

Monday 6th April 2020 1600 hours

Important information for all General Practices, Community Pharmacies, Community Nursing and Aged Care Facilities – Please share this with everyone in your team

Case definition and testing – adapted to now include coryza and anosmia

- Any acute respiratory infection with at least one of the following symptoms: cough, sore throat, shortness of breath, coryza, anosmia, with or without fever.

North Canterbury Community Based Assessment Centre (CBAC)

- There are now two CBACs operating in North Canterbury, one in Rangiora and the other at Amberley. These CBACs can test between 16 and 32 people each day and are open between 1-5pm (Amberley) and 9am-5pm (Rangiora).
- As with other Canterbury CBACs a request for an appointment must be made via ERMS before a test can be carried out. The CBAC will then contact referred patients directly to make an appointment with them. Please do not send patients directly to the CBAC.

ERMS digital delivery of prescriptions

- Prescribers - can send scripts to a pharmacy using ERMS. Save the script as pdf and attach. Once set up this is an easy and secure method for remote, or virtual consult prescribing. There is a MoH waiver so no physical signature is required and a paper copy or original signed script does not have to be sent to the pharmacy. Controlled drug prescriptions **are excluded** and need to be processed as normal. This includes Class C medicines such as codeine and benzodiazepines (unless a signed script is attached, and original to follow). Tramadol and Zopiclone are not controlled drugs. New Zealand ePrescription Service (NZePS) is an alternative if preferred (though will have financial implications in the future).
- Pharmacists – note as above Class A, B and C controlled drugs including codeine and benzodiazepines should not be dispensed via ERMS unless the prescription is signed and the original prescription follows.
- Patients can ask their pharmacy to request a medicine delivery option. This is also a new opportunity to use ERMS to communicate other non-urgent information between pharmacy and general practice.
- Instructions are on [Community HealthPathways > Covid -19 Requests](#).

General practice care

- At this stage of COVID response, continue to assess non-deferrable patients in person when required. This includes performing investigations such as Pipelle biopsies which are usually done in primary care, and assessments that are likely to prevent a referral or admission. If a service is not available in your practice, see [Community HealthPathways > General Practice \(GP\) Colleague Referrals](#).

Swab use

- Labs are now providing approved practices with nasopharyngeal and/or oropharyngeal swabs for testing. Please note only 1 swab is required. To get more swabs email the lab and inform them how many you have used, and how many you have left. Specimen collection updated information and lab email is on [Community HealthPathways > COVID-19 Requests](#).

Use of Acute Plan to share key decisions

- Acute plans are used across primary, secondary and community services so they are an excellent tool to increase the visibility of key medical decisions and important conversations for at risk patients. See [Acute Plan](#) for information on how these plans can be used during this pandemic.

Kind regards,

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