

Guidance for Optometrists | Reopening Guidelines

Updated March 15, 2021

On an ongoing basis, including by remaining in close contact with KDHE and your local public health department, doctors should stay informed of the status of public health and safety measures in effect, specifically as they relate to the operations of optometry practices and the delivery of care by doctors of optometry and other physicians and health care providers.

Below are suggested steps to prepare optometry practices, staff and patients for a safe return to delivering the full range of essential eye health and vision care.

Develop an action plan for your staff before you open your doors for both routine and emergency care.

Prepare the clinic

- ⇒ Know which of your patients are at higher risk of adverse outcomes of COVID-19.
- ⇒ Consider and plan for providing or continuing to provide telemedicine appointments.
- ⇒ Stay connected with KDHE to learn about COVID-19 spread in your community.
- ⇒ Assess and restock supplies now and on a regular schedule.

Communicate with patients

- ⇒ Ask patients about symptoms during appointment reminder calls. Discuss with patients the need to reschedule their appointment if they develop fever or symptoms of COVID-19 leading up to the time of their appointment.
- ⇒ Consider rescheduling non-urgent appointments.
- ⇒ Post [signs](#) at entrances and in waiting areas about prevention actions.
- ⇒ Offices should schedule patients to avoid simultaneous arrivals and have appropriate triage protocols in place to address urgent care needs first and facilitate patient flow to prevent too many patients in the office at one time.
- ⇒ Patients should be advised to travel to the office with a minimum number of companions.
- ⇒ Patients and visitors to the office should be informed in advance of the expectation that they wear their own mask or cloth face covering upon arrival to the facility. If not, they should be offered a mask or cloth face covering as supplies allow, which should be worn while they are in the facility if the patient is physically able to do so. They should also be instructed that if they must touch or adjust their cloth face covering, they should perform hand hygiene immediately before and after. KDHE recommends wearing a mask that fits snugly around the nose, mouth, and chin and has multiple layers of fabric. Alternatively, a thinner disposable mask may be worn underneath a cloth face mask to improve the fit. For more information on the mask guidance visit: <https://www.coronavirus.kdheks.gov/DocumentCenter/View/441/KDHE-Mask-Guidance-PDF---3-1-21>.

Prepare your waiting area and patient rooms

- ⇒ Avoid the use of the waiting area, if possible. If not possible, place chairs in waiting area 6 feet apart. Use barriers (like screens), if possible.
- ⇒ Remove communal items such as magazines and toys.
- ⇒ Provide supplies such as tissues, hand sanitizer with at least 60% alcohol, soap at sinks, and trash cans. Post signs detailing [proper hand washing technique](#).
- ⇒ Patients and any companions should be sent directly to pre-testing or exam room, if possible.

Implement patient screening protocol

- ⇒ Screen patients, visitors, and staff members for symptoms of COVID-19 upon arrival at the facility.
- ⇒ Use non-contact temperature readers when available.
- ⇒ If a temperature is taken, patient temperatures should be documented in their patient record. If a patient has a fever (100°F or higher, per CDC), they should be referred to their primary care physician (PCP) and not permitted in the office.
- ⇒ Any patients and visitors exhibiting signs of COVID-19 and seeking routine eye care should be rescheduled and referred to an appropriate healthcare provider.
- ⇒ Any patients and visitors exhibiting signs of COVID-19 with urgent, emergent ophthalmic conditions should be treated if possible and then referred to an appropriate healthcare provider.
- ⇒ Offices should consider registering patients and any visitors entering the facility, including contact information, to track who is in the building and during what time. This can be done electronically or recorded by a staff member to minimize contact between patients. This information can also be used for contact tracing in the event of a COVID-19 flare-up.
 - If an office is aware of a patient, visitor, or staff with a diagnosis of COVID-19, the office should report this information to the local health department.

Other patient considerations

- ⇒ Establish curbside dispensing when possible.
- ⇒ Limit number of individuals within optical dispensary areas.
- ⇒ Make all paperwork available to patients prior to appointments for completion. Consider mailing forms to patients, providing a link on your website with a fillable PDF form, or obtaining patient information over the phone.
- ⇒ Consider setting up or continuing to use an online payment portal, or accept payment via traditional mail, over the phone, or through an app on a mobile device.
- ⇒ Clean and sanitize frames in optical dispensaries

Workforce considerations

- ⇒ All staff wear surgical masks or face coverings. Staff are encouraged to also wear protective eyewear and gloves when interacting with patients. Consider face shields or other PPE when performing procedures resulting in prolonged, close contact with patients.
- ⇒ Employees who have [symptoms](#) (i.e., fever, cough, or shortness of breath) should notify their supervisor and stay home.

- ⇒ Implement flexible sick leave and supportive policies and practices.
- ⇒ Determine how you will operate if absenteeism spikes from increases in sick employees, those who stay home to care for sick family members, and those who must stay home to watch children dismissed from school.
- ⇒ Consider implementing or continuing telework for administrative employees.
- ⇒ Demonstrate consideration for the mental health of the staff and team while re-establishing the new care delivery flow.

Cleaning guidance

- ⇒ Offices should continue to use germicidal wipes or spray to clean exam chairs and all equipment after every patient encounter.
- ⇒ Offices should regularly clean commonly touched surfaces, such as workstations, counters, railings, door handles, clipboards, pens, chairs and other public area surfaces.
- ⇒ After examination, all instruments should be sanitized, gloves disposed, and hands washed.
- ⇒ [Products with EPA-approved emerging viral pathogens claims](#) are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.)

Sources

1. [Covid-19 Reopening Guidelines for Optometrists](#)
 - a. Kansas Optometric Association; April 28, 2020
2. [Optometry practice reactivation preparedness guide](#)
 - a. American Optometric Association; 2020
3. [Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 \(COVID-19\)](#)
 - a. Centers for Disease Control and Prevention; May 5, 2020
4. [Get Your Clinic Ready for Coronavirus Disease 2019 \(COVID-19\)](#)
 - a. Centers for Disease Control and Prevention; March 11, 2020
5. [Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#)
 - a. Centers for Disease Control and Prevention; April 13, 2020
6. [Centers for Medicare and Medicaid Services \(CMS\) Recommendations Re-opening Facilities to Provide Non-emergent Non-COVID-19 Healthcare: Phase I](#)
 - a. Centers for Medicare and Medicaid Services; April 19, 2020

