

COVID-19 POLICY AND PROCEDURES
Preparedness and Response Plan

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1. COVID-19 GENERAL WORK PLACE REQUIREMENTS STATEMENT

Due to the current public health emergency due to the Novel Coronavirus (COVID-19) this policy is being added as an addendum to the Infection Control Policies and Procedures of Ortho Care Physical Therapy, Inc. as developed and approved by the Professional Committee, and shall be adhered to in all circumstances. This policy is being updated on an ongoing basis and the requirements in this policy are based on Michigan's current Executive Order 2020-114 and recommendations from MIOSHA and the CDC as of June 8, 2020. Administrator will continue to review CDC and MIOSHA websites to ensure that workplace policies and procedures are based on the most up-to-date information available.

Develop a COVID-19 preparedness and response plan, consistent with recommendations in Guidance on Preparing Workplaces for COVID-19 developed by the Occupational Health and Safety Administration by 6/1/2020 or within two weeks of resuming in-person activities, whichever is later, a business's or operation's plan must be made readily available to employees, labor unions, and patients via website, www.orthocarephysicaltherapy.com FORMS and COVID-19 section, internal network, and/or by hard copy.

2. WORKPLACE ASSESSMENT

Physical Therapy remains an essential service in Michigan. We will remain open until cancellations warrant closure and that effective 3/30/2020 the schedule will be modified to reduce hours (See COVID-19 Hours of Operation). As of this review, 7/28/2020 there was no need for closure at we are now accepting patients at approximately 75% pre-COVID-19 levels.

3. RISK ASSESSMENT STATEMENT

As an essential service, our facility is at **MEDIUM** level Risk for Covid-19 per OSHA.gov – Healthcare Workers and Employers Risk Assessment, as we provide care to the general public who are not known or suspected Covid-19 patients, working in a busy staff work area within a healthcare facility.

4. CLINICAL MANAGEMENT – Hour changes

Effective 6/15 Hours changed to

8:00 – 6:00 pm M-Th Closed Fridays

- a. Limiting the number of appointments to maintain social distancing and allow adequate time between appointments for cleaning, accounting for the amount of time needed for disinfectants to be effective per product label.
- b. Consideration will be given for most vulnerable as first patient of morning and afternoon to reduce contact with and/or overlap with multiple patients.
- c. Pre-screening will be conducted for all patients and workers prior to entry, including a temperature check, overall health status check, and screening questions (see attached Covid-19 Patient Screening Questionnaire)

- d. Limit waiting area occupancy by asking patients to wait in cars or outside, reduced seating in lobby using approved social distancing. (2 seats) Signage at entrance to facility, gym and billing spaces.
- e. Physical barriers have been added at sign-in and billing checkout points. (Sneeze guards)
- f. Air Purifiers (Air Genie) have been installed in each exam room and throughout gym space.
- g. Efforts are being made to establish a contactless sign-in with Wellsky EMR pending changes staff have provided a labeled clean pen container and dirty pen container. Hand sanitizer is provided at sign in sheet for the patient and patients are being directed to wash their hands immediately after sign-in at HANDWASHING STATION located in the right-hand corner of the gym space.

5. CONTINGENCY PLANNING/SOCIAL DISTANCING

- a. Increased rates of worker absenteeism, if an outbreak occurs in our staff, we follow our exposure control protocol and adjust patient care schedules accordingly.
- b. Symptomatic workers should stay home. Employers may require a doctor's note to release an employee who was tested and confirmed COVID-19 positive to return to work.
- c. The need for social distancing, staggered work shifts, delivering services remotely and other exposure-reducing measures, include: Meetings are held in a room with adequate size to maintain social distancing. Staff/patient ratio remain under 10 people in facility at all times.
- d. Telehealth options are available upon request.
- e. Notices regarding new policies to employees and patients have been posted.
- f. Required paper work is available by mail and on the website to be completed prior to initial appointment visit.
- g. A COVID-19 informational section has been added to the www.orthocarephysicaltherapy.com website. This document is available in the forms location and is linked to this Policy and Procedures/Preparedness Response Plan.

6. STAFF TRAINING/SAFE WORKSITE PRACTICES

Designate Work Site Supervisor

Designate one or more worksite supervisors to implement, monitor and report on the COVID-19 control strategies developed under subsection (a). The supervisor must remain on-site at all times when employees are present on site. An on-site employee may be designated to perform the supervisory role.

Administrator -Elena Kerasiotis

Administrator – Apostolos Kerasiotis, DPT

Compliance Officer – Katherine Palazzolo, DPT

Infection Control Chair – Kathy Winkelman, PTA

In-Services will be conducted regularly and will include:

- a. Workplace infection control practices.
- b. COVID Screening prior to entry of facility.
- c. The proper use of personal protective equipment.
- d. Steps an employee must take to notify the facility of any symptoms of COVID-19 or a suspected or confirmed diagnosis of COVID-19.
- e. Sick employees are actively encouraged to stay home.
- f. How to report unsafe working conditions.

