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PREVENTION

- CLEAN EVERYTHING with bleach or 60% or higher alcohol
 - Clean “high touch” areas daily
- NO HANDSHAKING!!!
 - Greet others with a fist bump, elbow bump, bow, curtsy, dance, whatever
- Open doors with your closed fist or hip – do not grasp the handle with your hand unless that is the only way to open the door, ESPECIALLY important with bathroom and public doors.
- Use disinfectant wipes when they are available for things like shopping carts
- Wash hands with soap and water for 20 seconds minimum (sing Happy Birthday twice)
- If soap and water are not available use hand sanitizer with at least 60% alcohol
- Carry a small container of hand sanitizer AND antiseptic wipes with you
- Keep larger bottles of hand sanitizer near your doors
- Stay at home when you are sick
- Elderly volunteers should stay home if possible
- Pregnant women should stay home if possible
- Avoid touching your face, especially eyes, nose, and mouth
- Cover cough / sneeze with tissue, then dispose it in the trash; use your elbow as a last resort
- Be wary of public places with lots of people such as busses, trains, waiting rooms, etc.
- Be wary of surfaces touched by many people such as elevator buttons or shared computers
- Avoid new non-essential vaccinations as you may be excluded from the Coronavirus vaccine
- Avoid green veggies and other foods exposed to human hands
- If you purchase vegetables, use vinegar and water to disinfect.
- Use alcohol on all packages you bring from the mailbox or stores
- After a shift in the hospital or clinic, leave shoes outside, put clothes in the washing machine immediately, and shower.
 - Avoid suits and dresses. Wear only scrubs.

Tips to Boost Immunity

- Contact your primary care provider to see if you should:
 - Start Vitamin C 3000mg (Ascorbic acid) daily with food
 - Start Vitamin D 2000mg daily
 - Start Zinc 50mg PO QD
 - Lozenges are good at preventing the virus from replicating inside the pharynx
- Avoid sugar
- Keep a bland diet and avoid heavy foods, spices, and heavy carbs
- Avoid stress
- Avoid immunosuppressive meds if you can (for example Humira for psoriasis), and anti-inflammatories
- Avoid proton pump inhibitors or strong antacids.
- Exercise daily

Supplies to Consider

- Nitrile gloves for when you must come into contact with potentially contaminated areas, such as out shopping or pumping gas
- Disposable surgical masks to prevent you from touching your face
- Hand sanitizer with greater than 60% alcohol content
- Zinc lozenges, which have been proven effective in blocking coronavirus, and most other viruses, from multiplying in your throat and nasopharynx

Who is High-Risk?

- Patients with autoimmune disorders such as Lupus or Hashimoto's
- Patients with pancreatitis or chronic pancreatitis
- Hospital patients or newly discharged hospital patients
- Patients with HIV, Hepatitis B, or Hepatitis C
- Patients affected by lung disease including COPD, asthma, lung cancer, and bronchiectasis
- Patients with liver disease, including alcoholic liver disease, hemochromatosis, Wilson's, primary biliary cirrhosis, primary sclerosing cholangitis, or fatty liver
- Patients with inflammatory bowel disease on immunosuppressive drugs including prednisone and 6 MP
- Patients with kidney failure
- Cancer patients on chemotherapy
- Elderly, especially those on multiple medications
- Pregnant women

Likely high risk

- Patients on known immunosuppressive medications such as Humira, Remicade, Stelara, and other biologics, although these could also be protective
- Patients on COPD or asthma patients
- Alcoholic or drug addicted patients

If you are high-risk

- Avoid any unnecessary contact with others
- Avoid travel

SYMPTOMS (may occur 2-14 days after exposure)

- Fever
- Cough
- Shortness of Breath
- However other symptoms include fatigue myalgia or diarrhea in up to 30% so be on alert
- Asymptomatics can be carriers. Be aware of case of baby carrying the virus in China - [see References](#)

SUSPECTED CASES (Persons Under Investigation)Criteria:

