Clinic Preparedness Checklist
Checklist to prepare your clinic for COVID-19

**Patient Screening**

- Patients being seen for non-essential or elective medical/surgical services should be rescheduled or offered telemedicine service irrespective of their exposure or symptom status (See the CMS guidance on elective surgery and procedures).
- For patients needing urgent or essential care, prior to an appointment or on the day before the appointment, ask the patients the questions in Box 1. If “yes” to any of the questions, reschedule the visit or offer telemedicine service.
- Place a visit restriction (only the patient being seen by the doctor is permitted in the office during the visit, unless requiring assistance) and inform the patients of the visit restriction prior to the visit and at the entrance of the clinic.
- At check-in, ask the patient about the presence of flu-like symptoms (cough, fever, sore throat, or shortness of breath). If present, take care of the urgent dermatologic condition and refer to his/her PCP for evaluation and testing as guided by your local health department guidance.

**Box 1. Screening questions for COVID 19**

- Do you have respiratory symptoms including fever and/or cough with or without shortness of breath or any other flu symptoms?
- Have you been in close contact with someone with COVID-19?

**Use of Personal Protective Equipment for HCPs**

- Provide personal protective equipment (PPE) in accordance with current CDC guidance and OSHA’s standards (29 CFR 1910).
- Consider wearing masks and protective eyewear when taking care of patients to reduce touching facial mucous membranes.
- Whenever the staff member needs to remove or adjust the PPE, first wash their hands with soap and water or rub them with an alcohol rub.
- If the patient with symptoms or possible COVID-19 exposure must be seen that day, apply droplet precautions, which includes providing the patient with a mask. Place the patient in an exam room with the door closed and notify all staff caring for the patient.
- Consider the necessity of conserving PPE during the pandemic. If you typically wear a mask for surgical procedures, consider wearing the same mask all day. If you don’t typically wear PPE there is no current recommendation to do so while treating non-symptomatic patients.

**Cleaning and Disinfection**

- Using the WHO recommended products in Box 2, wipe exam tabletops, countertop, exam beds/tables, doorknobs, and exam light buttons/handles between each patient during a clinic day.
- Using the WHO recommended products in Box 2, wipe all common high-touch areas at the end of the day, including but not limited to:
  - Exam room: exam tabletops, countertop, exam beds/tables, doorknobs, and exam light buttons/handles, chairs, and faucet handles.
  - Bathroom: all bathroom surfaces, urine sample pass through areas/trays, and toilets.
Box 2. Cleaning products recommended by the WHO
- 70% ethyl alcohol to disinfect small areas between uses, such as reusable dedicated equipment (for example, thermometers).
- Sodium hypochlorite at 0.5% (equivalent to 5000 ppm) for disinfecting surfaces.
- Any disinfectant products that meet the EPA’s criteria for use against SARS-CoV-2.

Other Office Preparedness Measures
- Place additional hand sanitizers and wipes in the waiting room. Clean hands with soap and water or an alcohol-based hand rub between each patient and when in and out of the exam room.
- Practice social distancing. Greet patients and staff with a nod, smile and/or wave. Do not shake hands or hug. Rotate staff if resourcing permits.
- For all patients regardless of symptoms, limit points of entry and ensure patients adhere to respiratory hygiene, cough etiquette, and hand hygiene.
- Reduce chairs in waiting room and appropriately space them apart.
- Remove magazines and other reading materials from patient care areas.
- Where practical, consider having patients wait in their car until called to be seen by the doctor.
- Educate patients on signs and symptoms of COVID-19 infection.

Post-exposure Procedure
- Follow the CDC’s updated interim guidance on the risk stratification for potential HCP COVID-19 exposures in the health care workplace to determine and follow the recommended level of monitoring and work restrictions.
- If any staff experience symptoms or exposure to a confirmed case, they should not come to work and be evaluated by their PCPs or referred to the appropriate agency or local health department.

For more information, please visit www.aad.org.