# **COVID-19 PATIENT INFORMATION SHEET**

COVID-19 disease is highly contagious. Although it causes mild illness in most cases, it may also cause very severe symptoms requiring hospitalisation, and death. It is reported that overall, 2-3% of infected people die due to the infection [1,2]. Several risks factors, including comorbidities and age, increase the likelihood of becoming seriously ill and dying due to COVID-19 [3]. This is one of the reasons why we screen our patients before they attend the clinic, as part of the decision-making process for a face to face consultation. It appears that a proportion of Covid-19 infected people do not develop symptoms throughout the infection. A systematic review estimated this may constitute about 15% of total infections [4]. However, these figures should be interpreted with caution given that research on the topic is at a very early stage.

## TRANSMISSION AND INCUBATION PERIOD

The virus is transmitted through respiratory droplets. These can enter the body through the eyes, nose and mouth either directly (through sneezing, coughing or speaking) or after touching a contaminated object [5]. A key feature of this virus is that can be transmitted by people who have no symptoms. These can be divided into 2 groups: pre-symptomatic and asymptomatic [4].

Pre-symptomatic are people who have the virus during the incubation period (i.e. time between when you contract the virus and when your symptoms start). The length of the incubation period may vary. It has been estimated to be 5 days on average [2,6] and in over 99% of the cases does not exceed 14 days [6]. Research shows clearly that a very significant proportion of Covid-19 infections is spread by pre-symptomatic people [4,7]. In fact, this could be as high as 40-60% of infections according to a systematic review [4]. This is the main reason why contact-tracing operations (such as NHS test and trace) are important.

Asymptomatic people are those infected who do not develop symptoms. As previously explained, the research on this group is limited at this point [8]. Estimates in April 2020 suggest this may constitute about 15% of total infections [4]. At present, it is not clear how infectious truly asymptomatic people are towards other people and what is their role in spreading the epidemic [9].

## **RISKS/BENEFITS ANALYISIS**

It is paramount that you discuss with your therapist both the risks and benefits of all treatment options including face to face consultations, virtual consultations and no treatment. Please ask all the questions you feel are relevant. You should feel you have all the information you need to make an informed decision along with the physiotherapist. Having to self-isolate as part of the NHS Test and Trace programme should also be considered as a risk connected to Covid-19.

## VIRTUAL FIRST APPROACH

In accordance with the current Charted Society of Physiotherapy guidelines [10], we employ a 'virtual first' approach. All physiotherapy consultations should be performed remotely whenever possible. Face to face physiotherapy treatments should be limited to those conditions causing significant functional limitation (e.g. limit the ability to work, perform activities of daily living, sleep) that cannot be addressed effectively with remote consultations and where the potential benefit from the session clearly outweighs the risk involved.

## **BEFORE THE APPOINTMENT**

In order to protect the health of our patients and staff, we require our patients to observe a **strict social distancing policy for a minimum of 48 hours prior to the face to face appointment**. This is in the attempt to minimise the risk of COVID-19 transmission during the appointment and is based on research showing that people are most contagious from 2-3 days before becoming symptomatic [4,7]. This research was referred to by the Chief Medical Officer, Prof Whitty, during the Coronavirus press conference on 18/05/20 and constitutes the basis for the NHS test and trace programme as well.

During the 48 hours prior to the face to face appointment we require our patients (and anyone attending the clinic with them) to:

- observe 2 meters social distance wherever possible (and 1 metre plus as a minimum from 04/07/20). Avoid any place where this is not possible including public transport.
- keep good hand hygiene
- not visit any care home
- not visit any hospital (you should go for emergency or scheduled hospital appointments, but please cancel/re-arrange your appointment at Physiokinetic)

For those working in hospitals or care homes, appointments can be organised around shift schedules to facilitate social distancing requirements [11-13].

Please bring with you a face mask to the appointment. If you do not have one, we will provide one for you. Please consult the up to date guide by WHO on how to correctly wear/remove a face mask [14]:

https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-howto-use-masks

## **DURING THE APPOINTMENT**

Your therapist will be wearing PPE as per recommendations by Public Heath England [15]. This includes disposable gloves, plastic apron, face mask and face protector. We will re-screen you and anyone attending the clinic with you upon arrival. You will be asked to sanitise your hands (hand sanitiser will be provided). You will then be required to sign a consent form. You can complete this electronically on your phone or by using our tablet. We sanitise the tablet after every use. Please do not touch anything in the clinic unnecessarily. You will be given gloves if you need to touch any equipment. In order to simplify the sanitation process we have removed all pillows from the clinic and will not be using any paper roll on the treatment couch. We will sanitise all the surfaces touched by the patient after every appointment. We also air the room for at least 15 minutes after every appointment. You can pay for your appointment by contactless card payment or via the IZettle payment link that we can send in advance.

