

**From:** AFC COVID-19 Response Team covid19@australianfamilycare.com  
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**To:** Renee.petrilli@gmail.com

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## AFC COVID-19 Newsletter 6

Over the past week, the Australian Government has promoted "containment and suppression" strategies aiming to mitigate the threat of COVID-19.

Their goal is to keep the R (0) equal to 1 (i.e., each infected person on average infects only one other person).

New strategies will include a staged approach to lifting community lockdown restrictions, automated contact tracing, and potentially, the use of COVID19 rapid serology testing.

According to Government officials, 'elimination' strategies (i.e., those currently enacted in New Zealand) are not appropriate as they will inflict excessive economic damage.

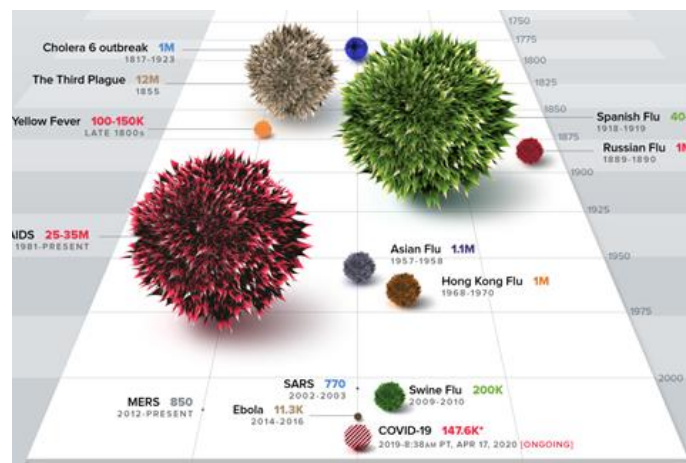
In South Australia, the "two-week testing blitz" started last Thursday. This blitz is aimed at capturing a 'snapshot' of community disease prevalence.

Though it is early, results appear promising with no new local cases diagnosed.

Looking ahead, the duration and extent of lockdown restrictions will largely depend on the outcomes of the two-week testing blitz. Further to this, there is suggestion that elective surgery restrictions may be lifted in the coming weeks.

Hopefully these suppression strategies will suffice in containing COVID-19 in SA.

Below is an overview of the past week news articles.



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## Current Status

**Internationally**, there have been 2,332,004 proven cases of COVID-19 and 160,767 deaths so far. Globally mortality is approximately 7%. Global statistics can be found [here](#).

**Nationally**, there have been 6,586 confirmed cases and 69 COVID-19 deaths in Australia. Australian mortality stands at approximately 1%. National statistics can be found [here](#).

**Locally**, there are a total of 435 confirmed cases and four COVID-19 deaths in South Australia. There are currently two patients in the ICU at the RAH who are COVID-19 positive.

**Promisingly**, the number of cases identified and the mortality rate appear to be plateauing internationally.

Click below for an interesting infographic that compares COVID-19 mortality rate to other pandemics.

### Pandemic Infographic



## **Department of Health**

The Australian Government has announced the soon-to-be released contact tracing app.

Using bluetooth technology, this app will trace every person who has been in contact with a mobile phone owner who has tested positive for coronavirus in the previous few weeks.

This is an attempt to automate COVID-19 contact tracing, and aide the process of easing restrictions.

This app is based on the Singapore app 'Trace Together' and is downloaded voluntarily by users.

More information can be found below.

### **Contact Tracing App**



## **Respiratory Clinics**

Commonwealth-Funded Respiratory Clinics have opened up in Adelaide, one of which is at Reynella Family Care.

Our clinic hit the ground running last week, seeing approximately 80 patients per day.

These Respiratory Clinics help patients in need of clinical assessment, who present with COVID-19-like symptoms, but who do not fit the current criteria for testing.

Bookings to any of the three Respiratory Clinics in Adelaide can be made online or by telephone.

Information regarding bookings can be found below.

### **Respiratory Clinics**



### **Death Certificates**

In response to the COVID-19 pandemic, the WHO has issued an emergency code U07.1 COVID-19 to be assigned to all mentions of COVID-19 on the death certificate.

