

travel/contact history. At this point, COVID swab collections are to an applicable lab for actual testing. Results now take up to 7 days. Actual COVID testing not yet available at the clinic or even hospitals.

**** Situation changes daily – Refer to this official communication before making any changes otherwise ****

Questions or Input – to Cayden, ext 3826

3-25-20 change summary:

1. Many doing Telehealth now. Strongly encouraged where applicable. Website shows who is so that patients know they can schedule for it.
2. Medical staff - strongly encouraged to use masks and gloves with any patient that may be contagious in any form. Always good to have an extra layer of protection.
3. Reception – if not done already, please re-arrange waiting room chairs to allow patients to sit 6 feet apart. Place extra chairs out of the way in whatever fashion you see best. Call Facilities if need help.
4. See attached communication from Davis Hospital on “Minimizing Risk to Your Loved Ones.”
5. Creative scheduling – in areas where possible and work demands are still present, consider splitting staff and staggering shifts to different times of day or days of week in order to minimize exposure.

3-23-20 change summary:

1. Contagion Exposure Risk template – see attached for a template that helps document Patient Contagion Exposure Risk.
2. Phone triage – we will soon begin involving MDs/APCs on certain COVID-symptom triage calls for enhanced patient assessment. Complexity of screening for best patient servicing suggests such. FP department will put schedule together on who is covering the line. Walk-in patients who display symptoms will continue to be sent back to their cars to call hotline for phone triage.
3. Provider schedule changes – per the Friday update, and on their own, we are beginning to see providers and departments of providers make schedule changes to accommodate both sick and well patients via telehealth visits or on-site visits as the case demands. Specialists – please be sure to stay contactable for the primary care providers who will still need to consult with you on their patients. A communication on practice reductions/closures will be forthcoming. This will be kept as up-do-date as possible.
4. Telemedicine – tomorrow there will be sent to providers a communication detailing Telemedicine options and instructions for getting started. Providers are asked to respond today to survey link sent out today on Telemedicine desires and needs.
5. Patient/staff safety – short of government or clinic mandated closures, providers are asked to please consider the safety and well-being of patients and staff in how/if you continue to see patients.
6. Employee health –just as we triage patients entering our buildings, staff should be upfront with their