Outpatient Pediatric Cardiology Clinic and Procedure Services

In accordance with current guidance from the American Academy of Pediatrics (AAP), the American College of Cardiology (ACC), as well as a growing body of evidence-based findings and recommendations from local, state and federal agencies, the Pediatric Cardiology services team is implementing the following guidelines in an effort to protect our patients, providers and staff, as well as, to actively mitigate the risks associated with exposure to COVID-19.

- All existing campus and community-based pediatric cardiology clinic operations will be consolidated and transitioned to the Heart Center clinic located in the OUCPB-2F service area pending implementation of a potential surge plan. At which time, the clinic will be temporarily relocated to the 7th floor of the OUCPB.

- All outpatient procedure services will be provided at the Children’s Hospital and/or OUCP Heart Center service locations.

- All currently scheduled clinic visits and procedure services, as well as future internal and external outpatient referral requests will be reviewed and categorized for a scheduling determination by the primary subspecialty provider team.

- Clinic visit and procedure requests will be categorized as Essential, Non-Essential or Telemedicine as provided in the Service Category Definitions listed below:
  
  - **Essential**: Services scheduled for new or existing patients that present with one or more conditions whose symptoms and level of acuity merit prompt to immediate face-to-face medical or surgical evaluation and treatment, and/or, whose ongoing plan of care necessitates regular and consistent on-site maintenance, monitoring or reassessment to achieve the desired clinical outcome per the direction of the primary subspecialty provider team.
  
  - **Non-Essential**: Services scheduled for new or existing patients that present with one or more conditions whose symptoms and level of acuity permits delayed face-to-face medical or surgical evaluation and treatment, and/or, whose ongoing plan of care can be maintained, monitored or reassessed on-site on an extended interval basis without risk to the desired clinical outcome per the direction of the primary subspecialty provider team.
Telemedicine: Services scheduled for new or existing patients that present with one or more conditions whose symptoms and level of acuity permits remote telemedicine evaluation, and/or, whose current plan of care does not require on-site diagnostics or therapies to maintain, monitor or reassess progress toward achievement of the desired clinical outcome per the direction of the primary subspecialty provider team.

- In addition to identifying service requests by category, each request will receive a numerical priority score to provide direction as to the timeframe the service should be performed/completed:
  - Priority 1 = Schedule to be seen ASAP (e.g., Inpatient discharge follow-up, Post-op, Hearts @ Home, Urgent symptoms)
  - Priority 2 = Schedule to be seen in next 8-weeks
  - Priority 3 = Schedule to be seen in May/June

- For the duration of the COVID-19 Operations Plan, the scheduling of clinic visits and procedure services will be limited to essential and/or telemedicine categories only.

- Each subspecialty clinic program and procedure modality within the service-line will establish and maintain a reference list of representative diagnoses or conditions that meet the guideline criteria for essential, non-essential and telemedicine visits to serve as a resource tool for scheduling staff. All non-essential clinic visits and procedure services will be postponed and rescheduled for a date at least 8-weeks from the date of 3/19/20.

Also refer to: Pediatric Cardiology Clinical Practice Update