Infection Prevention Methods

- a. Promote frequent and thorough hand washing, including by providing employees, patients and workplace visitors with a place to wash their hands.
- b. Provide readily available alcohol-based hand sanitizers
- c. Cleaning with EPA/CDC approved disinfectants
- d. Encourage workers to stay home if sick
- e. Encourage respiratory etiquette, including covering coughs and sneezes.
- f. The proper use of personal protective equipment (PPE)
- g. Sneeze Guards are used at check in points
- h. Air Purifiers (Air Genie) are installed throughout space
- i. Social Distancing markers are in place
- j. Screening all people entering facility including temperature and oxygen saturation checks

How COVID-19 Spreads

- a. Although the first human cases of COVID-19 likely resulted from exposure to infected animals, infected people spread COVID-19 to others
- b. The virus is thought to spread mainly from person-to-person. Including:
 - i. Between people who are in close contact with one another (within about 6 feet). Through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
 - ii. It may be possible that a person can get COVID-19 by touching a surface or object that has virus droplets on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the primary way the virus spreads.
- c. People are thought to be most contagious when they are most symptomatic (ie., experiencing fever, cough and/or shortness of breath). Some spread might be possible before people show symptoms; there have been reports of this type of asymptomatic transmission, but this is not thought to be the main way the virus spreads.
- d. Although the United States has implemented public health measures to limit the spread of the virus, it is likely that some person-to-person transmission will continue to occur.
- e. The CDC website provides the latest information about COVID-19 transmission:
www.cdc.gov/coronavirus/2019-ncov/

7. HOW TO REPORT UNSAFE WORKING CONDITIONS

You can also contact MIOSHA via the Ask MIOSHA link on the MIOSHA website, or call 800-866-4674 to ask **COVID-19** questions or discuss your complaint (if you decide to file a safety or health complaint, online complaints are preferred; complaints are generally not accepted via telephone, unless it is an emergency). (HOW TO FILE A COMPLAINT WITH MIOSHA) https://www.michigan.gov/leo/0,5863,7-336-94422_11407_30453-93835--,00.html

https://www.michigan.gov/documents/dleg/complaint_form_278115_7.pdf

Safeguards to protect Michigan's workers from COVID-19 Executive Order No. 2020-91 (https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705-529474--,00.html)

8. PERSONAL PROTECTIVE EQUIPMENT (PPE)

- a. The COVID-19 administrator will be responsible to obtaining and maintaining necessary sanitation, soap or hand sanitizer, tissues, (for respiratory hygiene and cough etiquette) PPE supplies are readily accessible, while also setting restrictions on supplies, to reduce hoarding. Vendors will be posted next to supply sheet on administrators' door.
- b. Signage has been posted to require patients and staff to wear a face covering once in the building and to not enter if they are feeling ill. Each patient has been pre-screened via phone call prior to appointment by tech staff member.
- c. Hand sanitizer is placed at entrance of facility, as well as, in gym area and face masks are available upon request.
- d. Patients and staff are required to wear a face covering when in the facility provided, they can medically tolerate wearing one. Patients may remove face covering if necessary, to receive treatment.
- e. Health Care Practitioners who enter a room of a patient with known or suspected COVID-19 should adhere to Standard Precautions and use a respirator (or facemask if a respirator is not available), gown, gloves and eye protection.

9. ENVIRONMENTAL CONSIDERATIONS

- a. Established increased cleaning/sanitization routine (See below INFECTION CONTROL)
- b. Reduced high touch areas: door entry (open), counters (sneeze guards) chairs limited in gym and waiting area
- c. Minimize use of shared items – patients keep promo pens, wipes and hand sanitizer provided throughout facility.
- d. Magazine and all reading materials have been removed, no toys, and remote controls are in the waiting room.

- e. No aerosols are used in the facility.

10. INFECTION CONTROL MEASURES/WORKPLACE CONTROLS

Hiding in Plain Sight: How You Can Fight Bacterial Contamination in Your Clinic – APTA Article all suggestions implemented but additional precautions as well as CDC guidelines have been implemented to ensure the safety of staff and patients.

