

SPECIAL CONSIDERATIONS IN CHILDREN

A. PRE-CONSULT EVALUATION

1. Telemedicine and other non-direct care have been recommended as initial approaches, when appropriate.^{1,2,3}
2. For patients who require a face-to-face assessment, a pre-consult evaluation via telephone should be done to gather necessary information prior to actual consultation.³ The following information may help in your assessment:
 - 2.1. Chief complaint
 - 2.2. Any history of recent travel within the last 14 days to areas with localized transmission or local communities under enhanced quarantine. Check Department of Health updates to confirm if the child's community is classified as such.⁴
 - 2.3. Any history of close contact with sick individuals or suspect, probable, or positive COVID-19 patients whether from home or during travel.⁴
 - 2.4. Checklist of signs and symptoms related to COVID-19.^{4,5}
 - 2.4.1. Fever defined as an axillary temperature of 38°C and above
 - 2.4.2. Cough
 - 2.4.3. Sore throat
 - 2.4.4. Difficulty breathing
 - 2.4.5. Other symptoms which may warrant close observation, such as: rhinorrhea, diarrhea, vomiting, abdominal pain, fatigue, headache, rashes, myalgia
3. If exposure evaluation and/or clinical features are positive, the patient is advised to seek consult with a pediatrician for further evaluation.⁴
4. Once a patient is deemed well, and necessitates face-to-face outpatient consultation, instructions regarding caregiver precautions and personal protection must be emphasized prior to the visit.

B. CAREGIVER PRECAUTIONS^{4,6}

1. Limit one (1) caregiver per patient (exceptions may be applied to difficult-to-manage children).
2. Ideally, the caregiver must be of good health, non-elderly, and with no underlying comorbidities or immunocompromising conditions, to avoid undue risk.

C. USE OF PERSONAL PROTECTIVE EQUIPMENT

1. Children must wear a face mask when they are inside the clinic.^{3,4,7} Exceptions to this rule are the following:^{4,7}
 - 1.1. Children younger than two (2) years old, due to the risk of suffocation.
 - 1.2. Children who experience difficulty of breathing when wearing a face mask.
 - 1.3. Children with cognitive or respiratory impairment giving them a difficult time tolerating the mask.
 - 1.4. When the mask on hand poses as a choking or strangulation hazard.
 - 1.5. When wearing a mask causes the child to touch his/her face more frequently.
2. The caregiver must wear a face mask at all times inside the clinic.⁴
3. Ensure that the child wears the right size of mask for the child's face and be sure to adjust it for a secure fit. The child's mask should securely cover the nose and mouth.^{4,7}
4. N-95 masks are not routinely recommended for children to use and should be reserved for children who are considered at high-risk or severely immunocompromised.^{4,7}
5. Newborns should **not** wear face shields or face coverings.⁸
6. Instruct patients and caregivers to avoid touching their masks. Replace the mask once wet or dirty with secretions, **without** touching the front.^{3,7}

7. Some ideas to help make wearing of masks seem less scary to children are: decorating masks so they are more personalized and fun, putting masks on their favorite stuffed toys or drawing masks on their favorite book character. Explain to children the reason why masks are important for protection.^{4,7}

D. OTHER INSTRUCTIONS

1. Limit the total duration of face to face consultations. Do not schedule too many patients in one clinic day to avoid crowding and try to delay return visits for stable patients^{6,9} Proactively minimize the need for in person follow up visits.²
2. If your office has toys, reading materials, or other communal objects, remove them. Instruct patients and caregivers to avoid touching furniture, equipment and clinic supplies.^{2,10}
3. Children must be instructed to cover their mouths and noses during coughing or sneezing using a tissue, the inner part of the elbow or sleeves, followed by hand hygiene.^{4,10}
4. Instruct children with skin conditions associated with dry skin to use a fragrance-free cream or ointment-based moisturizer after handwashing or after using alcohol-based hand sanitizer.¹⁰
5. Always observe strict infection control measures in your clinic (See Section II.C).^{3,4}



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