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# **Presentation of COVID-19 in the Primary Care Setting**

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- First Case in Tennessee- March 5, 2020 in Williamson County
- First Case in Memphis- March 8, 2020
- March 24, 2020- Safer at home order Shelby County

In Office-Front desk initiated pre-screening questions:

- Do you have a fever, cough, or difficulty breathing?
- Did you travel out of the country within 14 days before your symptoms began?
- Have come in contact with someone who could have Coronavirus?

If Yes to All questions:

- Mild symptoms: Surgical Mask given and phone number obtained and patient was asked to wait in the car for further instructions.
- Critical symptoms such as noticeable SOB, Reported Fever > 103, Unable to Eat or stay hydrated. Surgical Mask given and Patient placed in an isolation room and 911 contacted for transport to ER. Once patient enters room, room cannot be in circulation for 2 hours.

If Yes to Symptom Questions but no travel:

- Patient asked to wear a mask for the duration of the clinic visit

If No to All Questions:

- Normal clinic process followed

Telephone initiated pre-screening questions:

- Do you have a fever, cough, or difficulty breathing?
- Did you travel out of the country within 14 days before your symptoms began?
- Have come in contact with someone who could have Coronavirus?

If Yes to All questions:

- Mild symptoms: Gather phone number and ask patient to remain or enter self quarantine. Clinical guidance from health dept will be obtained and patient will receive further next steps.
- Critical symptoms such as noticeable SOB, Reported Fever > 103, Unable to Eat or stay hydrated. EMS contacted for patient transport to nearest hospital

If Yes to Symptom Questions but no travel:

- Schedule appointment for office visit. Instruct patient to pick up surgical mask upon arrival to clinic

If No to All Questions:

- Normal clinic process followed

- Computers to be wiped down at the start and end of day
- Wipe down of work surfaces throughout the day
- Maintain Social Distancing
  - Waiting room seating taped off and chairs removed
  - Tables added in front of check in desk
  - Staff seating/work areas re arranged
- Facemasks required
- Telehealth Visits instituted.
  - Zoom first used then transitioned to Doxy.me platform
  - Clinic rooms converted to telehealth rooms
- Well visits will be scheduled in the morning
- Sick/Acute Care visits will be scheduled in the afternoon.
  - In person clinic visits scaled back as telehealth visits increased



- All patients are screened when calling to make an appointment by triage staff
  - If suspected positive, virtual office visit is scheduled if mild or moderate symptoms
  - If suspected positive and patient is experiencing critical symptoms, patient is instructed to go directly to the nearest ER for evaluation and treatment.
  - If negative screening, patient is offered an office or virtual appointment
- All patients are screened again using the same screening questions and their temperature is taken prior to entering the clinic
- Once in the clinic, vital signs are taken including BP/Pulse/Respirations and Pulse Oximetry on room air

## High Risk Patient Groups:

- Age > 65
- Long-term care facility resident
- Immunocompromised state- post transplantation, HIV, on immunosuppressant medications
- Chronic Conditions: COPD, CV Disease, Diabetes, Chronic Kidney Disease
- Cancer
- Obesity
- Tobacco Use
- Pregnancy

## Most Common Symptoms:

- Fever 100 or >
- Cough
- Shortness of breath
- Muscle/Body aches
- Fatigue
- Headache
- Loss of taste/smell
- Sore throat
- Congestion
- Nausea/Vomiting/Diarrhea
- Rash

## Clinical Decision Making:

- If patient is not having acute distress and pulse ox is 90% or > on room air, they may be discharged home with the following instructions:
  - COVID 19 testing at Tiger Lane immediately after clinic appointment.  
( Appointment is made prior to patient leaving clinic)
  - Self quarantine until test results are back
  - Treatment plan that may include
    - Antibiotics,
    - Antipyretic therapy,
    - Mucolytics,
    - Inhalers
    - Rest

## Clinical Decision Making:

- If patient has any of the following symptoms, EMS is notified for transport to nearest ER:
  - Acute distress
  - Noticeable SOB
  - Pulse Ox < 90% on room air
  - Fever >103
  - Unable to eat or stay hydrated

## Post Infection Follow- Up:

- Home Management
  - Telehealth visits at 4,7, 10 days post treatment
  - Monitor for worsening of symptoms
    - Increase SOB
    - Fever
    - Inability to maintain hydration
    - If symptoms worsen, pt should go to the nearest ER for evaluation
- If hospitalized
  - Telehealth visit or clinic visit in 1-2 days post discharge
  - Monitor for return/worsening of symptoms

## Post Infection Follow- Up:

- If Hospitalization required:
  - Telehealth or in person clinic visit 1-2 days post discharge
  - Monitor for worsening of symptoms
    - Increase SOB
    - Fever
    - Inability to maintain hydration
    - If symptoms worsen, refer to the nearest ER for evaluation
  - If diagnosed with pneumonia, will need follow up diagnostic tests-
    - CXR/CT Scan/Pulmonary Function Tests
- CBC, CMP

## Center for Disease Control

- <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

## National Institute of Health

- <https://www.nih.gov/coronavirus>

## UTHSC Coronavirus Disease Information and Resources

- <https://www.uthsc.edu/coronavirus/index.php>

## Tennessee Department of Health

- <https://www.tn.gov/health/cedep/ncov.html>

## COVID 19 Resource Center, Shelby County Health Department

- <https://insight.livestories.com/s/v2/covid-19-resource-center-%7C-shelby-county-tn/f8b36caa-950f-43b0-99bb-4ce4b39bbb41>



# Questions?

