



Pathways Webinar

March 31, 2020

COVID Resources, Mental
Health Resources and More

What is Pathways?

Pathways is an online resource created by family doctors and their staff to provide information about specialists and referrals as well as Community Service information and more!

Funding for Pathways is provided through the Physician Master Agreement via the General Practitioner Services Committee



Pathways is a registered non-profit.

PROVIDES ACCESS TO:





Pathways by the Numbers

Usage:

- Over **3 million page views** last year
- Pageviews average **200,000** page views per month





Pathways History

We modelled ourselves based on experience in Canterbury
New Zealand

Their Pathways website, like ours was designed to be nimble and
responsive and played a role in their Earthquake response in 2011



Pathways Evaluation

GPSC completed an independent evaluation of Pathways in **2015**

97%

report that Pathways has improved the referral process

**IMPROVED
PATIENT CARE**

Shorter Wait Times

Pre Post
2.9 → 3.8

Faster Appointment Confirmations

2.9 → 3.7

Better SP / Patient Matches

3.3 → 4.2

More Efficient Referral Process

3.5 → 4.2

Improved GP / SP Relationships

3.7 → 4.0

Increased Office Efficiency

3.8 → 4.3

**INCREASED
EFFICIENCY**

Very
Poor

Poor

Fair

Good

Very
Good



Pathways and COVID - 19

Pathways is supporting Physicians and their teams in the following ways:

COVID NEWS BANNERS: Pathways is creating VERY BRIEF up to date news banners with active links that are being pushed to every Division's homepage

COVID PATIENT AND PHYSICIAN RESOURCES: The Pathways Resource Committee has been meeting frequently and entering practical Physician Tools and Patient Info

NEW SPECIALTY OF COVID CARE: Physicians have been asking for a Central Repository of COVID Assessment Centres. Pathways has entered close to 100 New clinic listings in the NEW Specialty of COVID Care and is continuing to gathering this data in collaboration with GPSC and Divisions.

Pathways is Drinking from the Firehose of Information So You Don't Have to . . .



Here's Some Feedback Pathways received today!

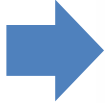
“Just wanted to say thank you for keeping the website so up to date with all the COVID information. The information is really helpful and as we are all being inundated with emails that we have to sift through it is great to have a central location to go to for up to date information. Thanks again! Cheers”



Pathways Banner

Check it Daily for Updates

Link to Billing Info



NEW Family Practice Billing During COVID

Read **BC Family Doctors** [Summary of COVID billing changes](#) Including **NEW** MARCH 27 Fees, Complex Care via telehealth, COVID in-person visit codes, ICBC, Worksafe, Longterm care.

Links to upcoming events



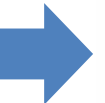
COVID-19 Important Provincial Updates, Featured Resources and March 31 Pathways Webinar

This Pathways province-wide banner will be updated regularly and **NEW** items will be highlighted in red.

Find more resources by typing **COVID** into our search.

REGISTER for [Tues March 31 Pathways Webinar](#) covering COVID resources, mental health tools and lots of great clinical resources to make your clinical work easier

Links to COVID College Updates



COLLEGE OF PHYSICIANS AND SURGEONS UPDATES

- MARCH 25 [COVID-19 - Warning on the use of unproven treatments and medications](#) (College of Physicians and Surgeons of BC) **NEW** [Evidence summary](#)
- Read additional [COVID-19 Important Updates from the College of Physicians and Surgeons of BC](#)

Featured COVID Physician Resources








PHYSICIAN RESOURCES

- **NEW** [What Are Essential Services in Primary Care? Summary of Provincial Health Officers Directive](#) (BC Family Doctors)
- **NEW** [COVID-19 Communication Support - Supporting Care Teams & Patients](#) (Clinician Experience Project)
- **NEW** [COVID-19 Telehealth Assessment in Primary Care](#) (BMJ Algorithm)

Featured COVID Patient Info



PATIENT INFO

- **NEW** [COVID-19 Managing Anxiety and Stress in Families with Children and Youth](#) (Shared Care) 
- **NEW** [BC COVID-19 App](#) includes alerts, resources and  [BC COVID-19 Symptom Self Assessment Tool](#) 
- **NEW** [COVID-19 Parenting Tips](#) (UNICEF and WHO) 
- **NEW** [COVID-19 Anxiety Self-Help Tips – FACE COVID](#) (Russ Harris) 

BC CDC COVID Website Links



BC CDC COVID-19 WEBSITE AND QUICK LINKS

- [COVID Testing Information](#) Who to test and how
- [Posters](#) (office cleaning and PPE) and [Patient handouts](#) (testing and self-isolation- multilingual)
- [COVID Clinical Care](#) BC CDC recommendations
- [Video explaining donning and doffing of PPE](#)








Pathways and COVID - 19

NEW SPECIALTY OF COVID CARE:

Physicians have been asking for a Central Repository of COVID Assessment Centres. Pathways has entered close to 100 New clinic listings in the **NEW Specialty of COVID Care** and is continuing to gathering this data in collaboration with GPSC and Divisions.


