

DERMATOLOGY CONSULTATION

A. GENERAL CONSIDERATIONS

1. Consider re-opening your clinic to see both urgent and elective cases if the community COVID-19 assessment risk in your area is low (Refer to Section I. Fig. 1).
2. Upon doing so, open your clinic in stages and decrease your clinic hours and number of patients seen per day.
3. Practitioners who fit the high risk criteria of being age 60 or older, immunocompromised, or pregnant, should refrain from evaluating patients.¹

B. PATIENT COMMUNICATIONS AND SCREENING¹⁻⁵

1. Setting Appointments

- 1.1. Decide which patients should be accommodated through teledermatology or in person.
- 1.2. Practice a strict by-appointment system.
- 1.3. Schedule one (1) patient for each specific time slot.
The recommended time allotment is one (1) hour for each patient to allot time for proper disinfection.
- 1.4. Inform patients that you are taking precautionary measures for the safety of both the patients and the clinic staff. Instruct your patients that when going to your clinic, they have to:²
 - 1.4.1. Wear a face mask.
 - 1.4.2. Limit the use of jewelry and other accessories.
 - 1.4.3. If possible, come alone. Only pediatric patients, and those who are disabled, or require assistance, are allowed to bring a companion.

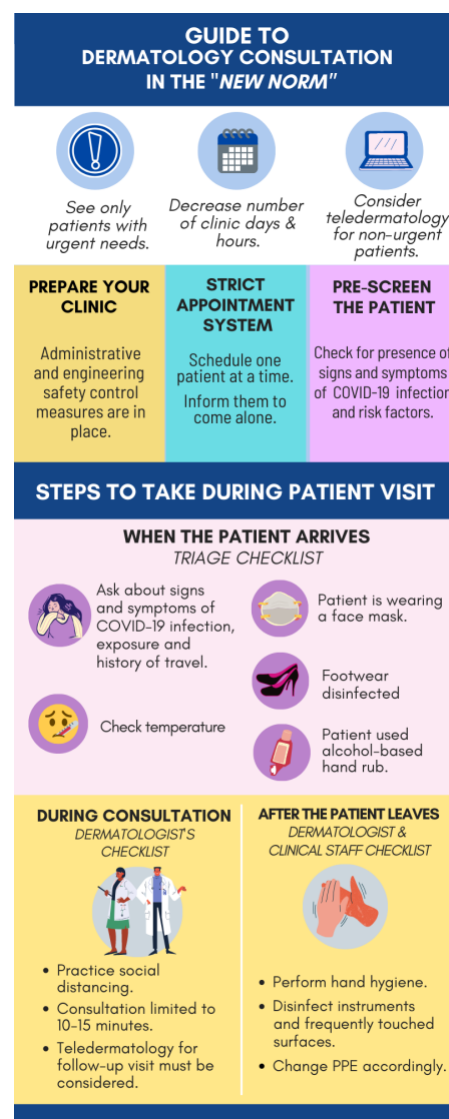
2. Pre-Consultation Screening

- 2.1. Prior to the appointment or the day before, screen the patients and assess if they could be seen in your clinic. Ask the patient for signs and symptoms of COVID-19 virus infection, exposure to somebody with COVID-19 infection, and history of travel.
- 2.2. Consider having patients fill out a health declaration form, pursuant to Republic act No. 1332, on the mandatory reporting of notifiable disease of public health concern (See Appendix VI).
- 2.3. If the patient has symptoms or possible exposures, re-schedule the visit, resort to telemedicine, and/or instruct the patient to see an internist.

C. CLINIC STANDARD OPERATING PROCEDURES⁵⁻⁸

1. Before the Patient Arrives

- 1.1. Make sure that the clinic staff is wearing appropriate PPE.
- 1.2. Ensure proper ventilation in the clinic.



GUIDE TO DERMATOLOGY CONSULTATION IN THE "NEW NORM"

PREPARE YOUR CLINIC
Administrative and engineering safety control measures are in place.

STRICT APPOINTMENT SYSTEM
Schedule one patient at a time. Inform them to come alone.

PRE-SCREEN THE PATIENT
Check for presence of signs and symptoms of COVID-19 infection and risk factors.

STEPS TO TAKE DURING PATIENT VISIT

WHEN THE PATIENT ARRIVES TRIAGE CHECKLIST

- Ask about signs and symptoms of COVID-19 infection, exposure and history of travel.
- Check temperature
- Patient is wearing a face mask.
- Footwear disinfected
- Patient used alcohol-based hand rub.

DURING CONSULTATION DERMATOLOGISTS CHECKLIST

- Practice social distancing.
- Consultation limited to 10-15 minutes.
- Teledermatology for follow-up visit must be considered.

AFTER THE PATIENT LEAVES DERMATOLOGIST & CLINICAL STAFF CHECKLIST

- Perform hand hygiene.
- Disinfect instruments and frequently touched surfaces.
- Change PPE accordingly.

2. When the Patient Arrives

A clinic staff (triage) at the entrance or reception should do the following:

- 2.1. Screen the patient for exposure risks and signs and symptoms of COVID-19 infection.
- 2.2. Check the temperature of the patient.
- 2.3. Ensure the patient is wearing a face mask.
- 2.4. Ask the patient to sanitize his/her footwear by using a disinfectant mat, if available.
- 2.5. Ensure that wheelchairs and other prostheses are wiped with a disinfectant prior to entry.
- 2.6. Ask the patient to use alcohol-based hand rub.
- 2.7. When greeting patients, do not hug nor shake the patient's hand.

3. During Consultation and Interacting with Patients

- 3.1. Limit face to face consultations to 10-15 minutes.
- 3.2. Maintain a distance of six (6) feet from the patient.
- 3.3. Avoid touching the patient unless absolutely necessary.
- 3.4. Consider telemedicine for follow-up consults.

4. After the Patient Leaves

- 4.1. Clean instruments that were used on the patient, e.g., dermatoscope, with 60-70% ethyl or isopropyl alcohol.
- 4.2. Clean frequently touched surfaces with EPA-registered disinfectants between each patient visit
 - 4.2.1. Use 60-70% isopropyl or ethyl alcohol to disinfect small areas including doorknobs, light switches.
 - 4.2.2. Use 0.5% sodium hypochlorite for disinfecting large surfaces (e.g., table and countertops, chairs, examining beds, and restroom).
- 4.3. Empty trash bins and place the trash in properly designated colored bags for disposal. Clean and disinfect the trash bin.

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