



## KENTUCKY BOARD OF CHIROPRACTIC EXAMINERS

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**Kerry B. Harvey**  
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On Thursday, April 23, 2020, Governor Andy Beshear and Dr. Steven Stack of the Kentucky Department of Public Health announced that certain public health providers will be permitted to begin a phased reopening of offices and facilities to provide patient care, on April 27, 2020. It was stressed that offices will not be able to simply reopen in the status they were in when closed in March. Rather, specific guidance was provided that will need to be strictly complied with in the reopening. The recommended guidance can be found at <https://chfs.ky.gov/agencies/dph/covid19/phaseIhealthcareservicereopening.pdf>, but is summarized below:

### **GUIDANCE FOR HEALTH CARE PRACTITIONERS AND FACILITIES**

On April 27, 2020, health care practitioners can resume non-urgent/emergent health care services, diagnostic radiology and lab services in:

- Hospital outpatient setting
- Health care clinics and medical offices
- Physical therapy settings, chiropractic offices and optometrists
- Dental offices (but with enhanced aerosol protections)

This guidance does not apply to long-term care settings, prisons, other industries, or other settings for which separate guidance has already or will be provided in the future. This guidance does not apply to elective surgeries or procedures which will be addressed in a subsequent phase. "This is intended to be a phased, gradual reopening so that we can do this thoughtfully, safely, and see the consequences of our actions to make the necessary adjustments," said Dr. Steven Stack, commissioner for the Department for Public Health.

Dr. Stack emphasized that this is a phased, gradual reopening of services and that a COVID-19 surge may require adjustment.

#### Telehealth

In all phases, health care practitioners should still maximize telehealth rather than in-person services.

#### Visitation

Health care facilities should still not allow visitors except when necessary in end-of-life situations, or for vulnerable populations or minors, and even then, visitations should be kept to a minimum.



### Waiting Rooms

Health care facilities should also eliminate traditional waiting room or common seating areas and use non-traditional alternatives, for example, a parking lot “lobby.”

### Social Distancing

Health care facilities should maintain social distancing, keeping people at least six feet apart in all possible settings, and employ other steps to minimize direct contact between individuals within the health care setting.

### Screening and Sanitization

Health care facilities should screen all health care workers, patients and others for temperature and COVID-19 symptoms upon arrival for shift or visit. Staff should be required to stay home if sick. Staff should plan for and ensure enhanced workplace sanitizing, enhanced hand hygiene compliance, and easily accessible hand sanitizer throughout the facility.

### Personal Protective Equipment (PPE)

Each health care setting must be able to procure necessary PPE via normal supply chains.

All health care providers and staff must wear surgical/procedural masks and gloves while in health care office/facility.

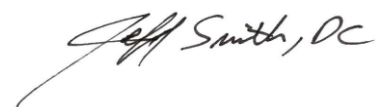
All patients and other persons in health care office/facility must:

- Wear a surgical/procedural mask while in health care facility
- Wear either a surgical/procedural mask or cloth mask/face covering in all other health care settings

### Special Considerations

In high-touch clinical settings (e.g., physical therapy, chiropractic, etc.), health care workers should wear non-latex gloves in addition to enhanced hand hygiene practices described above. Any objects and contact surfaces used for clinical services should be sanitized between patients.

In high-aerosol risk outpatient settings (e.g., dentistry, oral surgery, pulmonary services, etc.), we seek additional input from these professionals regarding steps to assure the safety of both their patients and clinical staff.



JEFFERY SMITH, D.C.  
BOARD CHAIR