- a. Adherence to standard precautions such as cleaning equipment between uses – add wipes to each station for easy cleaning
- b. Use appropriate personal protective equipment including masks, gloves and gowns/lab coat/face shield
- c. Constant cleaning and disinfection of environmental surfaces most likely to become contaminated before and after each visit (see cleaning log)
- d. Strict adherence to hand hygiene practices – should occur before and after each patient encounter
- e. Routinely clean ultrasound heads with appropriate disinfectants between patient contact
- f. Use a tongue depressor to remove lotions from the container
- g. Don't leave gel or lotion jars open
- h. Don't reuse disposable bottles of ultrasound gels (Replace with provided dispensers)
- i. CLEANING STATION FOR USED HAND HELD EQUIPMENT following patient use
- j. PATIENT/STAFF HAND WASHING STATION IN GYM
- k. DOOR PROPPED OPEN TO AVOID CONTACT WITH HANDLES
- l. Sign in sheet pens will be sanitized after every use (Clean Pen/Dirty Pen containers)
- m. All family/guests will be asked to wait outside of the facility in cars if available.
- n. Patients are to be kept 6ft apart and use evaluation rooms for all treatments to ensure mitigation distancing practices
- o. Covid-19 Patient Screening Questionnaire (see attached)
- p. All patients will be contacted prior to appointment for screening (see above) if they answer Yes to any of the questions, their appointment will be postponed for at least 14 days, until they are symptom free and test negative for COVID-19. Patients will be advised that they may schedule PT appointment via Telehealth or as an Evisit as appropriate.
- q. Should patient symptoms become serious or debilitating they are directed to contact their physician and/or emergency provider.
- r. Any Macomb County Resident can make an appointment for FREE COVID testing at 586-463-3750, Location 380 North Rose, Mount Clemens, MI 48043 M-F No Prescription required.
- s. Staff are to ensure that the patient is requesting the Telehealth/Evisit appointment prior to scheduling their appointment.
- t. An admission form agreeing to Telehealth will be sent and/or completed by all patients and stored in the file (see attached)
- u. Staff will adhere to Telehealth/Evisit Policy and Procedures
- v. Workplace Guidelines for Outpatient Healthcare Facilities
[https://www.michigan.gov//documents/leo/COVID-19 Workplace Guidelines for Outpatient Healthcare Facilities 691894 7.pdf](https://www.michigan.gov//documents/leo/COVID-19%20Workplace%20Guidelines%20for%20Outpatient%20Healthcare%20Facilities%20691894%207.pdf)
- w. Covid -19 hours (See above, 4. Clinical Management)

11. CASE RECORD REVIEW/PATIENT EDUCATION

- a. All files will contain educational information and info regarding pandemic (see COVID-19 Patient Screening Questionnaire)
- b. All patients will be contacted prior to appointment regarding changes in medical status.
- c. All patients will be contacted on a weekly basis if they have missed appointments and upon request a Telehealth appointment will be scheduled. (See Telehealth/Evisit Policy located in Policy and Procedures Manual)
- d. All phone or recorded outreach will be documented in EMR SOAP note, using a disaster modifier, (CR) as provided by the CMS/Insurer.
- e. Documentation will address infection control screening results and be stored in the file behind SOAP Note
- f. Patient education, hand washing and 6 ft mitigation documented in note, ie note: Patient completed Patient Screening Form, answered no to all questions and complied with OCPT patient hygiene practices and mitigation practices.

12. EMERGENCY/SAFETY

- a. Facility safety inspection/discussion of results and recommendations for resolution of deficiencies
- b. Script developed to schedule Telehealth/Evisits with active patient case load (See form)
- c. Review of **Emergency Closing Drill** Conducted (See attached) 3/21/2020
- d. Review of Covid-19 Patient Screening Drill (See attached) 7/16/2020
- e. Sidewalk has been replaced 7/25/2020

13. PATIENT/STAFF EDUCATION AND DAILY ENTRY SCREENING PROCESS

- a. Patient temperature is taken by Tech and recorded on (Covid-19 Patient Screening Questionnaire)
- b. Patient Oxygen Level taken by Tech and Recorded on (Covid-19 Patient Screening Questionnaire)
- c. Patients/Staff are asked the following questions as directed by the CDC (Covid-19 Patient Screening Questionnaire)
- d. Patients are directed to WASHING STATION to wash their hands prior to their treatment
- e. Patients are asked to place any used equipment at the CLEANING STATION
- f. Patients are directed to Wash their hands prior to leaving the clinic
- g. Questions below are added to file for cases reviewed prior to Covid 19 Screening Form implementation as documentation along with the Patient Notice Posting.
- h. Staff are to self-monitor health and to take temperature before beginning shift (See attached, Staff COVID-19 Temperature Log)
- i. Any questions regarding changes in procedure/schedule should be directed to Administrator for clarity.
- j. Regular update meetings will be conducted should CMS/CDC change required activities.
- k. Staff are directed to wash scrubs daily after each shift.
- l. Staff are to wear masks and gloves when treating patients.
- m. Staff concerned with treating patients are to notify Administrator and are allowed to request leave due to health/family related concerns due to COVID epidemic.

14. SOCIAL DISTANCING IN THE WORKPLACE

Everyone on the worksite premises is encouraged to stay at least six feet from one another to the maximum extent possible. This will be done:

- a. Through the use of ground markings, signs, and physical barriers, as appropriate to the worksite.
- b. Direct patient care with our providers will be the exception to maintaining social distancing as it is necessary to provide Physical Therapy Services.
- c. We have increased distancing between employees by spreading out common spaces (e.g., conference room), providing visual cues to guide movement and activity.
- d. We use exam rooms, and limit use in gym space.
- e. We are limiting waiting-area occupancy to the number of individuals who can be present while staying 6 feet away from one another.
- f. Guests are encouraged to wait in their cars.

15. FACE COVERINGS

- a. Our facility provides surgical masks to our employees. We do have limited supply of N95 and P100 masks that are used for screening as we are not caring for patients with known active COVID-19. We are treating post COVID-19 patients.
- b. Masks are required by all those entering the facility.
- c. A mask will be provided free of charge to anyone attempting to enter our facility without a mask to comply with State of Michigan Executive Order 2020-59.
- d. We require that face coverings are to be worn by employees at all times, when in shared spaces, including and during in-person meetings and in restrooms and hallways.

