

IADVL POSITION STATEMENT ON POST LOCKDOWN DERMATOLOGY PRACTICE (Recommendations for dermatology practice)

Registration area:

- See patients by appointment to maintain social distancing.
- Encourage elderly and those with co-morbidities to opt for teledermatology.
- Consider teleconsultation for mild/ moderate acne, hair loss, chronic skin disorders and review for investigations.
- At triage area screen patients for symptoms of COVID-19 (fever, respiratory symptoms), provide masks and sanitize hands.
- Obtain self declaration form for risk assessment available at <https://www.mohfw.gov.in/>
- Obtain written informed consent for willingness to undertake consultation explaining possible risk of COVID-19 acquisition despite adequate precautions.



Clinic/ hospital:

- Maintain adequate ventilation throughout clinic
- Have separate air-conditioning units for each room.
- Operate exhausts in pantry/ kitchen and toilets.
- Maintain a temperature between 25 C to 30 C and relative humidity between 40% and 70% in rooms.
- Decontaminate floor and equipment/ furniture surfaces with 1% sodium hypochlorite solution regularly.
- Use 70% alcohol to disinfect dermatoscopes, stethoscopes and mobile phones

Waiting area:

- Minimize waiting by appropriate appointment system.
- Maintain adequate social distancing and avoid unnecessary furniture.
- Opt for stainless steel chairs for easy cleaning.



Consultation room:

- Unclutter consultation table.
- Place patient chair at least 1 meter far.
- Develop system to obtain patient records beforehand and opt for e-prescription to minimize use of stationary.
- Prefer digital mode of payment or keep currency notes untouched for atleast 3 days.
- Prescribe medicines for 1-2 months to stable patients.
- Sanitize hands with 60% alcohol after each consultation.

General guidelines:

- Apprise yourself about local infection control committee recommendations.
- Wear long sleeved apron in consultation room. It must be washed at a temperature of 60 C or above.
- Wear personal protection equipment and gloves if indicated
 - <https://www.mohfw.gov.in/pdf/GuidelinesonrationaluseofPersonalProtectiveEquipment.pdf>
- If patient has been triaged at entry a 3-ply surgical mask is sufficient else use N-95 mask
- Regularly train support staff regarding hand hygiene, cough etiquettes, protective gears and social distancing.
- If providing teleconsultation, obtain informed consent, maintain documentation and provide signed e-prescription.

Special situations:

- For COVID-19 negative patients on immunosuppressants (steroids, cyclophosphamide, mycophenolate mofetil, azathioprine, methotrexate & biologics) decide by judicious risk stratification on a case to case basis regarding adjusting dose/ substituting medication.
- Educate the patients about need to social distancing, wearing mask and hand hygiene.
- Attend dermatological emergencies in person for physical examination to initiate appropriate treatment.
- If you are above 60 years, have comorbidities or are pregnant avoid out patient consultation and refer your patients to a colleague or practice teleconsultation.

Dermatology procedures:

- Avoid all procedures in COVID-19 positive patients and purely aesthetic procedures in all patients.
- Perform skin biopsy if essential for diagnosis and therapeutic decision.
- Avoid laser and electrocautery which may act as a source of infected plumes and use smoke evacuators.
- Prefer negative pressure operating rooms.
- Use absorbable sutures wherever possible.
- Minimize number of staff while performing procedure.
- Ensure adequate ventilation and wear disposable full-length gown and goggles/face shield.
- Patient must wear face mask throughout the procedure.
- Follow appropriate biomedical waste management guidelines.



**INDIAN ASSOCIATION OF DERMATOLOGISTS,
VENEREOLOGISTS & LEPROLOGISTS**