

COVID-19 Helpful FAQs for Baltimore City Outpatient Providers

April 17, 2020

Who should get tested for COVID-19 in Baltimore City?

Not everyone needs a test. Currently COVID-19 is limited and according to the MD Department of Health should be [prioritized](#) to the following groups:

- Hospitalized patients, who should be tested by the most expeditious means available
- Symptomatic Emergency Medical Service Personnel, healthcare workers, and law enforcement personnel;
- Symptomatic patients in nursing homes, long-term care facilities, or in congregate living facilities housing individuals who are medically fragile; OR
- Symptomatic high-risk unstable patients whose care would be altered by a diagnosis of COVID-19

Where can my patients get COVID-19 testing in Baltimore City?

COVID-19 Baltimore City testing is still limited but rapidly evolving. Each testing site has its own protocol, restrictions, and availability. [Here](#) is a list of non-office based COVID-19 testing sites in Maryland.

How should I manage my patients who are COVID-19 infected?

CDC recommends healthy patients can be monitored, self-isolated at home (provider should perform periodic check-in especially the second week with the possible risk of progression to severe illness). People at higher risk should contact their healthcare providers early, even if illness is mild. Older adults and those with severe underlying chronic medical conditions are at higher risk and need closer contact. Emergency Departments and hospitals are reserved only when needed and are not for screening or low risk/minimal disease. Guidelines are important ([link](#) here for full CDC guidance) but providers' clinical experience and judgement are key to care.

What guidance can I give my patients who are not sick about wearing masks?

We know now that COVID-19 infected people can be asymptomatic/presymptomatic and still transmit the virus to others. The CDC [recommends](#) wearing cloth face coverings in public especially when other physical distancing measures are difficult or impossible to maintain (e.g. grocery stores, pharmacies, etc.). People should continue to maintain at least a 6-foot physical distance from others outside your home whenever possible. These cloth face masks should not be confused for PPE that healthcare workers should wear in a clinical setting.

How can I request Personal Protective Equipment (PPE)?

We continue to request materials from the State, but quantities of supplies on hand are extremely limited. Baltimore City healthcare partners should first attempt to meet their needs through the normal supply chain and back-up vendors. If your

facility's stock is critically low, follow the steps below to submit a request for emergency medical supplies:

1. Complete the MDH Emergency Medical Materials Request Form [here](#)
2. Send the request form to MedResourceRequest@baltimorecity.gov
3. BCHD staff will contact you directly to discuss the specifics of your request within 48 hours for review and processing.

What therapeutic options are available for COVID-19 patients?

There is currently no US Food and Drug Administration (FDA)-approved drugs for the treatment of COVID-19. 6. With regards to hydroxychloroquine (HCQ), recent studies from [France](#) and [Brazil](#) could not support it as an effective treatment for COVID-19. Some study patients in France needed to discontinue HCQ due to adverse side effects like cardiac arrhythmia and the [Brazil](#) study was halted after patients on high dose HCQ developed ventricular tachycardia before death. The IDSA guideline panel currently recommends HCQ only in the context of a clinical trial due to current knowledge gaps. Stockpiling these medications is strongly discouraged. For a more extensive discussion of available options please click this CDC [link](#).

How have providers adapted to [expanded telehealth](#) during COVID-19?

Providers have described the challenge of converting a physical practice and to virtual practice (and virtual waiting rooms) and adapting workflows in a matter of weeks. They have raised concern about serving older adult patients at high risk of COVID-19 who are not all telehealth capable. Of note, telephonic telehealth services are now authorized for [general health care](#), [behavioral health services](#), and [psychiatric rehabilitation services](#). Some providers note that this practice change also highlights telehealth's benefits for high risk patients that should not be exposed to clinical settings.

How can my older patients at home receive support?

[Meals on Wheels](#), visiting nurses and caregivers, support from family, phone calls and videochat to fight loneliness, [MD Department of Aging Senior Call Check](#), [CharmCare](#) (free online COVID-19 resource guide for free or reduced-cost services)

What mental health resources are available to support myself, my colleagues, and my patients?

- Maryland Crisis Hotline: Dial 2-1-1 then press 1
- CDC Disaster Helpline 1-800-985-5590 or text "TalkWithUs" to 66746
- National Suicide Prevention Lifeline 1-800-273-8255.

What is Maryland doing around hospital surge preparedness?

- The Baltimore Convention Center is being stood up as a step-down facility for patients who are discharged from Baltimore hospital but not appropriate for home isolation.
- Expanding within facilities and standing up tents and modular units – including ICUs to care for COVID-19 patients

Maryland Providers - COVID-19

- Volunteer staffing opportunities – Maryland Responds Medical Reserve Corps (MRMRC) [link](#)