NEW Specialty of COVID Care

 Pathways™

Home |  Resources |  Forms |  Favourites |  You |

SPECIALTIES AND COMMUNITY SERVICES

Specialties

Addiction Medicine	Gastroenterology	Nephrology	Pharmacology
Allergy and Immunology	General Surgery	Neurology	Plastic Surgery
Anesthesiology	Genetics	Neurosurgery	Psychiatry: Adult
COVID Care 	Geriatrics	Nurse Practitioner	Psychiatry: Child and Youth
Cardiac / Thoracic Surgery	Hematology	Obstetrics / Gynecology	Public Health
Cardiology	Home Health	Oncology	Rehabilitation Medicine
Dermatology	Infectious Disease	Ophthalmology	Respirology
ENT / Otolaryngology	Internal Medicine	Orthopedics	Rheumatology
Emergency Medicine	Laboratory Medicine / Pathology	Pain Management	Sports Medicine
Endocrinology	Medical Imaging	Palliative Care	Urology
Family Practice	Midwifery	Pediatrics	Vascular Surgery

Community Service Categories

Abuse / Neglect	End of Life Care	LGBT2Q+ Community	Social / Recreational
Addictions	Family / Parenting	Legal	Transportation
Advocacy	Financial	Medical Equipment	Veteran Services
Caregiver Support	First Nation Services	Medication	Victim Services
Child Services	Food	Mental Health	Volunteering
Condition Specific Support	Healthcare Providers	Multicultural Services	Youth Services
Disability Services	Home Care	Pregnancy Care	
Education	Housing / Shelter	Public Health	
Employment	Immigrant Services	Seniors Services	



DEMO of Specialty of COVID Care and Patient and Physician Resources

Showing:

Clinics

- Filtering by Areas of Practice
- Filtering Geography
- Clinic Details

Finding COVID resources

- from the COVID specialty menu tab or
- By searching term COVID and how to narrow your search to just Patient info or Just Physician Resources



Updating Specialist Telehealth Information in Pathways

Pathways is working to distribute a quick survey link to specialists about their current Telehealth practices so that we can update this information in Pathways.

We aim to get the link broadly distributed this week



COVID Patient and Physician Resources

HOW ARE PATHWAYS RESOURCES SELECTED AND MAINTAINED?

Pathways Resource Committee is a group of 5 doctors with an interest in EBM who review ALL Pathways content items assessing:

- From a trusted source?
- Quick and easy to use during a visit?
- Best and most practical items chosen (We drink from the firehose to spare you the deluge!)
- No industry sponsorship on item
- Direct link to the page of website that has the useful info

The committee is currently meeting to review COVID content weekly

The committee reviews ALL content on the website at least annually, and responds in real-time to feedback.



Don't forget that you can narrow search results
e.g Just **Patient Info**

Home | Resources ▾ | Forms ▾ | Favourites ▾ | You ▾ | covid

Show Me Everything Specialists Clinics Community & HA Services Physician Resources **Patient Info** Areas of Practice

Patient Info

[COVID-19 - Symptom Self Assessment Tool \(BC Ministry of Health\)](#)

Patient Info: Handouts

[COVID-19 - Hand Hygiene \(BCCDC\)](#)

[COVID-19 - Information for patients who are being tested, self isolating and/or monitoring for symptoms - Multilingual \(BCCDC\)](#)

[COVID-19 - Information for Patients with Chronic Health Conditions \(BCCDC\)](#)

[COVID-19 - Patient Information \(BCCDC\)](#)

[COVID-19 Sick Note for Employers \(BCFD\)](#)

[COVID-19 - Symptom Monitoring Form for Patients \(BCCDC\)](#)

[COVID-19 - Testing and Self Isolation \(BCCDC\)](#)

[STAY HOME MESSAGE - RE COVID-19](#)





Or Narrow search to Just **Physician Resources**

Home | Resources ▾ | Forms ▾ | Favourites ▾ | You ▾ | covid

Show Me Everything Specialists Clinics Community & HA Services **Physician Resources** Patient Info Areas of Practice Forms

