

To: MGPS Trinity Health Of New England
From: Regional Chief Clinical Officer – Dr. Syed Hussain
Date: 03/13/2020
Re: Coronavirus (COVID-19) Recommendations Regarding at Risk Person.

BACKGROUND:

We are presently in the midst of a public health crisis, with the unprecedented impact of a pandemic on our health care system, and on our societal and economic structures. Those on the front lines of health care delivery must now mobilize and at least temporarily alter the way we interact with patients to ensure they receive optimal assessment and care in the safest environment. Equally we need to ensure that we and our support staff can deliver high quality care while remaining safe.

Because COVID 19 is a novel virus in the United States, there is essentially no baseline immunity. The COVID 19 virus is capable of spreading easily from person to person. We are now in the phase of mitigating impact on communities by limiting community transmission to the greatest extent possible.

There is a risk of being exposed to the COVID 19 virus and getting sick. There is a risk of getting very sick and dying from infection with this virus. From reports out of China (>70,000 infected), roughly 80% of cases were mild and patients fully recovered and 15-20% had serious illness. Beginning @age 60 there is an increased risk of serious illness, with risk further increasing with age and highest risk for those greater than 80 years of age. Those persons with serious underlying conditions-chronic or acute- are also at risk for severe illness. Therefore, persons older and with serious long term conditions are at the greatest risk of severe illness and death.

RECOMMENDATIONS:

- Review all appointment schedules and, if possible and prudent, defer and reschedule routine follow-up visits for elderly patients, particularly those with serious comorbidities.
- Similarly, if possible and prudent, defer and reschedule routine follow-up appointments for younger patients with serious underlying medical conditions.
- To avoid risk of decompensation of underlying illness and/or decline of these patients, telephonic outreach should be utilized to ensure their stability and that they have adequate supplies and medications. Telehealth can be utilized for this purpose for practices that have it in place.
- If these patients report any symptoms suggestive of flu-like illness, they should then be immediately triaged as per protocol. Trinity Health At Home, with its Home Care Connect tele-monitoring can be a resource to assist practices with ongoing triage and home health care needs.