



Pre-appointment Screening Script for Adult Oncology Patients

Instructions for staff: Follow the script and record the responses on the [COVID-19 Oncology Pre-Appointment Screen Documentation](#) or [COVID-19 Risk Assessment Form](#).

Guidelines:

- Contact all patients the day before their scheduled appointment.
- Please refer to Nova Scotia Health’s Guide to Leaving Phone Messages:
 - **Attention should be paid to any notes or directives on patient files** as to “do not leave a message”, “messages allowed”, etc.
 - **“This is a message for FIRST NAME OF PATIENT ONLY”**; do not include patient’s surname.
 - **“My name is FIRST NAME OF EMPLOYEE ONLY”**; do not include your surname.
 - **“I am calling about your/their appointment in NAME OF CITY”**.
 - **“Please call me back at your earliest convenience at the following number”**; PROVIDE YOUR DIRECT PHONE NUMBER IF AVAILABLE.
- Important not to use the words delay or cancel; use “reschedule” appointments.

Reference: [NSHA Staff Guidance on Visitor Restrictions during the COVID-19](#), updated July 6 2020.

Script for Initial Appointments

Good Morning/Afternoon (always use person's name)

I am calling from the Nova Scotia Health Cancer Care Program as I see you have an appointment with us tomorrow.

Our cancer clinics are taking steps to ensure that we are providing good care for you including minimizing your risk of being exposed to the COVID-19 virus. We would like to ask you a few questions before your appointment that will help us continue to minimize the risk for you, as well as other patients and staff.

Are you ready to go through some questions with me? Thank you.

(How have you been feeling recently?)

1. *Are you experiencing?*

- a fever? (above 38°C)*
- new or worsening cough?*
- new or worsening shortness of breath?*
- sore throat?*
- runny nose?*
- headache?*

2. *In the last two weeks, have you or anyone in your household been tested for COVID-19?*

If yes: What were the results? (positive, negative, pending)

3. *In the last two weeks, have you travelled outside Atlantic Canada (NS, NB, PE, NL)?*

4. *In the last two weeks, have you had close contact (within 6 feet or 2 metres) with someone who has tested positive for or has symptoms of COVID-19?*

If the patient answered **YES** to **ANY** of the above questions:

*Thank you for answering these questions. It is possible that we might have to reschedule your appointment or change it to a phone or video call instead of in person. I am going to let our team know and someone will get back to you right away. **END.***

CALL BACK: Continue with script below when calling the patient back with the clinical team's decision.

If **NO** to **ALL** patient questions, continue below.

*Thank you. We know this must be a very stressful time for you. To limit the risk of exposure and spread from the COVID-19 virus, you may bring only **one ADULT** support person with you to your **first** appointment. This helps us ensure that we can provide appropriate social and physical distancing between you and other patients in our waiting areas.*

5. Does the person you are planning to bring with you have:
- a fever? (above 38°C)
 - new or worsening cough?
 - new or worsening shortness of breath?
 - sore throat?
 - runny nose?
 - headache?
 - symptoms of any other contagious illness such as rash or loose stools?
 - are they generally feeling unwell?

If patient answers yes to **ANY** of these symptoms, go straight to script box below.

6. In the last two weeks, they been tested for COVID-19?
 If yes: What were the results? (positive, negative, pending)
7. In the last two weeks, have they travelled outside Atlantic Canada (NS, NB, PE, NL)?
8. In the last two weeks, have they had close contact (within 6 feet or 2 metres) with someone who has tested positive for or has symptoms of COVID-19?
9. Are they immunocompromised?

<p>If the patient answered YES to ANY of the support person questions:</p> <p><i>We ask that they stay home. Is there someone else you can bring with you instead?</i></p> <p>Repeat support person questions.</p> <p>If no other support person available, continue below.</p> <p>Continue below.</p>	<p>If NO to ALL support person questions, continue below.</p>
--	---

If you would like, we can work with you to have additional support persons join the appointment by phone or video. Please remember to bring your phone with you to your appointment if you'd like to do this.

Patients and support people are now required to wear a non-medical mask when in the hospital. We strongly encourage you to bring your own mask, but if you don't have one with you, one will be provided.

*We also ask that you arrive **at** your scheduled appointment time and not in advance. If we need to make any changes to your appointment, we will be in touch with you shortly. We realize that this is a concerning time for you and we really appreciate your patience and understanding as we work to put practices in place to protect you, our patients and staff. Thanks for taking the time to answer all of my questions!*

We are committed to you and your care during this challenging time.

Script for All Other Appointments

Good Morning/Afternoon (always use person's name)

I am calling from the Nova Scotia Health Cancer Care Program as I see you have an appointment with us tomorrow.

Our cancer clinics are taking steps to ensure that we are providing good care for you including minimizing your risk of being exposed to the COVID-19 virus. We would like to ask you a few questions before your appointment that will help us continue to minimize the risk for you, as well as other patients and staff.

Are you ready to go through some questions with me? Thank you.

(How have you been feeling recently?)

1. *Are you experiencing?*

- a fever? (above 38°C)*
- new or worsening cough?*
- new or worsening shortness of breath?*
- sore throat?*
- runny nose?*
- headache?*

2. *In the last two weeks, have you or anyone in your household been tested for COVID-19?*

If yes: What were the results? (positive, negative, pending)

3. *In the last two weeks, have you travelled outside Atlantic Canada (NS, NB, PE, NL)?*

4. *In the last two weeks, have you had close contact (within 6 feet or 2 metres) with someone who has tested positive for or has symptoms of COVID-19?*

If the patient answered **YES** to **ANY** of the questions above:

*Thank you for answering these questions. It is possible that we might have to reschedule your appointment or change it to a phone or video call instead of in person. I am going to let our team know and someone will get back to you right away. **END.***

CALL BACK: Continue with script below when calling the patient back with the clinical team's decision.

If **NO** to **ALL** patient questions, continue below.

*Thank you. We know this must be a very stressful time for you. To limit the risk of exposure and spread from the COVID-19 virus, we are asking you to come **alone** without any support person. This helps us ensure that we can provide appropriate social and physical distancing between you and other patients in our waiting areas.*

Do you have any concerns about this?

***Staff Note:** Exceptions to allow one support person per patient may be permitted in consultation with the care team (i.e. unique physical, emotional or cognitive complexity impacting ability to attend alone). All support persons should be asked questions 5, 6, 7, 8 and 9 on the Script for Initial Appointments.

If you would like, we can work with you to have your support person join the appointment by phone or video. Please remember to bring your phone with you to your appointment if this is something you'd like to do.

Patients are now required to wear a non-medical mask when in the hospital. We strongly encourage you to bring your own mask, but if you don't have one with you, one will be provided.

*We also ask that you arrive **at** your scheduled appointment time and not in advance. If we need to make any changes to your appointment, we will be in touch with you shortly. We realize that this is a concerning time for you and we really appreciate your patience and understanding as we work to put practices in place to protect our patients and staff. Thanks for taking the time to answer all of my questions!*

We are committed to you and your care during this challenging time.