The COVID-19 pandemic has created large challenges for Georgia's pediatricians. The Georgia Chapter's pediatricians are advocating for insurance carriers to pay for these services. As of today, procedures such as nebulizer/aerosol treatments, suctioning, and obtaining nasopharyngeal specimens may put physicians and staff at higher risk of exposure. Source: AAP, CDC, CHOA.

There are many ways to separate sick and well patients, depending on practice resources and set up. However if masks are available in your office, use as directed by CDC. Source: Task Force Consensus.

When managing patients with respiratory symptoms—suspected or confirmed COVID-19 or confirmed influenza—separating the sick and well patients, and separate waiting room may not be adequate. If testing is not available, use the three-step algorithm to assess the severity of illness and determine whether to transport the patient to the hospital. Source: Task Force Consensus.

If COVID-19 is suspected, please call the receiving hospital to discuss transport protocols. Source: Task Force Consensus.

Deferring non-urgent care to COVID-19 outbreak time is critical. Source: Task Force Consensus.

The situation with testing for COVID-19 is rapidly evolving. As of today, there is only limited testing capacity. Source: Task Force Consensus.

This is a stressful time for all of us. Please consider emphasizing the essentials of life for you and your family. Source: Task Force Consensus.

Patients and families are very worried and are eager to receive credible information. Please see full CDC recommendations here. The CDC guidance on this matter is extensive and updated frequently. Source: Task Force Consensus.

The COVID-19 SARS-CoV-2 virus is not yet fully understood and requires additional research and monitoring. It is recommended to contact the Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics (AAP) for information and updates. Source: Task Force Consensus.