Physician Resources: Guidelines

- [COVID-19 - Infection Prevention & Control for Long Term Care & Assisted Living Facilities \(BCCDC\)](#)

Physician Resources: Instructional Videos

- [COVID-19 - Donning and Doffing Personal Protective Equipment – PPE – Video \(FHA\)](#)
- [COVID-19 Nasopharyngeal Swab Technique Video \(NEJM\)](#)

Physician Resources

- [COVID-19 - Cleaning and Disinfecting Clinical Spaces \(BCCDC\)](#)
- [COVID-19 - Donning and Doffing Personal Protective Equipment - PPE \(BCCDC\)](#)
- [COVID-19 - Guidance & Case Management \(BCCDC\)](#)
- [COVID-19 - Internet Book of Critical Care \(IBCC\)](#)
- [COVID-19 - Public Health Management \(BCCDC\)](#)
- [COVID-19 - Symptom Self Assessment Tool \(BC Ministry of Health\)](#)
- [COVID-19 - Testing Information – Who to test and how UPDATED MAR 17th \(BCCDC\)](#)



Remember you can email resources to patients
easily from a no-reply email @ Pathways
Just click on the envelope

COVID-19 - Parenting Tips (UNICEF, WHO)  

 [COVID-19 - Parenting Tips \(UNICEF, WHO\)](#)





Here is how the email looks

Pathways

Dr. Tracy Monk has sent you a link to a resource

7:55 PM

Dr. Tracy Monk has sent you a link to a resource,

Dr. Tracy Monk has sent you a link to a resource, "COVID-19 - Parenting Tips (UNICEF, WHO)."

[Click here to see the resource.](#)



BMJ COVID 19 Telehealth Assessment

thebmj Visual summary



Covid-19: remote consultations

A quick guide to assessing patients by video or voice call

This graphic, intended for use in a primary care setting, is based on data available in March 2020, much of which is from hospital settings in China. It will be revised as more relevant data emerges.



1 Set up

Prepare yourself and decide how to connect

Have current 'stay at home' covid-19 guidance on hand

UK government advice:
<http://bit.ly/ukgovisol>

Video is useful for

Severe illness
Anxious patients
Comorbidities
Hard of hearing

Scan medical record for risk factors such as:

Diabetes Pregnancy Smoking
Chronic kidney or liver disease COPD
Steroids or other immunosuppressants
Cardiovascular disease Asthma

2 Connect

Make video link if possible, otherwise call on the phone

Check video and audio

Can you hear/see me?

Confirm the patient's identity

Name
Date of birth

Check where patient is

Where are you right now?



Note patient's phone number in case connection fails



If possible, ensure the patient has privacy

3 Get started

Quickly assess whether sick or less sick

Rapid assessment

If they sound or look very sick, such as too breathless to talk, go direct to key clinical questions

Establish what the patient wants out of the consultation, such as:

Clinical assessment Referral Certificate
Reassurance Advice on self isolation

4 History

Adapt questions to patient's own medical history

Contacts

Close contact with known covid-19 case
Immediate family member unwell
Occupational risk group



