

TEN FAQs COVID-19

March 27, 2020

PRESCRIBING DURING COVID-19

1. The media is carrying stories surrounding certain anti-malarial, antibiotic and antiviral therapies used in the treatment of COVD-19 patients and are asking me to prescribe this as a precautionary treatment if they do contract COVID-19. Any advice?

The three Colleges of Pharmacists, Registered Nurses, and Physicians and Surgeons have released this <u>joint statement</u>. CPSM may be reviewing prescriptions of these drugs and prescribers must be able to demonstrate good medical care.

2. As a cautionary measure, should I keep an office supply of hydroxychloroquine, azithromycin, or any other drug that might prove beneficial for treating COVID-19?

No. These drugs have an intended use and prescribing these drugs as a precautionary measure leads to drug shortages and is compromising care for other patients. Additionally, should these or other drugs prove useful in combating COVID-19 their use will need to be carefully managed and preserved for those who need them the most.

3. Can I prescribe these drugs for myself or my family?

No. During a pandemic when resources may become scarce, actions like these dramatically depart from the core values of medical professionalism, may be in contravention of the *Code of Ethics and Professionalism* and the Standard of Practice of Good Medical Care, and undermine the trust the public has in the profession at a time when they are most vulnerable.

4. My patient is in self-isolation or isolation due to a confirmed or potential positive COVID-19 test. How should I help patients access their regular medication?

Tell the patient not to go into the pharmacy as it's important for these patients to stay home and not put patients and pharmacy professionals at risk, especially as pharmacy professionals do not have access to any personal protective equipment. Fax the prescription to the patient's pharmacy of choice and explain the situation. The patient and pharmacy can then coordinate to arrange for delivery of the medication or alternative pick-up by a family member, friend, etc.

5. On another note, should I be faxing prescriptions in accordance with social distancing?

Pharmacists are asking prescribers, where possible, to please fax prescriptions to pharmacies to minimize personal contact and wait times at the pharmacies.



PROVIDING MEDICAL CARE

6. Younger healthier colleagues from our physician group are being assigned to assess suspect/confirmed COVID-19 positive patients over other colleagues who have higher risk conditions. Therefore, I will be at a higher risk to both contract COVID-19 and to transmit it to my family. What are the ethics of this?

This is one among many ethical issues confronting the profession at this challenging and exceptional time. Healthcare professionals are very anxious about COVID-19; not only in terms of their own wellbeing, but also concerning that of their families, friends and colleagues. Risk mitigation is essential in this context and involves a difficult balancing.

There is a need to recognize that there are healthcare professionals in the system that are at higher risk. We all need to work together to appropriately support these people. It is reasonable to support our colleagues more at risk by reducing their potential exposure to the virus, usually through strategic allocation of resources. Much of this decision making is institutional and beyond the control of the College. The healthcare system is in an extremely difficult situation and there are no easy answers. If you feel there are legitimate risk factors in your life that need to be considered, it may be wise to raise these to your colleagues so that the team in which you work can find a workable solution.

CPSM's position that **members have a duty to continue to care for their patients and provide care to other patients during a pandemic**. You are urged to carefully review the first <u>FAQ on COVID-19</u> and the Code of Ethics and Professionalism (specifically to the 'Commitment to self-care and peer support' and 'Physicians and colleagues' portions of the Code of Ethics.)

As physicians we have a shared accountability to patients and a duty to place their interests above our own. These are the fundamental principles that should guide you now.

7. Some physicians live in other provinces, but practice in Manitoba or the converse. With the restrictions on border crossings can I still practice in Manitoba if I commute from Toronto?

<u>Shared Health guidelines</u> cover healthcare providers treating in Manitoba. CPSM expects every member to comply with these.



8. Should I defer non-essential diagnostic testing for some of my patients? What is essential during a pandemic?

Some of you may not have seen the <u>memo from the Chief Provincial Public Health Officer</u> that only essential diagnostic testing – laboratory, imaging and cardiac services, should be ordered for both inpatient and outpatient populations.

Tests are generally considered essential if they will guide immediate care management decisions. Use your professional judgement and clinical knowledge to determine whether testing is essential. Regular monitoring and testing of patients requiring INR, some therapeutic drugs, etc. should still take place.

This is a reminder of your duty to check the <u>Shared Health website</u> daily!

9. With CME unavailable now I don't have enough hours for my CPD for the year. Should I be worried over getting in trouble with CPSM for not satisfying these requirements?

To support you during the significant pressures you are experiencing, both personally and professionally, CPSM is supporting the following actions by the certifying Colleges:

- <u>CFPC</u>
 - Waiving the 2019-2020 annual continuing professional development (CPD) requirements (25 certified and/or non-certified credits)
 - Extending all current Mainpro+ cycles by one year to allow you more time to acquire 250 credits
- Royal College (announcement forthcoming)

These requirements will be waived and/or extended by the CPSM Quality Improvement program in accordance with the certifying colleges.

10. Has CPSM made any provisions to register out of province or retired physicians?

CPSM is working with Shared Health to ensure medical practitioners' services are located where most needed. Please contact <u>Shared Health</u> then you will be linked with CPSM.