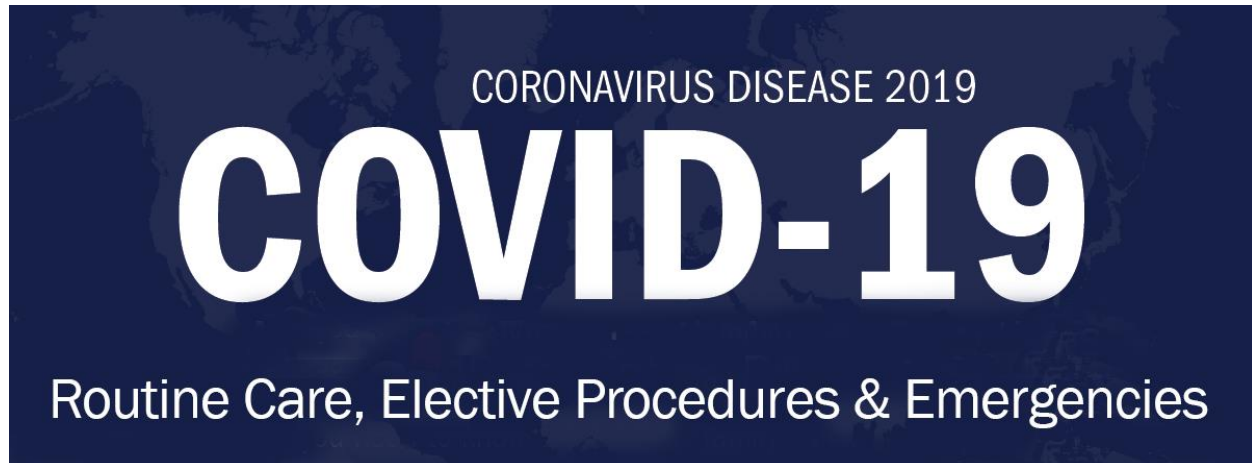


Questions from Housing Town Hall 18 MAR

IACH Responses for Category Questions

(To be posted on IACH Facebook Notes and updated accordingly.)

As of 25 MAR 2020



Note: This document provides general information only and may be subject to change at any time without notice.

- 1. Are appointments for routine care still available?**
 - a. Most routine care appointments are now provided telephonically. A provider will discuss with a patient to determine if it's necessary to be seen in person at the hospital or clinic.
 - b. Irwin Army Community Hospital is taking precautionary measures to limit unnecessary potential COVID-19 exposure for you, other patients and healthcare staff.
 - c. If you receive notice that your appointment has been cancelled, your medical home team will try to reach you to check on your condition, arrange for your care through virtual means, and/or determine if you should come into the hospital. Ensure you are able to answer any of the telephones you have on file with the clinic. If you are not contacted within a day of your previously schedule appointment, reach out to the your medical home by phone or send a Secure Message.
- 2. Is all elective care being cancelled?**
 - a. All elective surgery is cancelled or postponed at this time. Elective can be thought of as any care that if not performed will result in the loss of life, limb, or eyesight. There may be circumstances in which postponing surgery will result in a worse outcome. Those circumstances will be considered clinically on a case by case basis. Examples of elective surgery include colonoscopies, hernia repairs, hysterectomies, diagnostic orthopedic surgery, cholecystectomies, Lasik, PRK, ear tube placement, tubal ligations, and vasectomies. If your case was determined to be elective and cancelled, it will be reviewed by your provider on a regular

basis and rescheduled when the clinical circumstance change or when we return to performing elective surgery.

