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College guidance to physicians regarding in-person and virtual care during the Covid-19 Pandemic

Dear Colleagues:

The physicians in our province have shown incredible resilience, commitment and character during the pandemic, and the College remains grateful for your efforts in providing the best care to the patients we serve.

Resuming in-patient care when indicated

We have reached a stage in the pandemic where there are increased vaccination rates and an increased ability of physician offices to mitigate risk in accommodating patients for regular care.

The [current vaccination data](#) reports that 79.616% of all people in Saskatchewan have received at least one dose, 76.346% have received at least two doses and 40.956% of all people in Saskatchewan are fully vaccinated with a third dose. With this vaccination status and the risk mitigation strategies like PPE in clinical settings, the College's view is that Covid-19 should no longer pose a barrier to in-person care.

The College recognizes that virtual care will play an ongoing role in effective patient management, but not all patients will be able to obtain the care that they need with this modality, and in-person care is vital and essential for certain medical conditions.

Seeing patients in the office with positive screening or positive tests for Covid-19

Where an in-person visit is required, the College's expectation is that, where adequate safety precautions can be implemented, services will be provided, or reasonable steps will be taken to facilitate care provision to the patient in a timely fashion. This applies regardless of the patient's vaccination status, Covid-19 symptoms or even positive testing (RAT or PCR)

Sending patients to the Emergency Room

A positive screen or positive testing should not universally result in unilateral offloading of the patient to the Emergency Room unless the clinical condition warrants an ER assessment. The

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and guiding the profession to achieve the highest standards of care*

College has been informed that capacity issues in the Emergency Rooms in the province are further complicated by patients who do not need this level of care but are unable to obtain services in community clinics. It would be collegial that if you intend to send or direct a patient to the ER, you first discuss this with the ER physician at the facility the patient will be attending.

Conditions recommended to be seen in person

The recommendation is that in-person visits, where that is appropriate, resume to the best ability of the providers. Examples in which in-person medical care is likely to be preferred include the following:

- Preventative medicine with high-impact strategies (screening tests, immunizations, etc.)
- Where physical assessments are indicated (prenatal care, newborn care etc.)
- Where in-person assessments are necessary to make an appropriate diagnosis
- Where interventions, such as procedures, will be needed
- Where the application of virtual care is not feasible (for example due to a patient's inability to use technology, limited internet capacity, or physical impairments such as hearing or vision loss)
- Where confidentiality cannot be maintained (for example due to a lack of privacy at home, at-risk partners etc.)

Conditions that are appropriate for Virtual Care

The College's policy "[The Practice of Telemedicine](#)" includes general expectations for virtual care. According to the [CMA Virtual Care Playbook](#), the following types of medical care are usually amenable to virtual care:

- assess and treat mental health issues
- assess and treat many skin problems (photos submitted in advance provide resolution that is much better than the resolution of even a high-quality video camera)
- assess and treat urinary, sinus and minor skin infections (pharyngitis too if you can arrange throat swabs)
- provide sexual health care, including screening and treatment for sexually transmitted infections, and hormonal contraception
- provide travel medicine
- assess and treat conditions monitored with home devices and/or lab tests (e.g., hypertension, lipid management, thyroid conditions and some diabetes care; in-person consultations will still be needed for some exam elements)
- review lab, imaging and specialist reports with the patient
- conduct any other assessments that do not require palpation or auscultation

References:

CMPA: [Providing virtual care during the COVID-19 pandemic](#)

CPSBC: [COVID-19 update re: in-person and virtual care](#)
CPSO: [COVID-19 FAQs for physicians](#)
CPSS: [Policy – The Practice of Telemedicine](#)
CMA: [Virtual Care Playbook](#)
OCFP: [Primary Care Operations in the COVID-19 Context](#)
CPSA: [Virtual Care](#)
Saskatchewan Vaccination Data: [Covid-19 Tracker](#)

The College remains available to provide guidance and support to physicians– please contact any of the [management team members](#) if you have questions or concerns.

Sincerely,



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