Provider Strategies to Limit the Risk of Contracting COVID-19 from Patients

April 15, 2020

The safety of our patients and medical staff is our highest priority. MercyOne ELT and the COVID-19 Incident Command Team make the following recommendations to limit the risk to our medical staff of contracting COVID-19 from our patients.

Recommendations and Rationale

In an effort to limit exposure of our medical staff to the Coronavirus, we recommend the following strategies when caring for Inpatient COVID-19 patients and Patients Under Investigation (PUI).

- Rounding providers and consultants do NOT need to auscultate the chest and abdomen unless you feel strongly that it will change your medical management.
  - We believe that disposable stethoscopes are fomites that could potentially increase the risk of infection. When possible, use vital signs, respiratory effort, chest X-ray and other non-auscultative means to assess the patient’s respiratory status.

- If a provider does examine the patient, the exam findings may be shared by other providers.
  - If you use an exam performed by another provider, document that an exam was done by someone other than yourself in your notes.

- Order continuous telemetry, instead of an EKG if the patient is on medications that prolong the QT interval.
  - This decreases the number of times an EKG technician needs to go into the room, decreasing their exposure and saving PPE.
  - Order a baseline ECG prior to initiation of hydroxychloroquine and any other QT prolonging drugs, and telemetry thereafter.

- Consider a pre-examination phone call to the patient prior to entering the patient’s room.
  - Speaking to the patient over the phone prior to the physical exam limits the time spent in the room and reduces the risk of contracting COVID-19.

- If your medical group is able, please attempt to have separate providers caring for COVID-19 and non-COVID-19 patients.
  - We believe this may help reduce the risk of transmission to other patients and colleagues. It also reduces the number of individuals exposed to infected patients.

We continue to evaluate other processes and techniques to protect our colleagues and medical staff. We appreciate your unwavering commitment to care for the sick in our community and your dedication to providing safe, compassionate care.