16. FACILITY CLEANING AND SANITATION

We have increased our facility cleaning and disinfection to limit exposure to COVID-19, especially on high-touch surfaces (e.g., door handles). Paying special attention to tables, chairs, and shared equipment (e.g., exercise equipment, treatment supplies, modality, carts). (See INFECTION CONTROL)

- a. Hourly log for these spaces has been created to record sanitization of these areas
- b. Public Bathrooms are sanitized daily by cleaning company and recorded in utility area
- c. Patients are given wipes when visiting Public Bathrooms for their personal use.
- d. All exercise equipment is wiped down before and after each patient use
- e. Chairs are cleaned after each patient use
- f. We provide disinfecting supplies and require employees to wipe down their workstations at least twice daily.
- g. Documentation areas are cleaned daily
- h. Conference room is cleaned daily
- i. Additional Hand Sanitizer has been placed throughout the clinic
- j. Table surfaces and any handle adjustments are cleaned after each use
- k. In between each visit patient rooms will receive
 - i. Chair wiped down
 - ii. Treatment table wiped down
 - iii. Side Tables wiped down
 - iv. Door handle wiped down

- v. Documentation /modality cart wiped
- vi. Pillow case changed
- I. End of Day Cleaning
 - Clinical**
 - i. Foot pedals wiped down
 - ii. Rooms and gym area vacuumed/Swiffer wet/dry mopped
 - iii. Documentation area cleaned
 - iv. Work Stations cleaned
 - Front Office/Billing area**
 - i. Chairs wiped down
 - ii. Keyboards and mice wiped down
 - iii. Handle to all storage areas cleaned
 - iv. Copier/Printer/Faxes cleaned
 - v. Countertops wiped down

17. **CLEANING PROTOCOL** to clean and disinfect the facility in the event of a positive COVID-19 case in the workplace. If a patient or employee contacts the facility and indicates they have a positive COVID-19 test the COVID-19 Administrator should:

- a. Identify the date and time of the last visit the patient was in the office.
- b. Instruct the front office staff that within 24 hours they need to contact any co-workers, contractors, or suppliers who may have come into contact with the person with a confirmed case of COVID-19.
- c. Within 24 hours the local public health department must be contacted. Record must be kept of this.
- d. We will continue to follow our daily and weekly Sanitization plan listed above.

On the date of notice the facility will assure

- a. All surfaces contacted by hands are cleaned
- b. Entire clinic is vacuumed
- c. All floors mopped
- d. All exercise equipment in the clinic is cleaned
- e. Bathrooms are fully cleaned by Pioneer Janitorial

18. **DISCIPLINE** - Our Facility will follow Executive Order 2020-36, and any executive orders that follow it, that prohibit discharging, disciplining, or otherwise retaliating against employees who stay home or who leave work when they are at particular risk of infecting others with COVID-19.

19. **TRAVEL** for employees is restricted to essential travel only.

20. STEPS TO DECREASE CONGESTION

- a. Visual indicators of appropriate spacing for employees outside the building in case of congestion
- b. To reduce entry congestion and to ensure the effectiveness of screening we have staggering start times for employees. Schedules are variable to limit all providers treating patients at the same time.
- c. We have prohibited social gatherings and meetings that do not allow for social distancing and/or create unnecessary movement through the office.

- d. All meetings are conducted in the gym space to ensure social distancing.
- e. Masks are to be worn at all times.

21. **SIGNS ARE POSTED** - throughout the clinic about the importance of personal hygiene.

22. **NON-ESSENTIAL VISITORS** have been suspended entering out facility

23. **EXPOSURE CONTROL PLAN**

If you have had a known high-risk exposure to a masked patient(s) with confirmed COVID-19, you should take extra care to monitor your health but can keep working and adhere to self-monitoring.

- a. Employee should self-monitor for symptoms (subjective fever or measured temp > 100.0° F, or cough, or shortness of breath or sore throat) AND additional new onset lower acuity symptoms that may be associated with early signs of infection with COVID-19 including muscle aches, or malaise (feeling tired or run down), runny nose or stuffiness or congestion.
- b. Temperature must be checked and recorded in the morning immediately upon entering the clinic and in the afternoon prior to going home. If any of these signs/symptoms develop then you MAY NOT COME TO WORK.
- c. If symptoms develop at work, you MUST immediately leave the patient care area. Isolate yourself and notify your manager.

If you have a scenario where you have been unmasked and have had prolonged close contact (<6 feet for more than a few minutes) with an unmasked confirmed COVID-19 patient/person you must notify your manager immediately.

- a. You will need to self-quarantine for minimum of 72 hours from the time of exposure and you will be required to have a negative COVID-19 test to return to work.

Asymptomatic Providers/staff who have a positive test result for COVID-19 should not continue to work. The health care worker should monitor their health at home for COVID-19 like illness for a total of 10 days from the date of their first positive test.

