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Title

Primary Care Clinical Experience During a Pandemic: A Model For Medical Crisis Planning

Priority 1 (Research Category)

COVID-19

Presenters

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Abstract

Context: In the aftermath of large disasters such as hurricanes and earthquakes which result in mass casualties and infrastructure disruption, within days primary care becomes an essential element in the recovery of health care services. Both acute and chronic care needs are crucial, followed quickly by the need for mental health services. In the US the COVID pandemic left greater than 30 million infected, over 500,000 dead, and millions suffering. It disrupted health care at all levels. Even as it was surging and those in primary care were assisting with a spectrum of acute care needs, the residual effects, both direct and indirect, appeared. Objective: This study was to identify the roles of primary care clinicians in managing patients during the COVID pandemic and common problems patients were presenting with directly and indirectly due to COVID. Study Design: An intranet survey was sent to members of the system's primary care learning collaborative. Questions were multiple answer with options for open-ended answers. Setting: Large health system, during and immediately following the largest surge at the study sites. Population: Learning collaborative membership consisting of physicians, nurse practitioners, and physician assistants. Instrument: Brief intranet survey. Outcome measures: Identify common and unique problems being managed by primary care clinicians (PCC's) across the health system. Results: 94/191 responded (49%). Post-COVID with ongoing problems (83%) were seen by the most PCC's, followed by post-COVID asymptomatic (79%), acute COVID outpatient (69%), and remote monitoring (56%). Pandemic related non-COVID problems were reported by increases in anxiety (96%), depression (93%), loneliness (87%), delayed/deferred chronic care (79%) and cancer screening (76%). Common COVID related problems reported by PCC's included loss of smell (69%), fatigue (60%), dyspnea (39%), and Post COVID Syndrome (30%). Conclusions: In the midst of the pandemic, during the largest regional surges, post-illness care was the COVID related problem identified by most clinicians as a primary care concern. Psychological distress and delayed care due to social and healthcare infrastructure disruption were major non-COVID problems. Although on a larger scale, the pattern of primary care needs during the pandemic followed previous patterns in other disasters. Understanding these basic principles will allow health care leaders to better address future health crises.