

March 5, 2020

COVID-19 Preparation for Medical Offices

COVID-19 (Novel Coronavirus) has been in the news media since January while concerns rise with person to person spread in several states. NJ is included in the list of states that have confirmed cases of the virus. Both the [Centers for Disease Control](#) (CDC) and the [NJ Department of Health](#) (NJDOH) have indicated that at this time, most people in the United States will have little immediate risk of exposure to this virus. People in communities where ongoing community spread has been reported are at elevated, though still relatively low risk of exposures. However, healthcare professionals can be at higher risk because of potential exposure and close contact with vulnerable individuals. The CDC has developed [healthcare personnel risk exposure categories](#), so you may want to check the risk category for you and your staff. In addition, the NJDOH has issued a "[Healthcare Professional Preparedness Checklist For Transport and Arrival of Patients With Confirmed or Possible COVID-19](#)." It is suggested that all medical practices become familiar with this document. The NJDOH also has a [COVID-2019 Community Education Training Webinar](#) available to view.

Conventus has received questions from our member community about COVID-19. Governmental agency recommendations are continually changing as the situation evolves. The best sources to obtain up-to-date information are at:

- <https://www.cdc.gov/coronavirus/2019-ncov/index.html> (CDC); and
- <https://www.nj.gov/health/cd/topics/ncov.shtml> (NJDOH).

In addition, providers must be cognizant of the demographics and communities in which they practice to guide their medical and business decisions. In response to the most common questions asked by the Conventus membership, below is a summary of key information to protect your patients and your practice.

Recommendations:

Medical Supplies and Contingency Planning

- Some physician offices are experiencing difficulty in obtaining basic items from their medical product suppliers and/or commercial stores, such as hand sanitizers, gloves, masks, gowns, and cleaning and disinfectant agents. You should have a back-up plan in case your supplier cannot provide the necessary equipment for your office.
- At this time, hand sanitizers and some types of masks are available in limited supply from other distributors, such as Amazon, if your regular supplier is unable to fulfill your order.
- Use at least 60-95% alcohol-based hand sanitizers (ABHS).

Office Cleaning and Environmental Infection Control

- Contact your practice's cleaning company to inquire which cleaning agents are being used in your office. Also, check your office's stock of cleaners.
- The CDC recommends using:
 1. Routine cleaning and disinfection procedures. This means using cleaners and water to pre-clean surfaces prior to applying an **EPA-registered, hospital grade disinfectant** to frequently touched surfaces or objects for appropriate contact times as indicated on the product's label. This includes patient care areas in which aerosol-generating procedures are performed.
 2. **Products with EPA-approved emerging viral pathogen claims for use against COVID-19.** These products are identified with the following claim: "[Product name] has demonstrated effectiveness against viruses similar to COVID-19 on hard non-porous surfaces. Therefore, this product can be used against COVID-19 when used in accordance with the directions for use against [name of supporting virus] on hard, non-porous surfaces."

Office Cleaning and Environmental Infection Control (Cont'd)

3. If there are no available EPA-registered products that have an approved emerging viral pathogen claim for COVID-19, products with label claims against human coronaviruses should be used according to label instructions.
 - [Click here](#) for a list of “EPA-registered Antimicrobial Products for Use Against Novel Coronavirus SARS-CoV-2,” the Cause of COVID-19,” or go to: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>
 - Make sure staff wear Personnel Protective Equipment (PPE) while cleaning. The CDC has provided Guidelines on [Environmental Infection Control](#). In addition, personnel who enter a room of Persons Under Investigation (PUI) should use respiratory protection.

Criteria for Evaluating and Reporting PUI

- The CDC has revised its criteria for “[Evaluating and Reporting Persons Under Investigation](#)”. The guidelines now indicate that “clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Decisions should be based on local epidemiology of COVID-19, as well as the clinical course of illness. Most patients with confirmed COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g. cough, difficulty breathing). Providers are encouraged to test for other causes of respiratory illness, including infections such as influenza.”
- Epidemiologic factors may help guide decisions on whether to test, which can include: any persons, including healthcare workers, who have had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset, or a history of travel from affected geographic areas within 14 days of symptom onset.
- Keep checking the [CDC website](#) because evaluation criteria for PUI have been changing and may do so again.