- a. If the health care worker remains symptom free, they may return to work after that 10-day period, a negative COVID-19 test will be required to return to work.
- b. If they develop COVID-19 like illness during the 10 day self-monitoring period, they will need to self-isolate for an additional 10 days from symptom onset and until they have been fever free off fever reducing medicine and have had improvement in their respiratory symptoms for a minimum of 72 hours before returning to work with a negative COVID-19 test result.
- c. Covid-19 Testing is available to any Macomb County Resident by making appointment at 586-463-3750, 380 North Rose, Mount Clemens, MI 48043 M-F No Prescription required. <https://www.michigan.gov/Coronavirus> for other testing locations

Any patient(s) who have had a positive test result for COVID-19 should self-isolate for 10 days from symptom onset should be fever free, off fever reducing medicine and have had

improvement in their respiratory symptoms for a minimum of 72 hours before returning to the clinic for treatment. A negative test result will be required.

MDHHS again stresses that all providers should be self-monitoring and if sick, stay home.

Support for health care workers experiencing anxiety during the monitoring period, it is normal for you and family members to feel distressed, anxious or afraid. Try to keep a hopeful outlook and strengthen your resilience by drawing on skills that helped you manage difficult situation in the past. Keep in touch with other relatives and friends by phone, email or social media. If you feel overwhelmed and need support to cope with the situation, contact the SAMHSA Disaster Hotline at **800-985-5990**. For more information see the Supporting Emotional Health of the Health Care Workforce from the Michigan Department of Health and Human Services.

24. RECORD KEEPING PER EXECUTIVE ORDER 2020-114 (See attached)

- a. Employee Training
- b. Daily Entry screening protocol for all employees and contractors
- c. Confirmed employee cases of COVID-19

Coronavirus Glossary (Attached)

COVID-19 PATIENT SCREENING QUESTIONNAIRE

Name: _____ Date: _____

Due to the COVID -19 Pandemic, I've been asked to complete this form prior to your visit to verbally confirm that there have been no changes in your health since your last visit.

Please be aware that all guests or family will be asked to wait in their car or outside of the clinic during your treatment.

Social distancing will be strictly adhered to from other patients while being treated.

You will be required to wash your hands both before and after your treatment session.

Your temperature will be taken upon entering the clinic for your appointment.

Temperature Reading _____ (97-100.3°F) Oxygen Level _____ (92-100%). If normal, patient will complete the following questions.

1. Do you or anyone in your household have symptoms of Coronavirus including fever, cough, sore throat, shortness of breath, loss of smell or taste, nausea, diarrhea, congestion? Yes No

2. Have you or anyone in your household traveled outside of the US/or Michigan in past 14 days? Yes No

If yes, please list the countries or states visited below.

Comment: _____

3. Have you or anyone in your household been in close contact with others who have symptoms, are being assessed or monitored for Coronavirus, or who have traveled in the last 14 days? Yes No

If yes, please list the countries or states that he/she has visited below.

Comment: _____

Did you or your guest practice social distancing and wear a mask? Yes No

Did you or your guest fly and/or drive to your destination? Flew Drove

If you/they flew was a mask worn as directed by the CDC? Yes No

4. Have you or anyone in your household been at a large gathering of 50 people or more in the last 14 days? Did you practice Social Distancing and wear a mask? Yes No

5. Have you had Coronavirus (COVID 19)? Yes/No If Yes, when _____ Have you been cleared to return to work? Yes/No Other? _____

If you have answered Yes to any of the above questions, and did not practice social distancing and wear a mask as directed by the CDC, a postponement of your in-person activities is strongly recommended. **We will be glad to schedule your PT appointments via Telehealth.**

Should symptoms become serious or debilitating please contact your physician and or an emergency provider. Any Macomb County Resident can make an appointment for FREE COVID testing at 586-463-3750, Location 380 North Rose, Mount Clemens, MI 48043 M-F No Prescription required.

Tech Name: _____

CLEANING LOG - GENERAL SPACES												
LOBBY	DATE	TIME & INITIALS										
CHAIRS												
COUNTER TOPS												
DOOR HANDLES INSIDE AND OUTER DOOR												
KEYBOARD												
PENS												
PHONE												
THERMOMETER												
LOBBY	DATE	TIME & INITIALS										
CHAIRS												
COUNTER TOPS												
DOOR HANDLES INSIDE AND OUTER DOOR												
KEYBOARD												
PENS												
PHONE												
THERMOMETER												

Cleaning Log - General Spaces

6/23/2020

ADMISSION RECORD

FORM COMPLETION INSTRUCTIONS:

- Please answer all questions (**Please enter N/A if not applicable**)
- All information will remain strictly confidential
- Questions, please ask our office associate

