

Blog: 21<sup>st</sup> October 2021

## **What will the new normal be when we eventually get out of lockdown?**

It's hard to predict for the community, but I can tell you what it will mean for our surgery and our patients. We will have to learn to live with it in the community. Hopefully vaccination will give sufficient cover to most of us so we avoid having covid altogether. Those of us who are vaccinated yet do get covid should have a much milder dose and not end up in hospital, especially not in Intensive Care and on a ventilator.

We are worried about our vulnerable patients. That is the very elderly; those having chemotherapy for cancer as well as those battling cancers especially of the blood and immune system; those with complex medical illnesses especially damaged lungs, diabetes and tired kidneys; the patients on medications designed to suppress immune systems like patients with Rheumatoid Arthritis, psoriasis and similar; our pregnant patients; those with some genetic illnesses like cystic fibrosis; the morbidly obese and all those children under 12 years of age who can't be vaccinated yet. This is what we are going to do.

### **Triage at booking:**

All patients will be asked about being a contact of a positive patient or having the symptoms of covid before a booking is made. These symptoms are:

- cough
- runny nose
- fever
- headache
- body aches [both muscles and abdominal pains]
- marked tiredness

If any questions are positive then that patient will have two options. They can come in that day for a carpark covid test. If it negative they can then opt to see the doctor of their choice. And that will only be 1-2 days later. In the meantime they have the option of a telephone consultation with the doctor and maybe medications will be prescribed direct to the pharmacist.

If they want to be seen that day then they will need to be seen in our late morning covid clinic which will be from 10-12 am each morning with the doctors taking it in turns down there. The hours of this clinic may change depending on demand, but the doctor on duty will be seeing patients in the far back door one at a time, and in full PPE gear which will be changed between patients and the place cleaned between patients. On fine days the patients can line up on the stairs down the back and come in one at a time only, or with one essential support person. On wet days they will be called in one at a time from their car.

Covid swabs will be done down at that clinic routinely. Patients seen in this clinic may just turn out to have other viruses, exacerbations of COPD, or even sinus infections.

### **'Covid Clinic'. [It will be well labelled and called Redzone Clinic]**

This is our Red Zone and will not be allowed to mix in anyway with the rest of the clinic. Please leave children and unnecessary people at home and preferably use the back carpark for cars. We converted a back room – one of these we have been using for covid vaccinations – to a full surgery at the beginning of the pandemic back early last year. It has its own separate entrance and it will be

a one in /one out policy. After the last Lockdown there was an explosion of other viruses in the community, a sort of catch-up that got known as the 'covid debt'. Some will remember the hospital being overloaded with babies and young children with croup/bronchiolitis/breathing problems back in July-September 2020. Despite it being summer I expect there will be a lot of viruses again in the community after lockdown ends. These too will be seen in our clinic down the back of the surgery. A different doctor will be on each day as it's mean to make just one of us live in that superhot PPE gear all summer!

### **Unvaccinated patients.**

At the moment we are checking patients out with telephone consultations, and if that doesn't sort the issues, sometimes we get the patient to send pics to us via email to reception and ring them back. If that's not enough we see the patient in the carpark – as I said in the last blog that doesn't work for some parts of the body especially boobs and bums- and we arrange to see the patient inside with the doctor all geared up in PPE gear and coming in via the front side door.

Whatever the level of alert present, we are continuing to do this with our unvaccinated patients who are by far the bulk of the people catching covid in the community and have a more serious illness and are spreading much more virus into the air. Over 80% of the community acquired cases of covid are in unvaccinated people: less than 20% are the vulnerable people. Our surgery always had vulnerable patients here in normal times, and this protocol is to protect them. We will see our unvaccinated patients, and by that I mean patients who have not had a covid vaccination recorded with us and at least two weeks prior to being seen, but these are the conditions we will see them on.

I'm proud to report we continue to hold vaccination clinics for all who request them, even if these are held with less frequency due to a falling off of demand. We already have over 88% of our eligible patients vaccinated and our staff continues to do their amazing, safe and secure work. We have vaccinated over 6000 patients here, a great total for a small practice like ours.

### **Covid swabs**

Our nurses are available to do covid swabs on any patient. We provide swabs for anyone with symptoms, who is a contact or was at a location of interest at the specified times, or truckies and the like who need to cross the border. If you are a contact it is possible to have a swab too early and it come back negative when really you are just incubating and multiplying the virus up still.

While this Delta variant can give a weak positive swab as early as 48-72 hours after contagion, a negative result is more reliable after at least day 5. In medical terms that means at 4 days after contact as we count the beginning as day 1 not day 0. If you have symptoms or are a contact, you will need to self-isolate at home until the swab result is in. We can do swabs for people who are not our patients. This means our receptionists have to get full details over the phone first so we can accurately fill in the paperwork that goes with all laboratory specimens. If we have already done a vaccine here, or the person was once a patient here, we will have the details already.

To get a covid swab, just ask reception for an appointment so the carpark doesn't get too overloaded and once you arrive in the carpark - ring reception again and a nurse or doctor will gown up in PPE and come out and do it. That PPE gear is discarded after each excursion into the carpark, and does take a few minutes to put on and take off.

### **Booster jabs**

These are now approved for a very small group of patients who are most likely to have had a poor

response to the two jab course because of medication they are on, or immune system cancers like leukaemia and lymphomas. A doctor needs to prescribe these, and they have to be at least 8 weeks after the last jab. The details are not yet clear yet which doctors make the decision but no doubt we will find out in the coming week. We should be able to notify all those patients who are eligible. It helps if we have your email address and up to date phone numbers!

Be well, be safe too, as we strive to be. Jacqueline and the team at Tiakina Te Ora.