- High Risk
 - Persons living in the same household with a confirmed case and NOT taking precautions *or*
 - Persons who have traveled to China, Italy, Korea, or other epicenter of outbreak
- Medium Risk
 - Travelled on aircraft, train, bus, subway, or vehicle with confirmed case
 - Persons living with a confirmed case who ARE taking precautions
- Low Risk
 - Being in the same indoor environment as a confirmed case (i.e. waiting room, classroom)
- No Identifiable Risk
 - None of the above

Course of action – SYMPTOMATIC

- High Risk
 - Immediate isolation
 - Notify CDC (770-488-7100) and VC Communicable Disease Lab (805-981-5201)
 - Pre-notify treatment center and EMS
 - Utilize all infection control precautions
- Medium Risk
 - Immediate isolation
 - Medical care should be guided by clinical presentation
 - Pre-notify treatment center and EMS
 - Utilize all infection control precautions
- Low Risk
 - Recommend to avoid contact with others and public activities while symptomatic
 - Person should seek health advice to determine if care is needed
 - Recommended to not travel on long distance commercial travel such as airplane, bus, train etc. while symptomatic
 - Recommended to avoid public transit while symptomatic
- No Identifiable Risk
 - Routine medical care

Course of Action – ASYMPTOMATIC

- High Risk
 - Quarantine at home or other location determined by public health authorities
 - Daily activity monitoring
- Medium Risk
 - To the extent possible stay home
 - Postpone long-distance travel
- Low Risk
 - Self-observation
- No identifiable risk
 - No restrictions

PROCEDURES FOR MEDICAL OFFICES

- Cancel all elective procedures and surgeries.
- Minimize visitors or people accompanying patients.
- Call patients to ask if symptomatic
 - If a patient reports symptoms, ask them to stay home
 - Elderly/immunocompromised patients should be advised to stay home regardless

Teleconference

- Recommend teleconference via Skype or facetime - use teleconference CPT codes:
New: 99201-99205 modifier 95
Established: 99211-99215 modifier 95
See references below for additional codes.
 - If you are in a state where most insurances do not cover telehealth, consider doing this (Vanderbilt in TN rolling out this week): We just got the “CR” catastrophic modifier code added to EPIC. So now we will bill a level 3 with a GT AND CR modifier. This will likely help on the backend for insurance approval to pay

Procedure for Symptomatic Patients:

- If they insist on coming in, schedule them for the end of the day
- Have them call when they arrive, put on mask and gloves prior to entering building
- Bring straight to an exam room
- Notify the doctor
- Take the patient's temperature with **HANDHELD THERMOMETER** and **COVER**. Do NOT use the thermometer attached to the vitals machine
- Ensure the doctor has personal protective equipment (PPE) and testing materials ready outside exam room door
- **Personal protective equipment**
 - N95 Mask