3. Are behavioral health appointments still available?

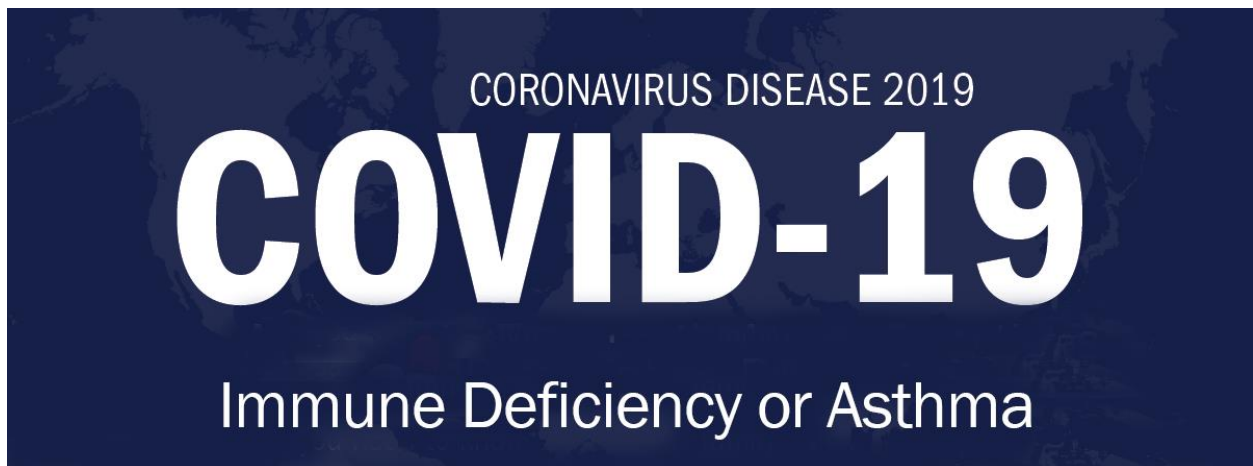
- a. Yes. Most behavioral health appointments are being provided telephonically to limit unnecessary exposure for you, other patients and healthcare staff.

4. What about the Veterinary Treatment Facility (VTF)? Is care still available for my pet?

- a. The VTF clinic is closed for walk-ins. Call the facility during business hours for instructions to get medication refills or to discuss care options. The phone number to the Fort Riley VTF is (785) 239-3886 and available Monday-Friday, 8 a.m. – 4 p.m.

5. If I get sick, should I call 911?

- a. If you have a true medical emergency (life, limb, eyesight, chest pain), call 911, but inform the first responders if you potentially had contact with a COVID-19 positive individual.



Note: This document provides general information only and may be subject to change at any time without notice.

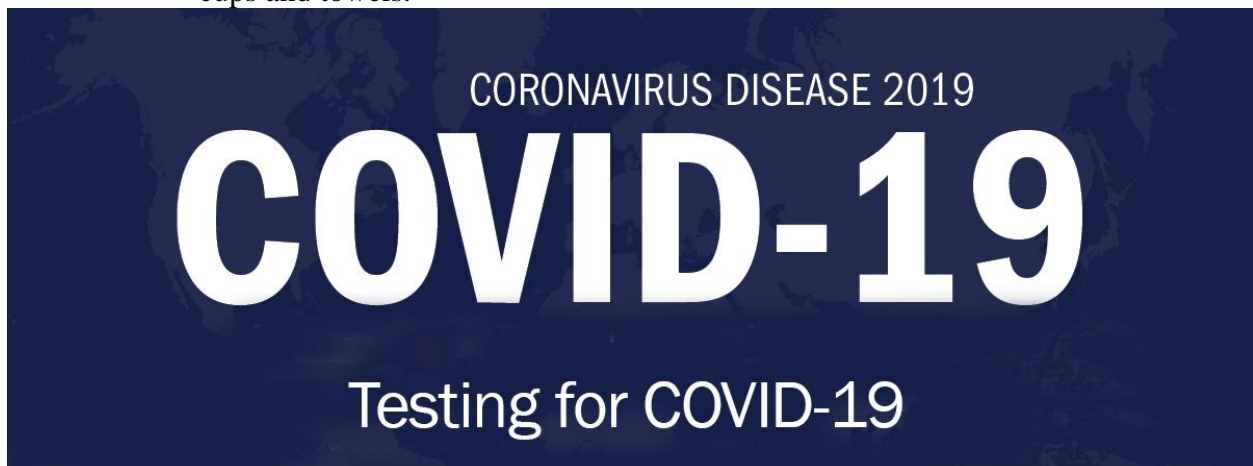
1. What if I have an immune deficiency?

- a. COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Based on currently available information and clinical expertise, people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19.
- b. Many conditions can cause a person to be immunocompromised, including cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.
- c. It is extra important for you to take actions to reduce your risk of getting sick with the disease. Take everyday precautions to keep space between yourself and others. When you go out in public, keep away from others who are sick, limit close contact and wash your hands often. Avoid crowds as much as possible.
- d. During a COVID-19 outbreak in your community, stay home as much as possible to further reduce your risk of being exposed. If someone in your home is sick,

have them stay away from the rest of the household to reduce the risk of spreading the virus in your home. Avoid sharing personal household items such as cups and towels.