History of current illness
Date of first symptoms

Most common presentation

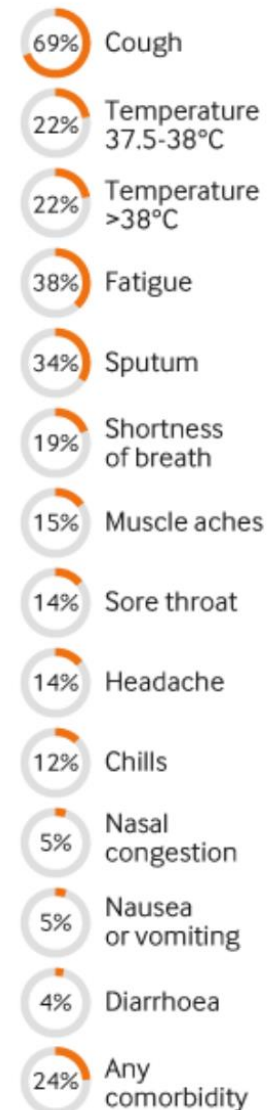
Cough Fatigue Fever Short of breath

Cough is usually dry but sputum is not uncommon

Up to 50% of patients do not have fever at presentation

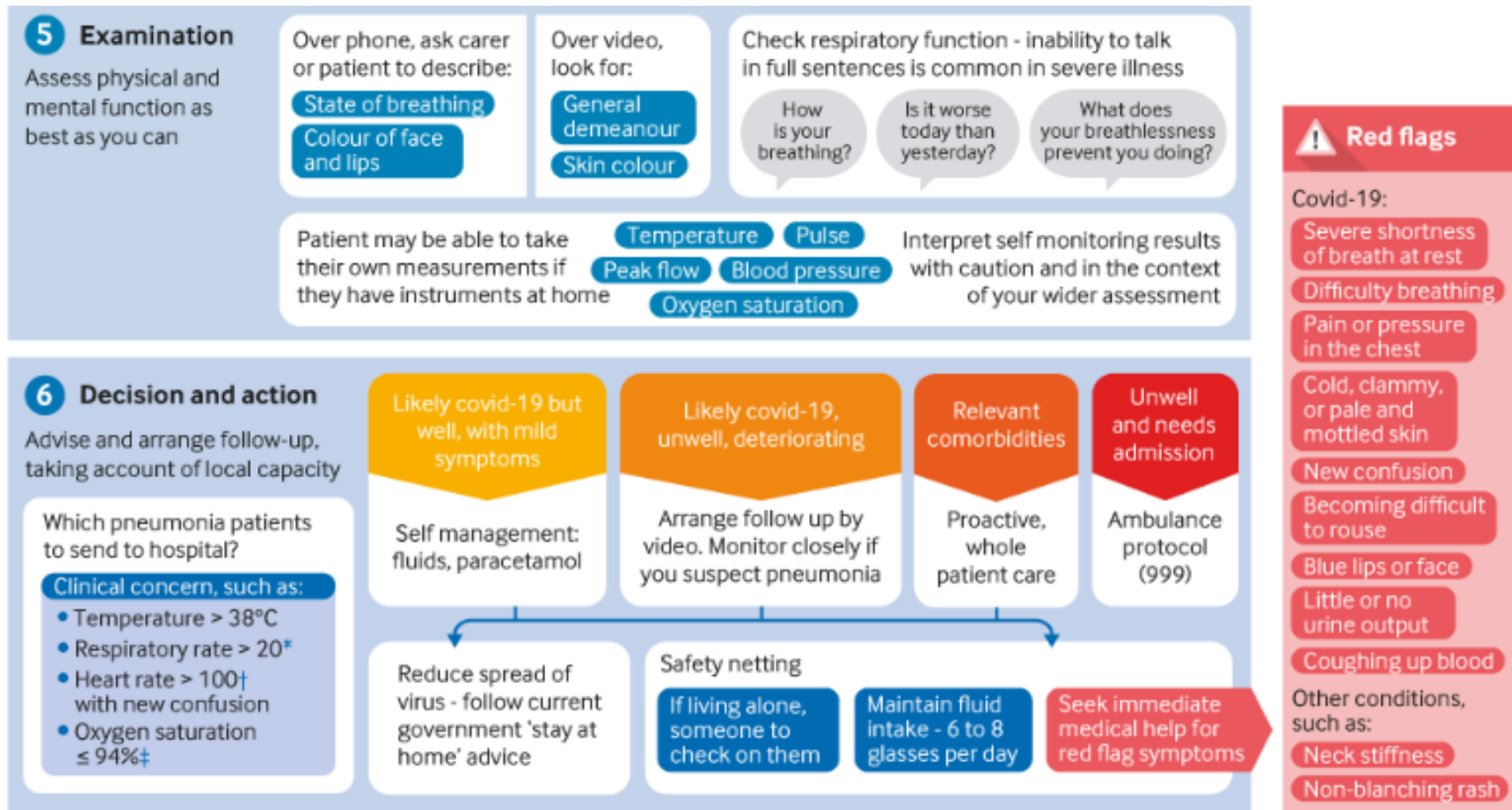
Clinical characteristics

Based on 1099 hospitalised patients in Wuhan, China





BMJ COVID 19 Telehealth Assessment



* Breaths per minute

† Beats per minute

‡ If oximetry available for self monitoring

thebmj

Read the full article online



<https://bit.ly/BMJremcon>

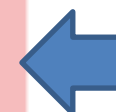
© 2020 BMJ Publishing Group Ltd.

Disclaimer: This infographic is not a validated clinical decision aid. This information is provided without any representations, conditions, or warranties that it is accurate or up to date. BMJ and its licensors assume no responsibility for any aspect of treatment administered with the aid of this information. Any reliance placed on this information is strictly at the user's own risk. For the full disclaimer wording see BMJ's terms and conditions: <http://www.bmj.com/company/legal-information/>

Note link to Full article Has other useful info



Note red flags





COVID-19 Communication Support - Supporting Care Teams & Patients (Clinician Experience Project)



MANAGING PATIENT COVID-19 FEARS

SUMMARY OF POINTS:

- Match emotion to emotion
- Identify their greatest worry
- Convey – “We are in this together”
- Admit to the unknown

REFLECTION

How are you personally handling COVID-19? How has this pandemic effected your day-to-day life and routine? As you reflect on this, think about the impact it has also had on your patients, colleagues, and staff members. Doing this can help you to better connect with those around you as you seek to match emotion to emotion.