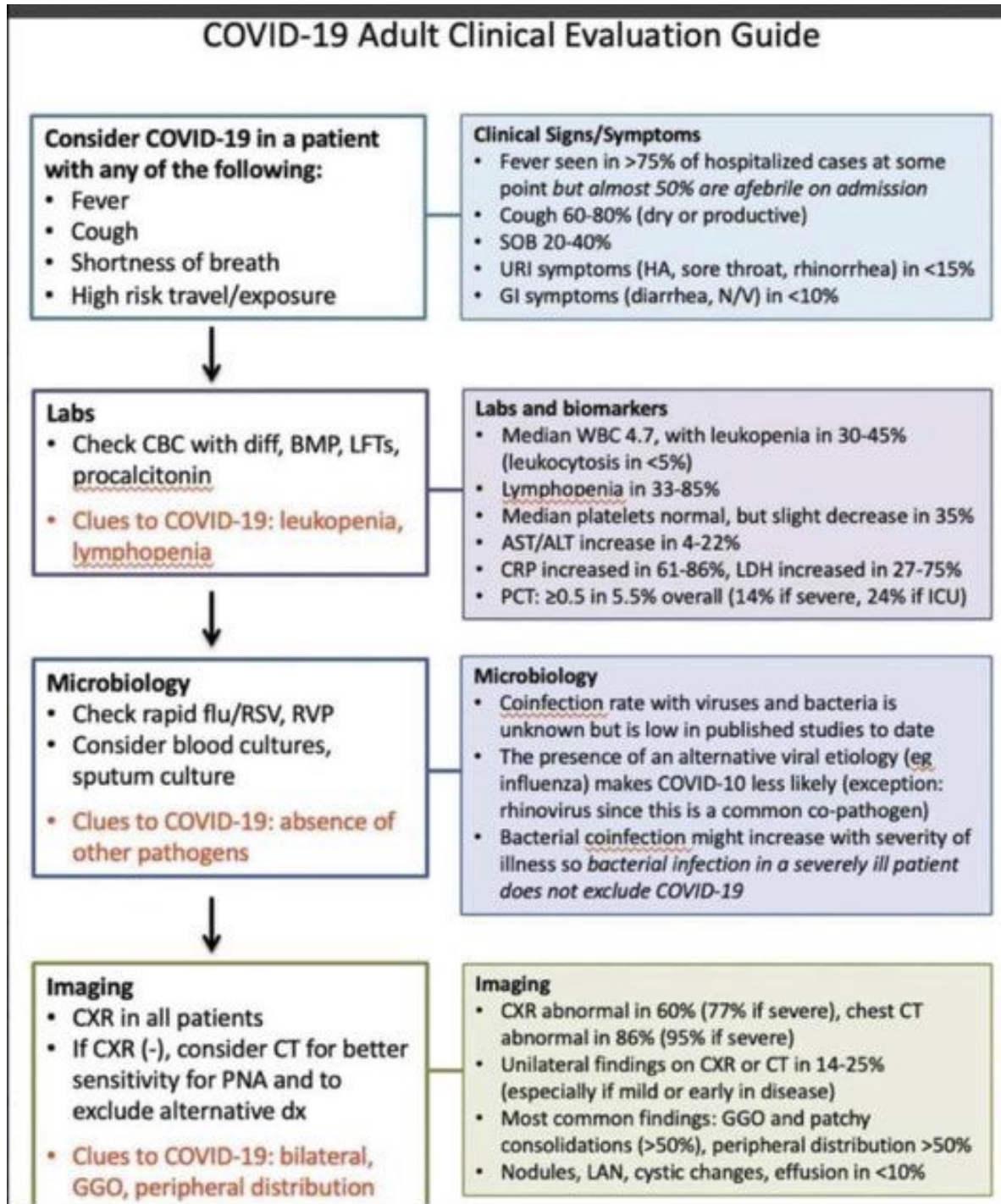
- Face Shield
- Disposable Gown
- Gloves
- **Testing supplies**
 - Nasopharyngeal AND oropharyngeal swabs for COVID-19
 - Synthetic fiber swabs with plastic shafts
 - Place swab in tube immediately with 2-3 of viral transport media
 - NP and OP samples go in SEPARATE containers
 - NP swab: into nostril parallel to palate, leave swab in place a few seconds to absorb secretions
 - OP swab: swab posterior pharynx, avoiding the tongue
 - 1 swab for influenza testing
 - If patient has productive cough, sputum should be tested
 - Store specimens at 2°-8°C and ship on ice pack
 - Contact your local lab for testing and make sure you have an area contained to test and tech or nurse needs to be in hazmat suit.
 - If you do not have suits don't take chances and contact health department. Call .770-488-7100) and VC Communicable Disease Lab (805-981-5201)

CLINICAL TRIALS

- Over 80 being conducted, 60 of these in China
- Other locations: Singapore, Russia, France, Israel, Saudi Arabia, Hong Kong, United States, Canada
- Two types
 - Prevention
 - Treatment
- Only a few studies in the US so far, focus is mostly on vaccine development
 - Vaccine is typically messenger RNA
 - Made to protect 18-55-year-old population
 - Not for pregnant women, breastfeeding, kids, elderly, high-risk
 - Also excluded are patients with positive hepatitis B surface antibody test, hepatitis C antibody, or HIV types 1 or 2 antibodies at testing
- Treatment trial includes potential antivirals like those used to treat hepatitis B, hepatitis C, or HIV. Some trials include a combination or antiviral
 - Potential exclusions:
 - ALT/AST >5 times the upper limit of normal
 - Stage 4 chronic kidney disease or requiring dialysis (i.e. estimated eGFR <30)
 - Pregnancy or breastfeeding
- Follow www.clinicaltrials.gov for updates on new studies

