening](#); these changes support expanded surveillance and case-finding for COVID-19 in Nova Scotia, particularly as public restrictions are changing in the province. In a low-prevalence population, most people who have one or more of the expanded list of symptoms are not infected. Currently, only health care providers working in an NSHA Primary Assessment Centre use these additional symptom criteria to screen patients. To support case-finding and surveillance, patients who have one or more of the additional symptom criteria have the option to call 811 to arrange for screening. Patients must consent to any procedure, including swabbing for COVID-19. There is no mandatory requirement for swabbing, and patients are free to decline. For more information, refer to:

- [FAQs COVID-19 Public Health Swabbing and NSHA COVID-19 Risk Assessment](#)

Note 2 – In-person care: If you feel your patient needs in-person care, and they have two or more of the case definition symptoms, 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). Refer to the [Point of Care Risk Assessment](#). If you are unable to meet those guidelines, we recommend you refer the patient to seek treatment at an alternate location.