What is your greatest worry during these uncertain times? What are you hearing from your patients, colleagues, and staff members? What are some connecting phrases you can have ready to share when speaking with others about their greatest worry?



COVID-19 Communication Support - Supporting Care Teams & Patients (Clinician Experience Project)



MANAGING FEAR AND ANXIETY TIP #1: FINDING FEAR

SUMMARY OF POINTS:

- Assume that the patient is anxious
- Ask the patient... "Before we begin, I want to make sure we address any big concerns or worries you have during today's visit"

REFLECTION

Reflect on what you are hearing from those around you currently regarding fear and anxiety during this time of pandemic. Are there common themes? How do you see others handling their fears and anxiety? How do you personally handle fear and anxiety? Are there any techniques you can share with your patients, colleagues, or staff members? What is your comfort level addressing these emotions?

Reflect on the potential impact of implementing a phrase such as the one listed in the tip to address fear. Are you currently implementing phrasing to address fear at the beginning of the interaction or encounter? If so, do you think this is making a difference in how your patients respond throughout the rest of the visit? If not, what phrasing could you try that you are comfortable with?

Mental Health & Coping Resources During COVID-19

Matthew Burkey, MD

Child & Adolescent Psychiatrist

Interior Health / Compass (BC Children's)

COVID-19 Important Provincial Updates, Featured Resources and March 31 Pathways Webinar

This Pathways province-wide banner will be updated regularly and **NEW** items will be highlighted in red.

Find more resources by typing **COVID** into our search.

REGISTER for **Tues March 31 Pathways Webinar** covering COVID resources, mental health tools and lots of great clinical resources to make your clinical work easier

COLLEGE OF PHYSICIANS AND SURGEONS UPDATES

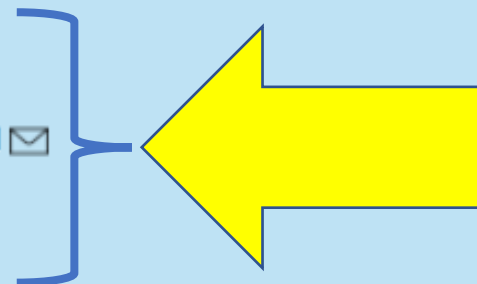
- MARCH 25 [COVID-19 - Warning on the use of unproven treatments and medications](#) (College of Physicians and Surgeons of BC) **NEW** Evidence summary
- Read additional [COVID-19 Important Updates](#) from the College of Physicians and Surgeons of BC

PHYSICIAN RESOURCES

- **NEW** [What Are Essential Services in Primary Care? Summary of Provincial Health Officers Directive](#) (BC Family Doctors)
- **NEW** [COVID-19 Communication Support - Supporting Care Teams & Patients](#) (Clinician Experience Project)
- **NEW** [COVID-19 Telehealth Assessment in Primary Care](#) (BMJ Algorithm)

PATIENT INFO

- **NEW** [COVID-19 Managing Anxiety and Stress in Families with Children and Youth \(Shared Care\)](#) ✉
- **NEW** [BC COVID-19 App](#) includes alerts, resources and ✉ [BC COVID-19 Symptom Self Assessment Tool](#) ✉
- **NEW** [COVID-19 Parenting Tips](#) (UNICEF and WHO) ✉
- **NEW** [COVID-19 Anxiety Self-Help Tips – FACE COVID](#) (Russ Harris) ✉



BC CDC COVID-19 WEBSITE AND QUICK LINKS

- [COVID Testing Information](#) Who to test and how
- [Posters](#) (office cleaning and PPE) and [Patient handouts](#) (testing and self-isolation- multilingual)
- [COVID Clinical Care](#) BC CDC recommendations
- [Video explaining donning and doffing of PPE](#)

- Info on coping from CDC
- Updated with BC-based links
- Brief (2 pages)



Managing Anxiety and Stress in Families with Children and Youth During the COVID-19 Outbreak

The outbreak of coronavirus disease 2019 (COVID-19) may be stressful for people. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults, children, and youth. The Child & Youth Mental Health & Substance Use (CYMHSU) Community of Practice has created the following document to provide information and advice on managing anxiety and stress in families with children and youth during the COVID-19 outbreak.

