

OAND Answers to Frequently Asked Questions

1. Who's in charge?

Since health care is regulated provincially, the Province and specifically the Ministry of Health & Long-Term Care is in charge of anything related to COVID-19 and your practice. In some cases, there will also be mandates from the Provincial Chief Medical Officer of Health, Dr. David Williams. There can be federal and municipal mandates related to public activities, but not your practice per se.

2. What does IPAC and PPE mean in the Ministry material I've seen?

IPAC is Infection Prevention and Control procedures, and they include PPE (Personal Protective Equipment) like surgical masks, gloves, isolation gowns, eye protection, etc.

3. When are these procedures/equipment necessary?

Personal Protective Equipment are only needed when seeing patients who are "Probable" or "Confirmed" cases. Specifically, if you're "Providing direct care to patients with suspect or confirmed COVID-19."

4. What is a Probable (or Suspected) Case of COVID-19?

Probable (current definition on March 13):

- Fever over 38 degrees AND
- Travel to an impacted area, <u>or</u> close contact with a confirmed or probable case, <u>or</u> close contact with someone with acute respiratory illness, who has been to an impacted area. <u>Confirmed</u> cases are Lab test confirmed.

5. Can I see patients who are suspected cases of COVID-19?

In short, No.

COVID-19 is out of NDs' scope of practice to treat, and it is a mandatory referral (to Public Health). It is also in your best interest to make sure that your patients know that, so that you can protect other patients in the clinic, your staff and yourself from exposure.

6. How can I screen out suspected COVID-19 Patients from coming in?

The MOHLTC says "All primary care settings should undertake active screening (asking questions) and passive screening (signage) of patients for COVID-19" and that they should have "plans for referral". That means, if you screen them when they make an appointment - by phone or online (Do they have an influenza like illness, fever, etc. - see #4 above), then you can refer suspected cases to their Local Public Health Department (see contact list HERE) and get them to contact Telehealth Ontario. If you focus on avoiding face-to-face appointments with anyone who has a cough, cold, or flu-like illness in general, that would be more protective.

7. What about focusing on Naturopathic Telemedicine for the next while?

If you can do this, it's a great idea. Keeping people physically apart to slow infection rates is what Public Health is trying to do. They call it flattening the infection curve, and where we can help we must. See CONO guidance on Telemedicine HERE

8. Which Infection and Prevention & Control procedures are necessary then for NDs?

Enhanced clinic cleaning/disinfecting protocols and hand hygiene are obvious, but because you are not providing care to suspected or confirmed cases, masks, etc. are not currently required. They are also very hard to get now, and the Ministry is not distributing/supplying personal protective equipment supplies at this time.

9. Is COVID-19 "airborne"?

The evidence shows that COVID-19 transmits via Droplets & Contact. If you walk through someone's cough or sneeze cloud, then the droplets may be in the air, but there is no evidence that this virus is airborne. Droplet/Surface precautions are what you have to focus on, i.e., cleaning surfaces, practicing hand hygiene and avoiding touching your face. (Note: you may have heard recently about N95 masks/respirators. They are for airborne pathogens, not droplet infections.)

10. What if I end up with a patient sitting in my office coughing and I suspect that they are infected?

You should do your utmost to avoid that. Screening appointments is important, but as a last resort you may want to put signs outside your office door (as many other providers are doing). It can be as simple as the following, or you can customize it:

Attention Patients

At this time of heightened public health concern, and in the interest of protecting the health of all patients, please read this notice.

If you have a fever and/or a new cough or difficulty breathing

<u>AND</u>

In the 14 days before your symptoms began, you have:

- been to a COVID-19 impacted area, or
- you have been in close contact with a confirmed or probable case of COVID-19, or
- you have been in close contact with a person with acute respiratory illness who has been to a COVID-19 impacted area,

Then, please call Telehealth Ontario at 1-866-797-0000