

COVID-19 TOWN HALL Q&A – May 20, 2020

QUESTION TOPIC INDEX	
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MEMBER QUESTIONS	AAFP RESPONSES
HEALTH OF THE PUBLIC AND SCIENCE	
Has there been any connection between children who have contracted COVID-19 and immunizations? Were any of the children not immunized due to religious and medical exemptions?	That information is not known at this time.
Do sanitizing solutions weaken our infrastructure, such as septic systems that rely on good bacteria? What effect does the overuse of antibacterial solutions have if we find ourselves facing possible future biological warfare?	That information is not known at this time.
The next 10 questions were directed to Daniel Lewis, MD, FAAFP, who shared his story of serious illness from COVID-19, and talked about the progression of the disease, treatment and what it was like to be a physician and patient during the current public health emergency.	
Were you prone when you were on the ventilator?	I'm not sure. Before I went on the ventilator, I remember conversations. I tried to do it on my own but it did not seem to make a difference. As far as I know, they (doctors and nurses) did not prone me. I was on my right side nearly the entire time. As other COVID-19 patients came in, they did seem to try that more. My case was early, and they were still learning the best treatments.
Have you recently been retested for COVID-19?	I was tested twice in rehab and both tests were negative. This was 40 days after my exposure. I haven't had any other COVID-19 testing other than antibody testing.
Are you having any residual symptoms, like shortness of breath?	I feel fatigued and have suffered from vertigo. My primary symptoms are a loss of strength, fatigue and vertigo. We have plans for pulmonary follow-up testing to monitor any chronic impact, since this is a new disease.
I'm sure this must have taken a mental and psychological toll on you and your family. What is your advice now that you have been a patient?	It was new for me. I've never been ill. It was very difficult for my family. I relied strongly on my faith. We had a lot of support from our community for me, my wife and family. The lack of visitation was a big concern. It was difficult being contagious. I wanted to limit my exposure to hospital staff, so I was hesitant to call a nurse if I needed one. It gave me another perspective and I became very respectful of nurses and staff. I was there during Nurses Week, and I was able to share my appreciation. It was humbling to be a patient when I'm used to being in charge.

How did you handle the emotions of an acute very severe illness? Did medical staff talk with you about your fears of ventilation or death?	The staff did discuss fears around ventilation and death. Going on the ventilator gave me more peace than any other time. That peace felt God-given. Anxiety came after complications developed, and I became concerned about what other shoes may drop. The medical staff was open and honest with me and were cautiously optimistic. My faith carried me through, and I never really had a significant fear.
Was your sense of smell affected?	I never lost my sense of smell. It never changed. I also never really had a cough, even with the pneumonia.
Has your experience affected how you converse and interact with your patients now, especially counseling about infection prevention?	I am still not seeing patients. What I would say is use lots of personal protective equipment (PPE). I advocate for masks and hand hygiene. I have had lots of conversations with patients about mask use. There are proper uses for masks and hand hygiene that we need to be promoting.
I'm so glad to see you are recovered and able to talk to us. Thanks for sharing your story. What will you take forward as you care for patients in the future?	I have more empathy and more perspective. I was in the hospital intensive care unit (ICU), isolated from my family. Our hospital system has actually used my story to discuss patient experiences to learn how to improve our care moving forward. I had excellent nursing care. My patients know that I've been in their shoes, which reinforces that I know what they're feeling.
Are you taking any specific precautions with your family at home?	I am not now. I quarantined for 10 days before I got sick, and before I expressed any symptoms. I had no contact with my family while I was expressing symptoms. It was great to reach day 14 or 15 and hear no one at home had symptoms. I worked with a mask on at home until I received news of my second negative COVID-19 test. I still wear a mask in public to lead by example.
Were you provided exercise restrictions once you were able to leave the rehab facility?	I received no restrictions. We discussed that I should expect 2-4 days of recovery for every day I was on the ventilator. I should expect limited endurance for the rest of the month. They did provide some at-home exercise guidance. It included no gym or heavy weight exercises for about a month. I also did not drive until I was cleared to do so by my doctor.
Please help teachers understand how to protect themselves and children if schools will reopen in the fall. Doctors and nurses have suffered great risk during this time and now children and teachers will risk exposure.	The Centers for Disease Control and Prevention (CDC) offers guidance for reopening schools this summer . Please note that this guidance may change in the fall.
PRACTICE ADVANCEMENT	
Does the AAFP have any resources for training staff to serve as scribes?	The AAFP provides a resource to prepare and train your team to implement the training of scribes. It is part of the

	<p>AAFP Transformation in Practice Series (TIPS) in the team documentation module. In this TIPS module, you will gain access to online training, slide decks for team training, resources to build the business case for team documentation, a planning worksheet and other useful tools. AAFP members can access the team documentation resource for free.</p>
<p>Does the AAFP have recommendations for helping elderly or other patients who are not tech savvy but want to do a telehealth visit?</p>	<p>Practices are deploying various methods as they train patients to engage through telehealth. Some are recording training videos to share on their websites, Facebook or YouTube. Others are choosing to do phone-only visits with patients who face barriers engaging in a video visit. Many practices are reaching out to patients in advance to train them in preparation for their visit. When practice staff are talking with patients in advance of the visit, they find it beneficial to do pre-visit agenda setting, so the patient and physician can make the most of their time in the visit.</p> <p>The AAFP offers a free AAFP TIPS module on agenda setting, with team training materials and agenda-setting worksheets for patients and staff to help your team get started with this process.</p>