ADDITIONAL REFERENCES:

- Follow the CDC page <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- Chart for treatment and assessment:



- **Additional Billing Codes**

99441 Physician /Qualified Health
Professional telephone evaluation 5-10
min

99442 Physician /Qualified Health
Professional telephone evaluation 11-20
min

99443 Physician/Qualified Health
Professional telephone evaluation 21-30
min

99421 Physician/Qualified Health
Professional online digital evaluation 5-10
min

99422 Physician/Qualified Health
Professional online digital evaluation 11-
20 min

99423 Physician/Qualified Health
Professional online digital evaluation 21-
30 min

Why COVID-19 (“Coronavirus”) is DANGEROUS:

1. Pandemic highly contagious mutation of two far less contagious epidemic coronaviruses [SARS/2003 and MERS/2012] with higher mortality, but fewer infections.
2. Could/should have been prevented/inoculated against, if competent SARS and MERS research funded years ago.
3. Presents often with severe-to-moderate symptoms — fever, dry cough, shortness of breath; possible muscle ache, diarrhea, malaise.
4. Transmission: touch (hand to mouth/face), breathe (air droplets) and even fecal oral (hygiene contamination).
5. But asymptomatic patients can nonetheless transmit; thus, young seemingly “healthy” can transmit to older at-risk.
6. It can go (while mutating) from lungs/you can survive to bowels/you recontaminate.
7. Example of reinfection: Feces/oral via improper washing of hands or (less common) breathing airborne virus from toilet.
8. Given reinfection danger, 2-week isolation (with 3 negative nose stabs) should instead ideally be 30 days

Additional References to understand this virus better:

- Research Team Isolates COVID-19 Virus
<https://toronto.citynews.ca/2020/03/12/joint-research-team-isolates-covid-19-virus/>
- Worldometer: COVID-19 CORONAVIRUS OUTBREAK
<https://www.worldometers.info/coronavirus/#countries>
- Detection of Novel Coronavirus by RT-PCR in Stool Specimen from Asymptomatic Child, China
https://wwwnc.cdc.gov/eid/article/26/6/20-0301_article
- COVID-19 Update & Recommendations for Gastroenterologists
<https://mailchi.mp/gi/acgrecommendations-re-covid-19-for-gastroenterologists?e=d51efb82cf>
- Medications for COVID-19 (Coronavirus)
<https://www.drugs.com/condition/covid-19.html>
- COVID-19 Mortality Rate May Be 'Considerably Less Than 1%'
<https://www.medscape.com/viewarticle/926089>

Thank you for taking action and seeking a Disaster Plan for your office.

PLEASE DO NOT FORWARD THIS DOCUMENT.

Instead, please kindly refer physicians/clinicians who are interested in receiving the Progenabiome Disaster Plan to sign up at <https://progenabiome.com/covid-19>

This is so we can be aware and keep track of who receives our recommendations and MOST IMPORTANTLY, so we can share updates as we learn more.

If you have questions, advice or suggestions of updates, contact me at drhazan@progenabiome.com

"It is time that frontline doctors seeing patients implement a unified disaster plan that includes every hospital and clinic across the country. Coronavirus trials in China and elsewhere target the virus directly. However, we must now focus on prevention."

— Dr. Sabine Hazan

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Series Editor For Practical Gastroenterology for The Microbiome - <http://www.practicalgastro-digital.com>

www.progenabiome.com

Fb: Progenabiome

Podcast: The Medical View with Dr Sabine & Mike Etchart.

PLEASE DO NOT FORWARD.