Covid-19: remote consultations

This graphic, intended for use in a primary care setting, is based on data available in March 2020, much of which is from hospital settings in China. It will be revised as more relevant data emerges.

1. Set up
   - Prepare yourself and decide how to connect
   - Have current ‘stay at home’ covid-19 guidance on hand
   - Video is useful for severe illness
   - Scan medical record for risk factors such as:
     - Diabetes
     - Pregnancy
     - Smoking
     - Anxious patients
     - Chronic kidney or liver disease
     - COPD
     - Steroids or other immunosuppressants
     - Cardiovascular disease
     - Asthma

2. Connect
   - Make video link if possible, otherwise call on the phone
   - Confirm patient’s identity: Name, Date of birth
   - Check where patient is: Where are you right now?
   - Check patient’s phone number in case connection fails

3. Get started
   - Quickly assess whether sick or less sick
   - Rapid assessment: If they sound or look very sick, such as too breathless to talk, go direct to key clinical questions
   - Establish what the patient wants out of the consultation, such as:
     - Clinical assessment
     - Referral
     - Certificate
     - Reassurance
     - Advice on self isolation

4. History
   - Adapt questions to patient’s own medical history
   - Contacts: Close contact with known covid-19 case
   - Immediate family member: unwell
   - Occupational risk group
   - History of current illness: Date of first symptoms
   - Most common presentation:
     - Cough
     - Fatigue
     - Fever
     - Short of breath
     - Cough is usually dry but spumton is not uncommon
     - Up to 50% of patients do not have fever at presentation
   - Interpret self monitoring results with caution and in the context of your wider assessment

5. Examination
   - Assess physical and mental function as best as you can
   - Over phone, ask carer or patient to describe:
     - State of breathing
     - Colour of face and lips
   - Over video, look for:
     - General demeanour
     - Skin colour
   - Check respiratory function - inability to talk in full sentences is common in severe illness
   - How is your breathing?
   - Is it worse today than yesterday?
   - What does your breathlessness prevent you doing?
   - Self management: fluids, paracetamol
   - Flows, oxygen saturation
   - Temperature, Pulse
   - Peak flow, Blood pressure, Oxygen saturation
   - Patient may be able to take their own measurements if they have instruments at home

6. Decision and action
   - Advise and arrange follow-up, taking account of local capacity
   - Likely covid-19 but well, with mild symptoms
   - Likely covid-19, unwell, deteriorating
   - Relevant comorbidities
   - Unwell and needs admission
   - Proactive, whole patient care
   - Ambulance protocol (999)
   - Reduce spread of virus - follow current government ‘stay at home’ advice
   - Safety netting: if living alone, someone to check on them
   - Maintain fluid intake - 6 to 8 glasses per day
   - Seek immediate medical help for red flag symptoms

* Breaths per minute  † Beats per minute  ‡ If oximetry available for self monitoring

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