Patient Name:			Patient Date of Birth	Social Security Number
Mailing Address (No. & Street, Apt., etc.)			E-Mail Address	
City	State	Zip Code	Gender: Female Male	
Home Phone Number ()	Work Phone Number ()		Cell Phone Number ()	
Primary Insurance Carrier Name			Secondary Insurance Carrier Name	
Insured's relationship to you <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Other			Insured's Name (Who carries insurance contract)	
Insured's Employer Name:			Insured's Employer Address:	
City	State	Zip	Employer Phone Number:	
Insured's Date Of Birth:			Emergency Contact and Phone	
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			Your occupation:	
Spouses Name:			Spouses Date of Birth	Social Security Number
PRIMARY CARE Physician Name			Phone Number	Date of Next Office Visit
REFERRING Physician Name			Phone Number	Date of Next Office Visit
I was referred to OCPT by:				
<u>PATIENT AUTHORIZATION AND RESPONSIBILITY</u>				
I hereby consent to treatment at Ortho Care Physical Therapy, Inc as well as, Telehealth and/or Evisits. By consenting to treatment, I authorize, on behalf of any covered family member or myself, direct billing of my insurance company and direct payment to Ortho Care Physical Therapy, Inc. By consenting to treatment, I also consent to the release of necessary medical information needed for the processing of the insurance claims, including release to any entity for the continuation of my medical care. I understand that a photocopy of the release is as valid as the original. In the event that my insurance company does not pay or partially pays on behalf of any covered family member or myself, I understand that it is my financial responsibility to remit payment in full to Ortho Care Physical Therapy, Inc. upon completion of the treatment session or within 10 days thereafter. I further understand that if the matter is referred to an attorney for collection, I will be responsible for the attorney's fees and court costs.				
Signature of Patient, Guardian/Parent			Date	

Revised 4/9/2020

Telehealth Patient Consent/Refusal Form

Patient Name: _____

Patient Address: _____ Date of Birth: _____

Purpose: The purpose of this form is to obtain your consent to participate in a Telehealth Consultation/ Treatment in connection with the following procedure(s) and/or service(s) **PT Treatment Session**

Nature of Telehealth Consult: During the telehealth consultation:

- a. Details of your medical history, examinations, x-rays, and tests will be discussed with other health care professionals through the use of interactive video, audio and telecommunication technology.
 - b. A digital physical examination may take place.
 - c. A non-medical technician may be present in the telehealth studio to aid in the video transmission.
 - d. Video, audio and/or photo recording may be taken of you during the procedure(s) or service(s) for treatment purposes only.
2. **Medical Information & Records:** All existing laws regarding your access to medical information and copies of your medical records apply to this telehealth consultation. Please note, not all telecommunications are recorded and stored. Additionally, dissemination of any patient identifiable images or information for this Telehealth interaction to any other parties or entities shall not occur without your consent.
 3. **Confidentiality:** Reasonable and appropriate efforts have been made to eliminate any confidential risks associated with telehealth consultation, and all existing confidentiality protections under state and federal law apply to information disclosed during this telehealth consultation.
 4. **Rights:** You may withhold or withdraw your consent to the telehealth consultation at any time without affecting your right to future care or treatment.
 5. **Disputes:** You agree that any dispute arising from the telehealth consultation will be resolved in Michigan, and that Michigan Law will apply to all disputes
 6. **Risks, Consequences & Benefits:** You have been advised of all the potential risks, consequences and benefits of telehealth. Your health care provider has discussed with you the information provided above.

I agree to participate in telehealth care with Ortho Care Physical Therapy, Inc. for the procedure(s) and/or service(s) above.

Signature: _____ Date ___ / ___ / ___ Time: _____ AM PM

If signed by someone other than the patient. indicate the relationship: _____

Witness Signature: _____ Witness Name in Print: _____

Date ___ / ___ / ___ Time: _____ AM PM

Please return in the enclosed envelope at your earliest convenience.

Patient Contact / EVisit/Telehealth appointment

If patient has missed more than 2 continuous appointments, tech staff will contact patient to inquire regarding reason for missing appointments and if due to sickness/Coronavirus, the patient will be asked if they would like to schedule a telehealth appointment.

Prior to calling patient pull patient's chart

Your last appointment was _____

How are you doing?

How are you doing with your home exercises?

Are you doing them regularly and as directed?

We are offering Evisit and/ or Telehealth appointments, would you like to schedule an appointment?

Yes _____ No _____

If Yes, phone and schedule an appointment time and enter in book and on computer (highlight in pink or orange depending on who will call back) beginning 3/30 at 2:00-3:30, 3 per day Monday - Thursday

Schedule in ½ hour blocks only

EMERGENCY DRILL - CLOSURE (PANDEMIC COVID-19)

DATE: _____

REPORT BY _____

TIME: _____

LOCATION: _____

ALL CLEAR: _____

PARTICIPANTS: (INCLUDE FULL NAME)

Print Full Name:

Signature

SEQUENCE OF EVENTS

REASON FOR CLOSURE? Pandemic/CDC Yes No

Patients Notified of closing? Yes No

Schedule had all phone numbers? Yes No

Was staff notified of closing? Yes No

Was everyone accounted for who was on the schedule per patient list?
 Yes No

Was answering message updated? Yes No

Was Post Office notified to hold mail Yes No

Were contingency plans made regarding mail pick up, billing Yes No

COMMENTS: _____

EMERGENCY/SAFETY COMMITTEE REVIEW DATE: _____

RECOMMENDATIONS: _____

03/23/2020

AFTER ACTION REVIEW AND IMPROVEMENT PLAN

Type of Drill _____

Date of Drill _____

Summary of Drill Findings (See Completed Drill Form for notes, attached)