Keys to Managing Anxiety & Stress

Quick Links:

- [Reducing stress in yourself and others](#)
- [Information for parents](#)

Stress and Coping

Uncertainty is hard for everyone, yet there are many simple and practical ways to cope through even the most difficult situations. Research even shows that coping with stress builds resilience; in other words, it can make you, the people you care about, and your community stronger. We are already seeing creative solutions, acts of kindness and many, many people working together to improve life for each other.

COVID-19 - Parenting Tips (UNICEF, WHO) ❤️ ✉️

🔗 COVID-19 - Parenting Tips (UNICEF, WHO)

- Six 1-page parenting tips during COVID-19
- Age-specific ideas
- Dealing with issues
- Authoritative sources, graphic presentation

2 COVID-19 PARENTING Keeping It Positive

1 COVID-19 PARENTING One-on-One Time

Can't go to work? Schools closed? Worried about money? It is normal to feel stressed and overwhelmed.

School shutdown is also a chance to make better relationships with our children and teenagers. One-on-One time is free and fun. It makes children feel loved and secure, and shows them that they are important.

Set aside time to spend with each child

It can be for just 20 minutes, or longer – it's up to us. It can be at the same time each day so children or teenagers can look forward to it.

Ask your child what they would like to do

Choosing builds their self confidence. If they want to do something that isn't OK with physical distancing, then this is a chance to talk with them about this. (see next leaflet)

Switch off the TV and phone. This is virus-free time

Ideas with your baby/toddler

- Copy their facial expression and sounds
- Sing songs, make music with pots and spoons
- Stack cups or blocks
- Tell a story, read a book, or share pictures

Ideas with your teenager

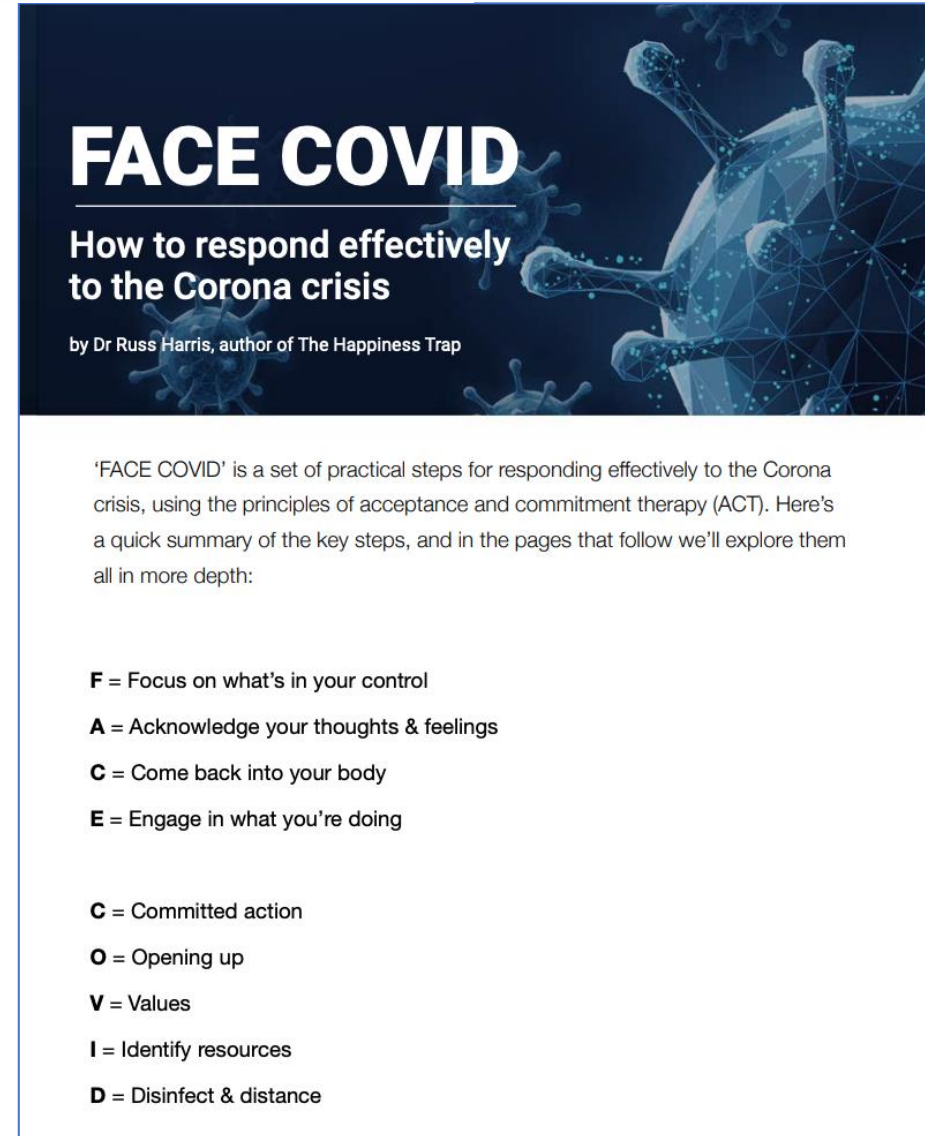
- Talk about something they like: sports,

