

# Technical Note from the Brazilian Association of Physiotherapy in Oncology on Physiotherapy Oncology Care because of COVID-19 Pandemic

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*Nota Técnica da Associação Brasileira de Fisioterapia em Oncologia sobre os Atendimentos de Fisioterapia em Oncologia frente à Pandemia de Covid-19*

*Nota Técnica de la Asociación Brasileña de Fisioterapia en Oncología sobre Fisioterapia en Atención Oncológica ante la Pandemia de Covid-19*

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## INTRODUCTION

Physiotherapy is an essential part of the multiprofessional treatment of the oncologic patient. However, as in every area of healthcare, the expert physiotherapist in Oncology must watch over the patient safety<sup>1</sup>.

In view of the current situation of COVID-19 (coronavirus disease 2019 – COVID-19) pandemic, the Brazilian Association of Physiotherapy in Oncology (ABFO) issues a technical note about the physiotherapy care in oncology in order to improve the health conditions of the oncologic patients and minimize the risk of infection of professionals, patients and relatives.

## RECOMMENDATIONS

During the pandemic period, it is advisable, whenever possible, to discontinue the in-person physiotherapy care of the stable patients and without imminent risk of clinical worsening. Therefore, these consultations must be kept for the cases where the patients have risk of clinical decompensation or deterioration occurred because of the suspension of the visits<sup>2,3</sup>.

The physiotherapists have professional autonomy and competence to diagnose and design the most adequate physiotherapeutic intervention for the patient<sup>1</sup>. The

physiotherapist is responsible for detecting the eligibility of each one and determine whether the interruption will bring more benefits than risks of exposure to the severe acute respiratory syndrome coronavirus-2 – Sars-CoV-2/ COVID-19<sup>4</sup>

In relation to the attendances, for the cases where the professional decides to continue the in-person contact, recommended biosafety norms for personal and the patient protection must be established<sup>5</sup>.

To help the decision about the best way of physiotherapeutic follow up, evaluate continuously the patient health status, mainly those submitted to adjuvant therapy, who are more susceptible to immunosuppression. Assess individually and continuously the necessity of the patient to keep the physiotherapy, the frequency of the attendance and verify the feasibility of teleconsultation or prescription of home exercises, and if possible, prioritize the non in-person attendance<sup>1</sup>.

All and every decision must be entered in the patient's chart in order to minimize future ethical problems and inspections.

## IN CASE OF OUTPATIENT CONSULTATIONS

- Make sure how the patient transits towards the physiotherapy facilities and provide him guidance about risk minimization measures during the journey.

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- Keep reception and attendance room always ventilated, with open windows and doors, whenever possible and 1-meter distancing between chairs.
- Remove magazines and newspapers from the reception to avoid shared handling.
- Clean regularly floors, sinks, handles, doors and restrooms at the site where the attendance will occur.
- Use and offer the patient disposable shoe protectors to be put prior to entering the attendance facilities. Or ask the patient to remove the shoe prior to entering, offering a place that must be cleaned daily to keep the shoes.
- Attempt to attend individually at the scheduled time, preferably with intervals between the appointments to avoid agglomerations in the reception and preferably with only one companion who is neither an older adult nor a child.
- When consultation is being scheduled, guide the patient to bring its own water, avoiding the use of drinking fountains even if in glasses to avoid infection while pushing the button to release the water. If the patient wishes to drink from the drinking fountain, tell the patient to clean the hands prior and after using.
- As soon as the patient arrives or leaves, make sure it does not have contact with door handles; whenever possible leave the door open. Wipe clean door handles with alcohol 70% every time someone touches it.
- Prior to the first consultation, use alcohol 70% to wipe clean the stretcher, utensils and equipment to be used during this period;
- Do not shake hands, hug the patient or kiss the patient in the face.
- Wash the hands with water and soap and guide the patient to do likewise prior to commencing the consultation; provide alcohol 70% in key-spots of the consultation facility. Paste plastic covered posters at the entrance of the consultation facility, with guidance about the importance of washing hands.
- Line the stretcher with plastic, use disposable sheet and clean after each consultation.
- Organize your exercises program to leave any physical contact with the patient at the minimum acceptable.
- Offer procedure gloves to the patient in case of common use utensils, as dumbbell, plastic bands etc.
- Avoid using mobiles during the session and guide the patient to do likewise. If unavoidable, wipe clean it prior and after use and clean hands after holding the phone.
- Use PPE – Personal Protective Equipment as aprons, goggles, gloves and masks according to the procedure to be conducted. Procedures masks must be changed whenever they become wet, gloves, after

each procedure and one disposable apron for each patient. Always wash hands and change fabric aprons or uniforms daily.

- While scheduling a visit and the patient enters the medical office, ask about coughing symptoms, coryza and shortness of breath. In case of suspicion of infection, guide the patient to go the nearest reference unit for required assistance.
- If you, healthcare professional presents symptoms of coughing, coryza, fever and/or shortness of breath, cancel all the consultations.

#### IN CASE OF HOME CONSULTATIONS

- Minimize the risk of contact during the journey to the place where the attendance will occur.
- Have always alcohol 70% and required PPE for the attendance.
- Ask the patient to keep the place ventilated.
- Avoid as much possible touching door handles and items in the place of attendance.
- Wash your hands regularly with water and soap and use alcohol 70% whenever necessary.
- Wear disposable shoe protector prior to entering the place of attendance.
- Wear, whenever possible, disposable apron, mainly in attendances with great physical contact with the patient, that must be discarded in the patient's garbage after the attendance.
- Do not shake hands with the patient, hug or kiss in the face.
- Guide the patient about cleaning procedures of the apparels and utensils of physiotherapy, in case the patient's apparels and utensils are utilized.
- Clean your apparels and utensils with alcohol 70% prior and after the attendance.
- Make sure that the patient and its relatives do not have symptoms like cough, coryza, fever and shortness of breath before going to the place. If this is the case, guide the patient and/or relatives about the routine of referring the patient to the reference services for the required care and suspend the attendance.
- Cancel the attendance in case, you, healthcare professional, presents symptoms of cough, coryza, fever and shortness of breath.
- Use your own pen, writing board and other items to register the evolution of the patient.

#### IN CASE OF HOSPITAL ATTENDANCE

- Follow the protocols disclosed internally by the Commission of Hospital Control (CHC).
- Avoid using mobile phone during the attendance as

well as the telephones of the service. If unavoidable, wipe clean prior and before use and clean the hands after holding the phone.

- Request PPE to the health service of the employee and use whenever indicated.
- Wipe clean properly all the equipment that the patient will have contact with.
- Always guide the patients and relatives about measures to be taken to avoid infection, limiting, to the most, the dissemination of the virus.
- Disclose reliable sources of information according to the guidance of the Ministry of Health.
- Prevention is always the best weapon to fight the virus. And information is the core of prevention.

## CONCLUSION

The oncology expert physiotherapist must protect the integrity of the patient. Prioritize, whenever possible, the teleconsultation or non in-person support. If in-person attendance is necessary, every care and precaution must be taken.

## CONTRIBUTIONS

Samantha Karlla Lopes de Almeida Rizzi and Anke Bergmann contributed in the conception and/or planning of the study; gathering, analysis and/or interpretation of data; wording and/or critical review. Manuela de Teive Argollo Samartin Cerqueira; Nadia Oliveira Gomes; Jaqueline Munaretto Timm Baiocchi and Suzana Sales de Aguiar contributed in gathering, analysis and/or interpretation of data, wording and/or critical review. All the authors approved the final version to be published.

## DECLARATION OF CONFLICT OF INTERESTS

There is no conflict of interests to declare.

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