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#### COVID-19 Update

## Content of this update

- Urgent care service
- Remote prescribing
- Analgesia advice
- Antibiotic advice
- Supporting the NHS / redeployment

#### Dear Colleagues,

I'm writing to you to keep you up-to-date with dental care provision in Lothian during the COVID-19 pandemic.

First of all thank you to everyone for sustaining your telephone consultation activity with your patients acting as a first line for triage has helped to reduce the work within the NHSL Urgent Care service to manageable levels, please keep it up for as long as you and your buddy practices can.

## Urgent care service

The NHSL red and green hubs for dentistry are now well-established at Bonnyrigg and Chalmers respectively. ALL out of hours care will now run through these hubs, the weekend sessions at SJH have been withdrawn during the pandemic to reduce footfall in SJH.

Thank you to all of you who continue to deliver sessions in the OOH service and also to the many of you who have volunteered to help. We will call on you when we need to!

We now have a small (and very precious) supply of FFP3 masks and a team of people who have been trained how to use them and the other PPE required for people with symptoms suggesting a SARSCoV2 infection. As you will appreciate from the national press these are in very short supply and as I said in my letter earlier in the week we will be using them solely for the purpose of treating people with spreading infection of the face that cannot be managed with antibiotics in the first instance, we simply can't justify using them for anything else at present when the other side of the balance is protecting the clinical teams in the COVID wards in our hospitals. This does result in some very harsh triage decisions compared with normal practice so some of your patients will be in pain and we need to manage that effectively (see below).

I have attached a note of the changes in timing and location of the OOH service that has been sent to NHS 24 so they are aware. ALL patients will continue to be triaged through Chalmers but those who have symptoms suggesting a SARSCoV2 infection will ne seen if required at Bonnyrigg









## Remote Prescribing

As part of your telephone triage I'm sure that you are feeling the need to provide prescriptions for antibiotics for some of your patients. Firstly I'm sure you will have seen the recent email from the GDC but to remind you all this is what they are saying about remote prescribing, please ensure that you follow our regulators guidance.

## Remote advice and prescribing

Where patients cannot come to a dental surgery, dental professionals may be asked to provide advice remotely and to work with patients to defer the need for active treatment through the use of pain control and antimicrobial treatment. The basic principles of our<u>guidance on remote consultation and prescribing</u> continue to apply, but in the specific circumstances of COVID-19, the key requirement is to make an appropriate risk assessment. That risk assessment should be recorded and should take into account the infection risk of COVID-19, both from and to the patient, as well the apparent seriousness of the need for treatment and the extent to which it has been possible to make a clinical assessment. Where appropriate, it should also take account of NHS guidance on treatment which should and should not be offered in a primary care setting.

Having born that in mind we also want to be able to reduce the distances everyone is travelling as much as possible so we have been working with the community pharmacy team to give you guidance on how to send your prescriptions to a pharmacy closest to your patient's home so that they don't need to come to the surgery to pick up the prescription and take it to a pharmacy themselves. To assist with this I have attached a file containing the contact details for all community pharmacies in the Lothians, I know you will most likely use the ones close to your practice but some people also have loyal patients who travel long distances to see them.

## Process (see also infographic attached)

- 1. Write your prescription as normal on a standard prescription pad, this will need to be scanned / photographed to please use a dark pen and write as clearly as possible
- 2. If your patient needs analgesics as well then PLEASE ADD THOSE to the prescription as below INCLUDING paracetamol and ibuprofen (this will reduce the bureaucracy for the pharmacy team as people can ask for these through the minor ailments scheme anyway)
- 3. Scan (or use a smart phone to photograph) the prescription (there are good scanning apps available for both apple and android operating systems for smartphones).
- 4. Identify the community pharmacy closest to your patients home by going to NHS inform (<a href="https://www.nhsinform.scot">https://www.nhsinform.scot</a>) at the right hand side of the landing page there is a purple search box titled "Service Directory" select "Pharmacies" and put your patients post code into the search box the list of the closes pharmacies will be displayed for you.
- 5. Send the scanned prescription to the pharmacy's secure nhs.net email address using your practice's secure nhs.net email (this is confidential patient identifiable information so must be sent by secure email) with the patients name and URGENT PRESCRIPTION in the message header.
- 6. Tell your patient which pharmacy they should go to to collect the prescription and tell them to inform the pharmacy when they arrive that the prescription has been sent to the pharmacy by email from their dentist marked as urgent. It would be









- reasonable to give the pharmacy and hour or so from your sending the prescription, they are very busy at the moment
- 7. Finally put the physical prescription in an envelope and post it to the pharmacy (they require the physical document)

## Analgesia advice

There have been some concerns raised about the use of NSAIDs in people who have symptoms of SARSCoV2, there is some evidence of a risk of an increase in severity of pneumonias in people taking NSAIDs during the original SARS outbreak 15-years ago (which was also caused by a different corona virus). The evidence is NOT strong enough to tell people who are taking NSAIDs for therapeutic purposes to stop doing so but it has been suggested that they should not be started in symptomatic patients

In consultation with the NHS pharmacology team we would suggest the following approach to analgesia.

## For patients who do NOT have symptoms suggesting a SARSCoV2 infection

1<sup>st</sup> choice

Either Paracetamol or Ibuprofen up to the maximum permitted dose or a combination of BOTH analgesics together for severe pain. Please remember to warn your patients about the risks of Paracetamol overdose particularly as it is contained in many OTC cold remedies.

Follow-up

Prescribe Diclofenac

50mg three times per day for 5 days for severe pain

If the patient has a history of a previous or active peptic ulcer or gastric problems you may want to consider advising patient to buy Omeprazole 20mg x 1 per day for 5 days along with the Diclofenac.

#### For patients who DO have symptoms suggesting a SARSCoV2 infection

1<sup>st</sup> choice

Paracetamol

Follow-up

Contact GP and ask them to prescribe co-codamol

#### **Antibiotic Advice**

Please consider asking your patient to take an initial loading dose of antibiotic to try to get circulating levels up to the therapeutic threshold as soon as possible.

If an initial prescription for say a penicillin is not as effective as might be hoped consider augmenting with a drug with a different range of activity, for example metronidazole. Please remember to emphasize to your patients the need to complete the course of antibiotics even when their symptoms resolve.

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# Supporting NHS / Redeploymnet

We are all aware of "Boris's Volunteers" who have volunteered to help the NHS in England in their hundreds of thousands.

You are all key-workers as far as this is concerned and can play a vital professional role in supporting the NHS in difficult times. This may mean working in new and sometimes challenging environments that will stretch your comfort zone but your assistance will be important in helping us all get through this crisis.

NHS Lothian needs the help of you and your teams too with things like manning COVID-19 assessment centers (there will be at least 1 in each HSCP), supporting screening units for COVID-19 infection, taking prescriptions to people from community Pharmacies (the people involved need to have PVG clearance and they would prefer people with a registerable background as some of the people you would be taking prescriptions too are vulnerable and also you could be carrying controlled drugs at any time).

The DPAs will be reaching out to you to ask for your help and support and to coordinate its use through the NHSL primary care tactical team to its best effect.

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Thank you all for your help and support at a difficult time, stay well

Angus Walls, Director of Dentistry NHS Lothian