Ideas with your young child

- Read a book or look at pictures

World Health Organization | unicef for every child | End Violence Against Children | INTERNET OF GOOD THINGS | PARENTING FOR LIFELONG HEALTH | USAID FROM THE AMERICAN PEOPLE | ACCELERATE AFRICA | CDC CENTERS FOR DISEASE CONTROL AND PREVENTION

- Free self-help eBook for anxiety related to COVID
- Brief (12 pages), practical coping strategies
- Adult audience





More Patient and Physician Resources

- For General Issues, not COVID specific

General Headache Resources

Home | Admin 0/218 | Resources | Forms | Favourites | You | headache

Show Me Everything Specialists Clinics Community Services Physician Resources **Patient Info** Areas of Practice Forms

In My Regional Divisions All Divisions

Patient Info: Handouts

- [Headache Diary \(TOP-Alberta\)](#)
- [Migraine Headache Medications During Pregnancy \(TOP-Alberta\)](#)
- [Migraine - Medication Overuse \(TOP-Alberta\)](#) "Headache" -> "Migraine"
- [Migraine - Patient Self Management \(TOP-Alberta\)](#) "Headache" -> "Migraine"
- [Migraine Preventive Medications \(TOP-Alberta\)](#) "Headache" -> "Migraine"
- [Migraine Triggers \(TOP-Alberta\)](#) "Headache" -> "Migraine"
- [Migraine Headache Patient Handout](#)
- [Treating migraine headaches: Some drugs should rarely be used \(Choosing Wisely\)](#)
- [Imaging tests for headaches: When you need them—and when you don't \(Choosing Wisely\)](#)
- [Treating frequent headaches with pain relievers: Don't take them too often \(Choosing Wisely\)](#)

Migraine Patient Handout

This handout is a compilation of information from the following sources: [Vancouver Coastal Health Headache Handout](#), and [UBC Headache Clinic](#)

What is a migraine?

A migraine is a brain disorder that makes people predisposed to frequent headaches. We call migraine a 'primary' headache disorder. This means that headaches are not happening because of another cause such as a brain tumour or stroke. Migraine headaches usually last 4 to 72 hours without treatment. For your doctor to diagnose migraine, 2 of these 4 features are required:

1. Headache affects one side of your head (unilateral)
2. Headache is moderate to severe
3. Headache gets worse if you are active
4. Throbbing pain in your head

And 1 of these 2 features are also required for the diagnoses:

1. Nausea and/or vomiting
2. Sensitivity to light and sound

Headache is not the only problem

About 70% of patients have warning signs before the headache. These can include yawning, irritability, fatigue, and change in appetite. About 30% of patients have an aura. The most common type of aura is a change in your sight. You might see dark or coloured spots, sparkles or zig-zag lines. The aura typically starts before the headache and can last from 5 to 60 minutes. After the headache, you may have changes in your mood, feel tired, or change in appetite.

What causes migraine?

10 to 15% of people have migraine. It is thought to be a genetic disorder that makes your nervous system hypersensitive and vulnerable to 'triggers'. Keep a headache diary to learn what your possible triggers are. Then you can try to avoid them. Triggers for migraine may include:

Foods: caffeine, chocolate, citrus, dairy, alcohol, aspartame, MSG, processed foods & meats, which often contain nitrates
Other factors: hormonal changes, bright lights, loud noise, weather, stress, or mood changes.

Here's a [detailed handout](#) you can review about triggers.

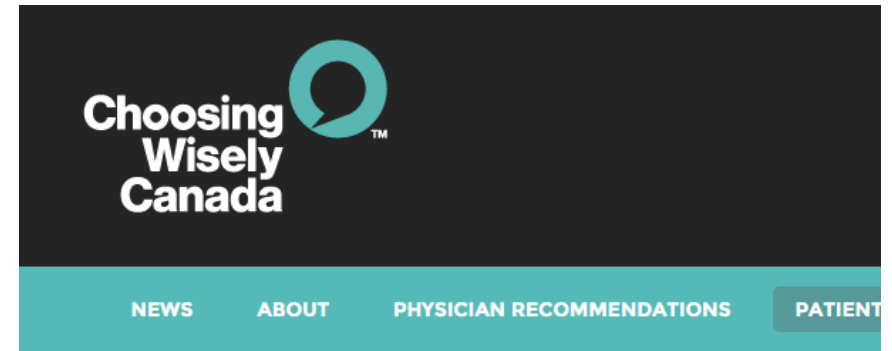
What is chronic migraine?