Recommendations for Improvement:

Committee Member Completing Form

Date of Review

Corrective Action Taken:

Committee Member Completing Form

Date of Correction

03/23/2020

COVID PATIENT SCREENING DRILL - (PANDEMIC COVID-19)

DATE: _____ REPORT BY _____

TIME: _____ LOCATION: _____

PARTICIPANTS: (INCLUDE FULL NAME)

Print Full Name:

Signature

Dr. Apostolos Kerasiotis

Dr. Katie Palazzolo

Kathy Winkelman, PTA

Elena Kerasiotis

Shari Guarino

Amanda Lawson

Michelle Mattina

Evelyn Zacharias

SEQUENCE OF EVENTS

Patient contacted for Pre-Screening Questionnaire _____ Yes _____ No

Questionnaire reviewed with patient for COVID symptoms _____ Yes _____ No

Patient answered Yes to question regarding symptoms? _____ Yes _____ No

Staff advised patient of possible telehealth option? _____ Yes _____ No

Was patient informed of testing location phone number? _____ Yes _____ No

Was appointment rescheduled for follow up after testing? _____ Yes _____ No

Was patient directed to website for testing locations? _____ Yes _____ No

COMMENTS: _____

EMERGENCY/SAFETY COMMITTEE REVIEW DATE: _____

RECOMMENDATIONS: _____

07/08/2020

AFTER ACTION REVIEW AND IMPROVEMENT PLAN

Type of Drill _____

Date of Drill _____

Summary of Drill Findings (See Completed Drill Form for notes, attached)

Recommendations for Improvement:

Committee Member Completing Form

Date of Review

Corrective Action Taken:

Committee Member Completing Form

Date of Correction

07/08/2020

Coronavirus glossary:

Novel coronavirus and SARS-CoV-2

No, the virus known to have infected over 400,000 people isn't actually named "coronavirus." The word refers to any in a family of viruses whose structure presents crownlike spikes when seen under a microscope. The term "novel coronavirus" is a general term for the current type we're fighting. It became a fixture before the virus was given an official name: SARS-CoV-2.

COVID-19

You may be tempted to use COVID-19 as a synonym for coronavirus, but that will confuse matters. COVID-19 is the name of the disease that the novel coronavirus causes. It stands for "coronavirus disease 2019."

The disease brings on flulike symptoms, but dangerously affects the lungs by filling them with fluid at a rapid rate. Patients with extreme cases may need respirators and oxygen to help them breathe, often for weeks. The fear is that fatalities will occur when patient need for ventilators outstrips the supply.

Nonmedical masks and face coverings

The Centers for Disease Control and Prevention, the US authority on health policy related to infectious diseases, has issued a recommendation for people to voluntarily wear face coverings in public when staying six feet from others outside your household is not an option.

The key takeaway is that the material you're using to cover your nose and mouth is not a medical-grade mask needed by public health care workers. Face coverings can be made in a number of styles from materials like cotton, a laundered t-shirt or a bandana. Here's everything you need to know about coronavirus prevention and homemade masks, and a resource guide on how to make your own face covering or mask.

N95 and surgical face masks

COVID-19 is a respiratory illness, and coronavirus spreads through vaporized droplets. N95 respirator masks are the type most proven to protect you from acquiring SARS-CoV-2. Other varieties, including surgical masks and homemade, are not proven to be effective at blocking the smallest particles that could carry the virus, which can remain in the air for up to 30 minutes.

Homemade coverings (above) are regarded as effective at protecting other people from large droplets ejected through coughing and sneezing. If you have N95 or surgical masks at home, the medical community is asking for donations to help curb the shortage of masks.

Ventilators

A ventilator is a machine that helps a person breathe by expanding their lungs and supplying them with oxygen when it's too difficult to do so on their own. As the COVID-19 disease hospitalizes tens of thousands of people around the world, ventilators are critically low, and doctors are increasingly forced to decide which patients will receive their aid, and which will not. This is why ventilators are pivotal in the battle against COVID-19.

BiPap machine

A BiPap machine is a type of ventilator that some hospitals are using, or considering using, to help COVID-19 patients breathe. BiPap is short for bilevel positive airway pressure, and is similar to CPAP, or continuous positive airway pressure. These machines are commonly used for conditions like obstructive sleep apnea and pneumonia. If effective, they could potentially be used to treat more patients in need of ventilator support.

At-home coronavirus tests

Tests kits for COVID-19 that you can administer at home are being explored by the medical community and the FDA. The benefit of being able to find out if you acquired the virus without leaving the house -- potentially exposing others or yourself -- is appealing. Direct-to-consumer testing kits aren't authorized by the FDA at this point, however, and some fear that tests resulting in false negative results could endanger healthy people if the test-taker is actually positive for SARS-CoV-2.

PPE

Personal protective equipment, or PPE, refers to any gear necessary to minimize a person's exposure to harmful materials that could cause illness or injury -- gloves, full body suits, protective eyewear and so forth. In the case of the coronavirus pandemic, N95 masks for health care workers are in critically short supply.