NJ Reporting for PUI

- PUI cases should be reported IMMEDIATELY to the local health department (LHD) where the patient resides. If the patient residence is unknown, report to your own LDH. Contact information for LDHs can be found at: www.localhealth.nj.gov. LDHs are available 24/7/365. If LHD personnel are unavailable, healthcare providers should report the case to NJDOH, Communicable Disease Service (CDS) at (609) 826-5964, Monday through Friday 8:00 AM - 5:00 PM. On weekends, evenings and holidays, CDS can be reached at (609) 392-2020.

Minimize Chances for Exposures

- The CDC has provided “[Interim Infection Prevention and Control Recommendations](#)” in Healthcare Settings. Please keep checking the CDC website for any updates because guidelines and recommendations may change.
- Educate your staff on the possible [symptoms](#) of COVID-19 so they can assist in patient triage.
- When scheduling appointments, ask patients if they, or the person accompanying them is experiencing any signs or symptoms of respiratory infection (e.g. cough, runny nose, fever). If they are, recommend that they wear a facemask when they come into the office.
- Provide facemasks, hand sanitizers and tissues in waiting and exam rooms. Receptacle for tissues, masks, and other products should be “no touch,” if possible.
- Place “Cover Your Cough” and other respiratory, cough etiquette and hand hygiene posters in your office. COVID-19 [prevention](#) and [symptoms](#) posters are available from the [CDC](#). In addition, the NJDOH has an “[Ask for a Mask](#)” poster in several languages. These should be placed in strategic places in your office (e.g. entrances, waiting and exam rooms, rest rooms, etc.) to provide patients with proper information and reminders about respiratory hygiene.
- Upon arrival, take precautions to ensure all patients with symptoms of suspected COVID-19 or other respiratory infections (e.g. cough, fever) take the proper precautions by wearing a mask. Have staff immediately identify patients with symptoms of suspected COVID-19.
- Do not allow patients with symptoms of suspected COVID-19 or other respiratory infections (e.g. fever, cough) to wait among other patients seeking care.
 1. Identify and separate these patients in a well-ventilated space that allows patients to be separated by 6 or more feet. In some settings, medically stable patients might opt to wait in a personal vehicle or outside the office where they can be contacted by mobile phone when it is their turn to be evaluated.

Minimize Chances for Exposures (cont'd)

2. CDC recommends placing patients with known or suspected COVID-19 in an Airborne Infection Isolation Room (AIIR). AIIRs are single patient rooms at negative pressure with a minimum of 6 air changes/hour.
 - Most physician offices do not have negative air pressure rooms. A spare room with a negative exhaust fan (e.g. bathroom) may be an option instead of a regular exam room.
 3. Minimize the patient's contact with staff, who should be wearing PPE.
- If you advise the patient to go to the hospital and/or local emergency room, call ahead and let them know the patient has been referred to their facility.

Adherence to Standard, Contact, and Airborne Precautions, Including the Use of Eye Protection

It is recommended that practices use Standard Precautions and assume that every person is potentially infected with a pathogen that could be transmitted and use PPE as a precaution. See the [CDC Interim Guidance](#) document for further details on PPE. Some highlights are:

- Attention should be paid to properly donning, using, doffing and disposing of any PPE.
- Hand hygiene should be performed using ABHS before and after all patient contact, and before putting on and upon removal of PPE, including gloves. Washing with soap and water for at least 20 seconds can also be used. If hands are visibly soiled, use soap and water before returning to ABHS.
- Gloves, gowns, and respiratory and eye protection should be available. The CDC recommends fit-tested (National Institute for Occupational Safety and Health) NIOSH-certified disposable N95 facepiece respirator before entry into a patient care area of a suspected PUI.
- Train and educate staff on infection control, including refresher training on standard, contact and airborne precautions.

Monitor and Manage Ill and Exposed Healthcare Personnel

Movement and monitoring decisions for healthcare professionals with exposure to COVID-19 should be made in consultation with local health departments and the NJDOH. Refer to the CDC's "[Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 \(COVID-19\)](#)."

Conventus members can contact the Practice Resources Department with any questions at: 877-444-0484, x7466. In addition, the NJDOH has a 24-hour public hotline at 1-800-222-1222.

For more information please contact us at:

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