

COVID-19 Daily Update

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April 22, 2020

Dear Colleagues:

In order to provide updates on the evolving response and best practices related to the COVID-19 pandemic, AHP will be delivering brief, critical updates on an ongoing basis addressing important highlights and frequently asked questions.

TOMORROW: Behavioral Health Consultation - April 23rd, 7:30 am

Join the AHP Behavioral Health team as well as members from our pharmacy, care management and social work teams every Tuesday and Thursday morning from 7:30am – 8:00 am via Zoom and/or phone for just in-time, virtual consultation support for the behavioral health needs of both your pediatric and adult patients. Click on the zoom link: <https://urmc.zoom.us/j/948873484> or dial in: (646) 876-9923, Meeting ID: 948 873 484

Daily COVID-19 Response Call

AHP will be hosting a call at 12:15 pm each weekday to share new information and/or be available for provider questions and concerns. Please **dial-in to 1 669 900 6833** and enter **Meeting ID: 989 6918 4459** or click <https://urmc.zoom.us/j/98969184459>

Expanded Essential Pediatric Preventive Visits Plan - Effective Date: April 27, 2020

With the understanding that primary care practices are able to promote appropriate physical distancing through scheduling and workflow modifications, have adequate PPE and are utilizing all recommended precautions and cleaning/sanitizing practices, we will move forward with the following community consensus recommendations for pediatric primary care:

1. Beginning next week, we recommend all WCC visits for children ages 0-5 years be considered essential, with priority for newborns, babies and toddlers through 2 years (related to immunizations and need for physical examination, lead screening, hemoglobin testing, etc.) AND 4 or 5 year olds needing immunization booster vaccines.

Including all well child visits 0-5 years is essential because of the critical, time-sensitive need for monitoring growth, vision, hearing and developmental/social-emotional risks requiring referral and intervention.

Additional essential preventive visits include those for children who may be behind in vaccinations, or who require a physical exam and monitoring/treatment related to complex or chronic conditions, and those in need of LARC (long-acting reversible contraception) or Depo-Provera.

2. By mid-May, we anticipate expanding further to include 10-12 year olds, again with the rationale of minimizing risk of vaccine-preventable disease (Tdap, HPV, and Meningococcal vaccines) and will consider **16 year olds and college students**.

The collaborative Pediatric Primary Care advisory group will continue to meet weekly, follow community rates of infection, and monitor guidance from the state and county health departments.

UR Medicine Update: Essential Visits

UR Medicine clinicians are currently reviewing patient lists to determine if any patient will suffer harm - in outcomes, advancement of disease or quality of life - from waiting ten weeks for a procedure or surgery. For those patients for whom that wait would not result in harm, the procedure will be considered elective or non-essential. If they will suffer harm by waiting ten weeks, that procedure will be considered essential and will be scheduled. Referring PCPs will be notified of any pending procedures, and they can be assured that all departments are working closely with Infection Prevention to ensure the safety of patients whose clinical condition necessitates a procedure or surgery.

Missed Your PPE Pickup?

If you requested a PPE allocation for today but were unable to pick it up, please contact **Renée Sutton** to reschedule. We anticipate that the next PPE pickup will be Wednesday, May 6th which we will confirm closer to that date.

COVID Testing Guidance

In addition to testing for healthcare workers and long term care residents, providers may consider testing symptomatic essential workers (e.g., restaurant, transit, grocery store workers) and any moderately symptomatic (febrile, cough, shortness of breath) patients. We are working on revising the COVID Testing Flowchart to reflect this new guidance, and we will share that information when it is complete. **Testing reagent and supplies remain limited, so should collection outstrip testing capacity, this guidance may be revised.**

We continue to partner with Dr. Mendoza and County Health Department officials on preparedness and response protocols and will convey information as it becomes available.

Thank you for your continued collaboration in this important public health endeavor.

All the best,



J. Chad Teeters, MD
Executive Medical Director



LJ Shipley, MD
Pediatric Medical Director



Renée Sutton
Senior Director, Provider
Relations

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COVID-19 Resource Links

Golisano Children's Hospital Coronavirus Information for Families

Project Teach: Seven Ways to Support Kids and Teens Through the Coronavirus Pandemic, [in English](#) and [Spanish](#)

American Academy of Pediatrics COVID-19 Site

Monroe County Health Department

CDC Coronavirus Site

New York Department of Health Coronavirus site

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