Zoonotic disease

Coronaviruses are transmitted between humans and animals -- that's the "zoo" in "zoonotic." It's believed that the virus originated in a shrew bat before being transmitted to another animal, and then to humans. The SARS-CoV-2 virus can

be transmitted to some individual animals -- like a tiger at the Bronx zoo in New York -- through direct contact with an infected human. Domestic pets are not currently considered reservoirs to widely spread the disease, however. Other zoonotic diseases include anthrax, rabies, Lyme disease, H1N1 ("swine flu"), West Nile virus, salmonella and malaria.

WHO

The World Health Organization, often called WHO, is the global body that's become a clearinghouse of information, research and safety guidelines. SARS-CoV-2, then referred to simply as novel coronavirus, was first reported to the WHO on Dec. 31, 2019, days after the first patients were hospitalized in the Chinese city of Wuhan.

PCR testing

A testing protocol to identify if you've contracted the SARS-CoV-2 coronavirus. This test works by identifying the virus' DNA through a process called PCR, or polymerase chain reaction. The PCR test looks for telltale markers distinct to this viral strain. The sample can be obtained through a throat or nasal swab, which makes it ideal for the kind of drive-through testing centers proposed in countries like the US. More details about coronavirus testing [here](#).

Positive versus presumptive cases

How do you know if you're infected with the new coronavirus? Listing your symptoms isn't enough. Positive, or confirmed, cases are identified with lab tests. Presumptive cases are not. If you're exhibiting symptoms consistent with COVID-19 -- including fever, a dry cough and fluid accumulation in the lungs -- and have had contact with a confirmed case, you're still considered presumptive.

Community spread

SARS-CoV-2 is highly contagious, spreading through "respiratory droplets" (a cough, sneeze, transfer of saliva) and contaminated objects, like a door handle or other shared surfaces. Person-to-person spread means you can trace how the disease got from one person to another through direct contact, like shaking hands. Community spread refers to people in the same location contracting the virus without an obvious chain of events.

Community spread is an early sign that a disease can rapidly affect local, even global, populations. Read more at the Centers for Disease Control and Prevention.

Social distancing

In addition to thorough hand-washing, the WHO and CDC recommend the practice of social distancing to slow the spread of COVID-19 by keeping at least six feet away from others, refraining from touching and by staying indoors, especially if you're over 60, immunocompromised or suffering from an underlying condition. Local and national governments have responded by limiting gatherings of people, ranging from no more than 10 people to 50 or 250 or even 1,000.

Self-quarantine, self-isolation

People who largely stay inside their own home, hotel room or other space are said to self-quarantine or self-isolate. For example, many governments are asking travelers returning from afflicted areas to self-quarantine for two weeks. However, there's a technical difference. Quarantine refers to people who appear healthy, but could be at risk for exposure or infection. Isolation refers to separating positive or presumptive cases (see above) from the healthy population.

Mitigation, not containment

This phrase acknowledges that at pandemic proportions, nations can't contain the spread of coronavirus. But with social distancing, self-quarantine and isolation, the burden of COVID-19 can be mitigated. In other words, slowing down the rate of infection can increase chances of survival by avoiding overcrowding hospitals, running short on pivotal supplies before they can be replenished and overworking medical staff. This is a deeply sobering account of what happens when the COVID-19 disease overwhelms medical and support systems.

Pandemic versus epidemic

WHO officially declared the coronavirus SARS-CoV-2 a pandemic on March 11. The word "pan" (which roughly means "all") refers to the global nature of the spread, affecting virtually every country and region around the globe. An epidemic refers to a more localized region. Before reaching places like the US, coronavirus was considered an epidemic in China's Hubei province, and then in the country itself. Here's more on pandemics versus epidemics.

Flatten the curve

Without mitigation, social distancing and all the rest, epidemiologists and other health experts predict a sharp increase in COVID-19 cases that looks like a tall, narrow spike on a graph. By following guidelines, the projected model looks shorter and spread out over time. The curve is flatter, milder, less pronounced.

The hope of flattening the curve is to reduce fatalities by buying hospitals time to treat and scientists time to discover therapies and create a vaccine.

Shelter in place

On March 16, six counties in the San Francisco Bay Area ordered residents to "shelter in place," a directive aimed at keeping people in their homes for three weeks, with the order widened to the whole state a few days later. It's now being implemented around the world. All nonessential businesses are shuttered, and with the exception of shopping for items like groceries and pharmaceuticals, picking up food and taking walks while maintaining a distance of six feet from others, locals are expected to stay inside. It's a fairly strict measure aimed at curbing community spread.

An abundance of caution

The preemptive closure of offices, businesses and schools ahead of positive cases has often been met with the phrase "due to an (over)abundance of caution."

70% isopropyl alcohol

Washing thoroughly with soap and water is the best way to kill the coronavirus on the skin, but surfaces can be harder to disinfect. Experts say that disinfectant wipes and spray, and solutions made with 70% isopropyl alcohol are also effective at destroying the virus' structure. But be careful. Making your own hand sanitizer and other cleaning agents can be dangerous, and isn't recommended.