Due to the significant public health ramifications of this pandemic, the WHO have directed that COVID-19 be recorded as the underlying cause of death (i.e., the disease or condition that initiated the train of morbid events) when it has caused or contributed to death.

The Australian Bureau of Statistics has

published guidelines on how to record a COVID-19 related death.

Click below for the guidelines.

### **Certifying COVID-19 Deaths**



### **Peace of Mind**

While caring for our patients during the pandemic, it is essential that we take time to care for our own mental health.

Beyond Blue has a free 24/7 support service designed to help people through the pandemic.

The service includes:

- digital tools and apps
- a phone line staffed by mental health professionals
- referrals to other services
- easy links to peer-support forums
- links to emergency and crisis services

Click below for further information.

### **Beyond Blue COVID-19 Tools**



## **Veterans' Affairs**

Temporary Department of Veterans' Affairs (DVA) telehealth MBS items are now available.

The DVA has created two new Veteran Access Payment (VAP) items: MT88 (claimed instead of 10991) and MT89 (claimed instead of 10990).

You can claim the VAP retrospectively for telephone and video conferencing services provided to DVA patients from 13 March 2020.

More information can be found below

### **DVA Telehealth MBS Items**





## Cardiac Arrest Management

According to the Australasian College of Emergency Medicine (ACEM), prior to a resuscitation there are a number of factors which must be considered in COVID-19 patients. These include:

- Are staff protected by appropriate personal protective equipment (PPE)?
- Are there any documented goals of care or advanced care directives?
- Is there an appropriate setting (single room) available?
- Is there any chance of successful resuscitation?
- What is the likely cause of the arrest?
- What are the underlying functional status and co-morbid conditions?

Resuscitation should not proceed unless all staff are protected by adequate PPE.

The guidelines can be found below.

### ACEM Guidelines







## **Ante-natal Care**

A joint statement was made by RANZCOG and the New Zealand College of Midwives on the 17th of April.

The statement includes recommendations for antenatal referral for obstetric care in women with suspected, probable, or confirmed Covid-19.

It also includes information regarding ultrasound scanning, labour, and birth care.

The statement can be found below.

### **RANZCOG Statement**



## **NSAIDs during COVID-19**

The Australian TGA states that there is no evidence to support claims ibuprofen and other non-steroidal anti-inflammatories worsen COVID-19 symptoms. In this light, they have not recommended the restricted use of NSAIDs

recommended the restricted use of NSAIDs for symptom control.

This is in contrast to the National Institute for Health and Care Excellence (NICE) in the UK, who have stated that paracetamol should be used in preference to non-steroidal anti-inflammatory drugs for managing fever in patients with suspected COVID-19 until more evidence is available on the safety of NSAIDs.

Perhaps Australia should be following suit?

The BMJ article on this topic is below.

### **NSAIDs and COVID-19**



### **Lessons Learned**

If indeed we are approaching the point in time from which we can regard the COVID-19 pandemic in hindsight, what are the important lessons we have learned?

We have changed our practice dramatically. What do we want to retain?

Do we really want to return to 'business as usual'?

Three main lessons include:

1. Use health data to carry out mass screening.
2. Avoid hospital overcrowding by relying on primary care and telemedicine.
3. Equip caregivers, patients, and the general population with masks and hand sanitiser.

Are there other lessons to take away? We are interested to hear your thoughts. Please let us know.

Click below for the 'Lessons Learned' article.

## **COVID-19 Lessons Learned**

### Recent guidelines

[ACEM COVID-19 Clinical Guidelines](#)

[Australian Bureau of Statistics Certifying COVID-19 Deaths](#)

[RACGP Guidelines for Management of Diabetes during COVID-19](#)

[SA Health Flowchart 'What You Should Do'](#)

[Australian 'Living Guidelines' for the Clinical Care of people with COVID-19](#)





The AFC COVID-19 Response Team is dedicated to keeping our staff and patients safe.

If you have any suggestions, news, or queries please drop us a line.

AFC COVID-19 Response Team  
84 Shipsters Road  
Kensington Park Adelaide  
South Australia 5068  
email: [renee.petrilli@australianfamilycare.com](mailto:renee.petrilli@australianfamilycare.com)  
phone: +61(08) 83324280  
[www.australianfamilycare.com](http://www.australianfamilycare.com)



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