You can see more about attending a face to face appointment at Physiokinetic at <u>https://youtu.be/</u> eUdwVpnc2Ds

## AFTER THE APPOINTMENT (NHS TEST AND TRACE)

Be aware that we will provide your contact details to NHS test and trace should the physiotherapist test positive for COVID-19 within a few days from the appointment, as you would be considered a close contact. In this case you may be required to self-isolate for 2 weeks even if you do not have any symptoms

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#### **REFERENCE LIST**

- 1. Singhal T. A review of coronavirus disease-2019 (COVID-19). The Indian Journal of Pediatrics. Springer; 2020;1–6.
- He W, Grace YY, Zhu Y. Estimation of the basic reproduction number, average incubation time, asymptomatic infection rate, and case fatality rate for COVID-19: Meta-analysis and sensitivity analysis. medRxiv. Cold Spring Harbor Laboratory Press; 2020;
- 3. NHS. Who's at higher risk from coronavirus [Internet]. 2020 [cited 2020 Jun 5]. Available from: https://www.nhs.uk/conditions/coronavirus-covid-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/
- 4. Buitrago-Garcia DC, Egli-Gany D, Counotte MJ, Hossmann S, Imeri H, Salanti G, et al. The role of asymptomatic SARS-CoV-2 infections: rapid living systematic review and meta-analysis. medRxiv. Cold Spring Harbor Laboratory Press; 2020;
- 5. WHO. Modes of transmission of virus causing COVID-19: implications for IPC precaution recommendations [Internet]. 2020 [cited 2020 Jun 3]. Available from: https://www.who.int/news-room/commentaries/detail/modes-of-transmission-of-virus-causing-covid-19-implications-for-ipc-precaution-recommendations
- 6. Lauer SA, Grantz KH, Bi Q, Jones FK, Zheng Q, Meredith HR, et al. The incubation period of coronavirus disease 2019 (COVID-19) from publicly reported confirmed cases: estimation and application. Annals of internal medicine. American College of Physicians; 2020;172(9):577–82.
- Wei WE, Li Z, Chiew CJ, Yong SE, Toh MP, Lee VJ. Presymptomatic Transmission of SARS-CoV-2— Singapore, January 23-March 16, 2020. Morbidity and Mortality Weekly Report. Centers for Disease Control and Prevention; 2020;69(14):411.
- 8. Heneghan C, Brassey J, Jefferson T. COVID-19: What proportion are asymptomatic. Centre for Evidence-Based Medicine https://www.cebm.net/covid-19/covid-19-what-proportion-areasymptomatic. 2020;
- 9. Shukman D. Coronavirus: The mystery of "silent spreaders" [Internet]. 2020 [cited 2020 May 31]. Available from: https://www.bbc.co.uk/news/uk-52840763
- 10. CSP. Face-to-face or remote consultations: supporting you to make safe decisions about patient contact [Internet]. 2020 [cited 2020 Jun 5]. Available from: https://www.csp.org.uk/news/coronavirus/clinical-guidance/remote-or-face-face-consultations/implementing-guidance
- 11. Sarah Knapton DG. One in 16 care home residents killed by coronavirus epidemic [Internet]. 2020 [cited 2020 Jun 9]. Available from: https://www.telegraph.co.uk/news/2020/06/09/one-16-care-home-residents-killed-coronavirus-epidemic/
- 12. Alison Holt BB. Coronavirus deaths: How big is the epidemic in care homes? [Internet]. 2020 [cited 2020 Jun 9]. Available from: https://www.bbc.co.uk/news/health-52284281
- Graham NS, Junghans C, Downes R, Sendall C, Lai H, McKirdy A, et al. SARS-CoV-2 infection, clinical features and outcome of COVID-19 in United Kingdom nursing homes. Journal of Infection. Elsevier; 2020;
- 14. WHO. Coronavirus disease (COVID-19) advice for the public: When and how to use masks [Internet]. 2020 [cited 2020 Jun 9]. Available from: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks
- PHE. Recommended PPE for primary, outpatient, community and social care by setting, NHS and independent sector [Internet]. 2020 [cited 2020 Jun 5]. Available from: https:// assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/878750/ T2\_poster\_Recommended\_PPE\_for\_primary\_outpatient\_community\_and\_social\_care\_by\_setting.pdf