2. What if I have asthma?

- a. People with asthma may be at higher risk of getting very sick from COVID-19. COVID-19 can affect your respiratory tract (nose, throat, lungs), cause an asthma attack, and possibly lead to pneumonia and acute respiratory disease.
- b. Take everyday precautions to keep space between yourself and others. When you go out in public, keep away from others who are sick. Clean your hands often by washing with soap and water or using an alcohol-based hand sanitizer. Avoid crowds and people who are sick.
- c. During a COVID-19 outbreak in your community, stay home as much as possible to further reduce your risk of being exposed. If someone in your home is sick, have them stay away from the rest of the household to reduce the risk of spreading the virus in your home. Avoid sharing personal household items such as cups and towels.



Note: This document provides general information only and may be subject to change at any time without notice.

1. Is Fort Riley testing people for COVID-19?

- a. Irwin Army Community Hospital has collected specimens for testing on individuals who met the criteria for potential COVID-19 exposure. Of the 13 test results returned, all have been negative as of March 25, 2020.

2. If Fort Riley has a COVID-19 confirmed case, will the community be notified?

- a. The Fort Riley Department of Public Health is committed to informing the community about the presence of infectious diseases and how to protect themselves. Notifications will be sent out through official channels.

3. Has anyone on Fort Riley tested positive for COVID-19?

- a. There are no reported cases of COVID-19 on Fort Riley as of March 25, 2020. To hear the latest information on reported cases call the FRKS Department of Public Health recorded information line at (785) 240-4358. Information is updated daily.

4. How long does it take to get test results of COVID-19?

- a. The time it takes to get results will vary from day to day. The general window that a patient can expect to receive results is 48 – 72 hours, depending on the testing sites and their backlogs.

5. Can I just show up at the hospital or clinic to be tested for COVID-19?

- a. No. COVID-19 tests are a finite resource and will not be ordered upon patient demand. Testing is authorized based on the clinical judgment of a provider, exposure, travel history and symptoms in consultation with public health professionals. You must have an in-person or telephonic visit with a provider who will arrange testing if warranted.

6. How is screening for COVID-19 different from testing?

- a. The screening process begins when you contact the IACH COVID-19 Patient Screening Line (785) 239- DOCS to discuss your symptoms and it will begin with a series of questions. The nurse or staff member decides whether your symptoms may be due to COVID-19 or another illness requiring treatment. You might get advice on self-care since symptoms often can be treated at home.
- b. The nurse/staff member may arrange a telephone visit between you and a health care provider or tell you to call your provider directly. The provider can talk with you about possible exposure, your symptoms, and discusses treatment. The provider may give you self-care advice to use at home. Or, he or she may tell you to go to your primary care clinic or emergency to be tested.
- c. It's important to call first so we can protect you, other patients, and medical staff from unnecessary exposure to COVID-19.

CORONAVIRUS DISEASE 2019

COVID-19

Quarantine

Note: This document provides general information only and may be subject to change at any time without notice.

1. What is quarantine? Why is 14 days recommended for COVID-19?

- a. Quarantine is the separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic in order to monitor them for the development of symptoms. This is done to prevent the possible spread of the communicable disease. It is recommended by the CDC to quarantine for 14 days because symptoms of COVID-19 usually emerge 2-14 days after exposure.

2. How is quarantine different than isolation?

- a. Isolation is used to separate people who have been infected – with a communicable disease (showing symptoms) – from those who are healthy. Isolation restricts the movement of ill persons to help stop the spread of certain diseases. For example, hospitals use isolation for patients with infectious tuberculosis.
- b. Quarantine is used to separate and restrict the movement of people who aren't sick who may have been exposed to a communicable disease to see if they become ill. These people may have been exposed to a disease and do not know it, or they may have the disease but do not show symptoms. Isolation is the next step after quarantine to further isolate persons who are demonstrably sick.

3. If you live with someone who may have been exposed, what should you do?

- a. Call the IACH COVID-19 Patient Screening Line at (785) 239-DOCS option 7 or the Army Public Health Center at 1-800-984-8523.

-END-