

Face to Face Clinic Appointments (page 7)

- 1) Clinically acute assessment
 - a. Respiratory symptoms, low suspicion of COVID-19 = red face to face GP appointment
 - b. Non-respiratory symptoms assessment for patients not shielding, self-isolating or COVID-19 symptoms = amber face to face GP appointment
- 2) Long-term condition review or acute condition review where face to face essential = amber face to face GP appointment
- 3) Essential core primary care services (appointments with Practice Nurse - amber face to face):
 - a. Immunisations - according to national programme; including baby imms, pneumonia & shingles
 - b. Essential injections eg prostack, contraceptive depot.
 - i. NB: testosterone not essential.
 - ii. B12 – guidance coming. Suspend for now
 - c. Contraception
 - i. Change to oral desogestrel where possible if coils/implants need changing.
 - ii. Pill checks by phone – ask patient to do own BP & weight if due.
 - iii. Consider directing to sexual health if need face to face
 - d. Suture removal
 - e. Dressings
 - i. Where possible, Practice Nurse via video consultation and prescribing appropriate dressing for patients to self-dress.
 - ii. If essential, face to face support
 - f. Clinically necessary blood tests
 - i. Including where needed to identify end organ damage in LTC ie DM, IHD & CKD & DMARDs