

# COVID-19: Return to Clinic Best Practice

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## Appointment Guidance

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### Before the Appointment

#### Clinic Policy and Protocols

- ✓ Pre-appointment health screening check (questionnaire can be sent and returned electronically or carried out over a telephone consultation):
  - Are you currently suspected of having COVID-19?
  - Have you been in contact with or are living with someone suspected or confirmed of having COVID-19?
  - Do you have a fever, or have you had a high temperature in the last 14 days (greater than 37.8°C)?
  - Have you had a loss of or change in your normal sense of smell and/or taste?
  - Have you had a cough or any other respiratory symptoms in the last 14 days?
  - Have you recently returned from abroad in the last 14 days?
- ✓ Adopt a 14-day restriction on treating patients who have travelled overseas
- ✓ Avoid walk-in patients and ideally booking should be made via telephone, electronically or an online booking system and not in person
- ✓ Consider sending confirmation emails with additional information on new clinic and pre-appointment policies for patients (please see below)

#### Treatment/Clinical Room

- ✓ Treatment couch to be covered with disposable couch roll only
- ✓ Stagger appointment times to reduce congestion and to allow adequate spacing between patients in order for sanitisation of treatment rooms and other areas
- ✓ Disposable covers should be used on pillows
- ✓ Do not use blankets and any non-disposable cover for patients
- ✓ Clean treatment couch, counters, trolleys, mirrors, handles, iPads etc. in-between patients
- ✓ Remove all unnecessary items from countertops including merchandise
- ✓ All disposable items should be disposed of using NHS England COVID-19 waste management standard operating procedures
- ✓ A foot-operated bin should be used for disposal

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### Pre-appointment policy for patients:

- ✓ Advise patients to not attend their appointment if they are feeling unwell, live with household members who are unwell, have a temperature or any other symptom of COVID-19
- ✓ If possible, upon arrival, advise patients to ring the bell and wait to be let in or call/text the patient when the practitioner is ready
- ✓ Request that patients attend their appointment unaccompanied
- ✓ Request that patients do not arrive before their appointment time
- ✓ Request that patients limit the wearing of jewellery and that minimal make-up should be worn
- ✓ Request patients to limit the personal possessions that they bring with them and that the clinic may reserve the right to prevent personal items entering the treatment rooms
- ✓ Advise patients to follow the markings in the waiting area and clinic to ensure 2 metres distanced is adhered to at all times, except when undergoing treatment

### Upon Patient Arrival to the Clinic

- ✓ If a patient attends the clinic and displays COVID-19 symptoms they should be candidly questioned and in cases of a new cough, fever, myalgia or recent infection must be asked to reschedule and promptly requested to leave the site
- ✓ Upon arrival, ask the patient to perform appropriate hygiene activities e.g. washing their hands for 20 seconds with antibacterial soap or hand sanitizing with at least 60% alcohol
- ✓ Patients may be provided with PPE including fluid resistance surgical face masks and overshoes to don upon entry and after washing hands
- ✓ Consider offering a COVID-19 Antibody finger-prick test to patients upon arrival to provide yourself and the patient with the assurance required to proceed safely with the administration of the treatment

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- ✓ Adhere to and communicate the 'no handshake' policy.
- ✓ Consider using an electronic consent form for all procedures carried out:
  - Consider including in the consent form the implications of a further lockdown on managing complications and immunological reactions
  - Consider including in the consent form that a face-to-face follow up/review appointment may not be possible if either practitioner or the patient needs to self-isolate or if there is a further lockdown
- ✓ It is recommended that patients sign an additional specific COVID-19 consent form ensuring the patient is fully aware of any increased risk relating to individual treatments.

## Before Every Appointment

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- ✓ Designated clinic staff to be responsible for cleaning all patient contact surfaces in-between patients e.g. door handles and toilet facilities if used
- ✓ Fluid repellent surgical face masks (Type IIR) or FFP2 respirators and eye protection should be used for appointments that do not involve aerosol generating procedures (AGPs), at the discretion of the practitioner
- ✓ Gowns or coveralls should be worn for any higher risk treatments and FFP3 respirators should be worn for AGPs e.g. lip fillers, perioral and intraoral treatments, on a single use basis, at the discretion of the practitioner
- ✓ Ensure masks and respirators are fitted well and there is an effective seal around the face before each appointment and patient contact
- ✓ Check that the patient has performed appropriate hygiene activities e.g. washed their hands for 20 seconds or hand sanitizing with at least 60% alcohol.
- ✓ Ensure a full medical questionnaire and pre-appointment wellness check has been completed and check with the patient that the answers provided still apply.

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- ✓ Make sure the mask or respirator does not touch or pressure the treated facial area and change your mask or respirators if it becomes wet or contaminated
- ✓ Avoid touching the treated area, especially with unwashed hands
- ✓ Hand hygiene must be performed immediately before every episode of direct patient care and after any activity or contact that potentially results in the hands becoming contaminated

## After the Appointment

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- ✓ When the treatment is complete, the patient must be advised to wash their hands before leaving the clinic
- ✓ If possible, patients to leave via a different exit than entry. Consider a one way system and floor plan, which clearly defines entrance and exit doors

*Our bespoke COVID-19 page and documents are for guidance purposes only; the responsibility remains with the practitioner at all times. It is the responsibility of the practitioner to ensure clinical good practice and public health is prioritised at all times, whilst following Public Health England recommendations.*