TEI Operating Procedures During the COVID-19 Public Health Emergency Phase I – Emergency Patients Only

Schedule:

- Reduced operating hours to minimize exposure times for the staff:
 - All services provided by appointment only, Monday Friday, 9-12, with appointments scheduled 30 minutes apart.
 - Emergency patients must be telephonically triaged following normal off-hours ER call protocol and appointed (no walk ins) for a deferred time the next business day.
 Patients who require immediate attention should be referred to the appropriate physician or eye hospital.
 - Resident on Call (ROC) can appoint the patient, or send a clinical task to the manager group to appoint.

Staffing:

- 2 PSRs to conduct screening at the entrances (one at each entrance).
- 1 PSR to check in patients and open an encounter.
- 2 providers (resident and supporting faculty member) doing telephone triage and seeing appointed patients.
- 1 administrative manager/supervisor.
- 2 Security Officers (one at each entrance).
- 1 Housekeeper.

Services to be provided:

• Emergent issues only, telephonically triaged in advance, requiring in-office examination and treatment (i.e., slit lamp or other equipment to diagnose and treat).

Note: No routine (non-urgent/non-emergency) services will be offered during the partial/limited TEI schedule.

Enhanced Infection Control strategies:

- Prior to start of work, staff and providers will be trained on proper donning and wear of PPE, and the appropriate infection control procedures in the clinic.
 - Training will be conducted by Salus faculty (or other method).
- Staff and providers must wear cloth masks while in the clinic. Entrance screeners and providers (during patient encounters) may request, but are not required to wear N95 masks. If an individual requests an N95 mask, they will receive instructions regarding proper fit.
- Staff and providers will maintain appropriate social distancing, a minimum of 6' from each other, throughout their time in the building.
- If possible, patients should be instructed to do their check in registration telephonically from the parking lot. After check in, if the doctor is not ready to see them, patients will be asked to wait in their car and will be called when the doctor is ready to examine them. During this call, patients will be instructed:
 - Not to bring a visitor/escort into the clinic, unless absolutely necessary for patient safety.

- To only bring method of payment (e.g., credit card), identification, and insurance cards into the clinic.
- Not to bring any extraneous items, like purses, electronic pads, books, or other bags into the clinic.
- That they will be medically screened outside the entrance to the clinic before being allowed into the building.

Entrance Screening

- Screening areas will be set up outside the entrances to TEI, initially staffed by a PSR and a Security Officer (will need to expand as the number of staff and patients increases).
- Staff and providers will be screened for symptoms and have their temperature taken by the PSR in the screening area using a scanning, non-contact thermometer when they arrive. They must have a temperature below 100.4° to remain on site.
 - They must answer negative for the symptoms questions to enter.
 - All temperatures will be logged daily.
- The screening site staff will verify through the use of a symptom survey that a patient does NOT have the following symptoms:
 - Fever (temperature will be taken at screening site) temperature of 100.4° or higher
 - Cough
 - Shortness of breath or difficulty breathing
 - o or two of the following symptoms:
 - Chills
 - repeated shaking with chills
 - muscle pain
 - headache
 - sore throat
 - new loss of taste or smell
 - Exposure to a patient with confirmed COVID-19

Patients with any of these symptoms will not be allowed in the building. They will be directed to go home, isolate, and contact their primary care physician. If the patient's eye condition is urgent, they will be directed to go to an eye hospital, such as Wills Eye Hospital.

- Staff, patients, and providers will thoroughly clean their hands with alcohol gel and don a
 mask at the screening site, before they enter the building.
- Patients will enter the building alone unless an escort/caregiver is required. Everyone entering the building must wear a mask. If patients/visitors do not have a proper mask, TEI will provide a surgical mask.

Patient Care

- Waiting area mitigation:
 - Seating will be adjusted to ensure appropriate social distancing (limit the number of chairs so there will be greater than 10' apart on all sides).
 - All non-essential items, like magazines, flyers, etc. will be removed from the waiting area to allow for more thorough and efficient cleaning.

- Reception desk and waiting room chairs will be wiped down with disinfectant wipes by Housekeeping staff between patients.
- Exam room, and any other rooms used during the encounter, doorknobs and light switches and other touch points will be wiped down with disinfectant wipes by Housekeeping staff between patients.
- Patients who are unable to wait in their vehicle will be strategically directed to the waiting
 area with seating arrangements positioned to allow for appropriate social distancing of
 10 feet.
- Only the two emergency exam rooms will be used for patient care. The other exam
 rooms, team rooms, etc. will remain closed. The two Emergency Service offices will be
 used by the resident and the support provider throughout their time in the clinic.
- Appointments will be scheduled every 30 minutes, alternating exam rooms, to allow each exam room to be disinfected by the Housekeeper after each patient.
- Providers and administrative staff members will follow CDC guidance for use of personal protective equipment.
 - Wear a mask while interacting with patients (N-95 mask). Masks should be disposed
 of if damaged or contaminated.
 - Wear gloves during patient encounters, and dispose after each use.
 - Providers will wash hands before donning gloves and after disposing of them.
 - Wear goggles/eye shields or face shields when interacting with the patients.
- Providers should also practice these added precautions:
 - Not speaking during slit-lamp biomicroscopic examinations.
 - Only using the slit lamp for necessary procedures.
 - Use the iCare (or Tonopen) in lieu of the Goldmann Applanation Tonometer.
 - Take undilated fundus photos in lieu of a dilated examination, if possible and if clinically appropriate.

After the Patient Departs

- The housekeeping staff will disinfect the touch and droplet surfaces in the waiting area and the exam room that the patient used before the next patient uses the exam room.
 - The provider should disinfect the clinical equipment before the next patient comes into the exam room.
 - Any imaging equipment used will be disinfected by the provider directly after utilization and before the next patient uses the equipment.
- After the last patient of the day leaves the clinic, the Housekeeping staff will do a thorough re-cleaning of the front desk, waiting area, and each exam room used. This will include door handles, light switches, waiting area furniture, front desk surfaces, telephones, and computer keyboards.