Chronic migraine is a term to describe headaches that occur at least 15 days each month with 8 migraine type headaches per month. Between 1 and 3% of the population suffers from chronic migraine. About half of chronic migraine sufferers will have headaches caused by overusing certain pain medications. Risk factors for changing from occasional (episodic) to chronic migraine include a history of head trauma, obesity, poor sleep, mood problems, snoring, excess caffeine and medication overuse.

What is medication overuse headache?

Medication overuse headache (also called rebound headache) is caused by taking too much headache medication such

Choosing Wisely: Imaging Tests for headache when you need them and when you don't

[VIEW ALL](#)[DOWNLOAD PDF](#)

Imaging tests for headaches: When you need them— and when you don't

Released April 2, 2014

CT and MRI examinations are called imaging tests because they take pictures, or images, of the inside of the body. Many people who have headaches want a CT scan or an MRI to find out if their headaches are caused by a serious problem, such as a brain tumor. Most of the time these tests are not needed. Here's why:

Imaging tests rarely help.

Doctors see many patients for headaches and most of them have migraines or headaches caused by tension. Both kinds of headaches can be very painful, but a CT scan or an MRI rarely shows why the headache occurs. Having a CT scan or MRI also does not help ease the pain.

A doctor can diagnose most headaches during an office visit. The doctor asks you questions about your health and your symptoms. This is called a medical history. Then the doctor may do what is called a neurological exam, which includes a test of your reflexes. If your medical history and exam are normal, usually imaging tests will not show a serious problem.

When should you have an imaging test for headaches?

In some cases you might need a CT scan or an MRI. You might need one if your doctor cannot diagnose your headache based on your neurological exam and medical history. Or you might need one if the exam finds something that is not normal.

You may also need a CT scan or an MRI if you have unusual headaches. See your doctor right away if:

- You suddenly develop a very severe headache which feels like something is bursting inside your head.
- Your headaches are different from other headaches you've had, especially if you are age 50 or older.
- Your headaches happen after you have been physically active.
- You have headaches with other serious symptoms, such as a loss of control, a seizure or fit, or a change in speech or alertness.

How to treat a headache

Your doctor can advise you on how best to treat your headache. You can help most headaches by taking these steps:

Question

Log in to your Pathways and
Try using the search right now

- Find a handout about **MIGRAINE TRIGGERS**. What organization created it?

Remember you can use the “Show Me” buttons to narrow your search

Answer

Find a handout about MIGRAINE TRIGGERS. Who created it?

[Home](#) | [Admin](#) 0/218 | [Resources](#) | [Forms](#) | [Favourites](#) | [You](#) |

Show Me

Everything

Specialists

Clinics

Community Services

Physician Resources

Patient Info

Areas of Practice

Forms

In

My Regional Divisions

All Divisions

Patient Info: Handouts

Migraine Triggers (TOP-Alberta)

Pearls: Choosing Wisely

Don't forget to consider the behavioural components of migraine treatment, including lifestyle issues like regular and adequate meals and sleep, and management of specific triggers including stress. (Choosing Wisely)

Common Food Triggers

There are many different types of migraine triggers. A trigger is something that increases your chances of having a migraine headache. Often, one trigger alone won't cause a headache, but if two or more triggers are present at the same time, a migraine may develop. This can make it difficult to detect specific migraine triggers and it can take some effort to determine what they are.

Food triggers are important for some patients, and less important for others. Some foods that patients commonly report can trigger a migraine are listed below:

- Red wine and other alcohol
- Caffeine excess and caffeine withdrawal
- Citrus fruits
- Nuts
- Nitrites (found in processed, cured, or preserved meat)
- Aged or strong cheeses, sour cream, yogurt, other dairy products
- Smoked fish, pickled herring

Physician Tools – Algorithms / Care Pathways

Home | Admin 0/240 | Resources | Forms | Favourites | You | headache

Show Me Everything Specialists Clinics Community Services **Physician Resources** Patient Info Areas of Practice Forms

In My Regional Divisions All Divisions

Physician Resources: Algorithm / Care Pathway

Headache Management (TOP-Alberta)

Physician Resources: Guidelines

Headache - Approach to the Undifferentiated Headache (U of T)

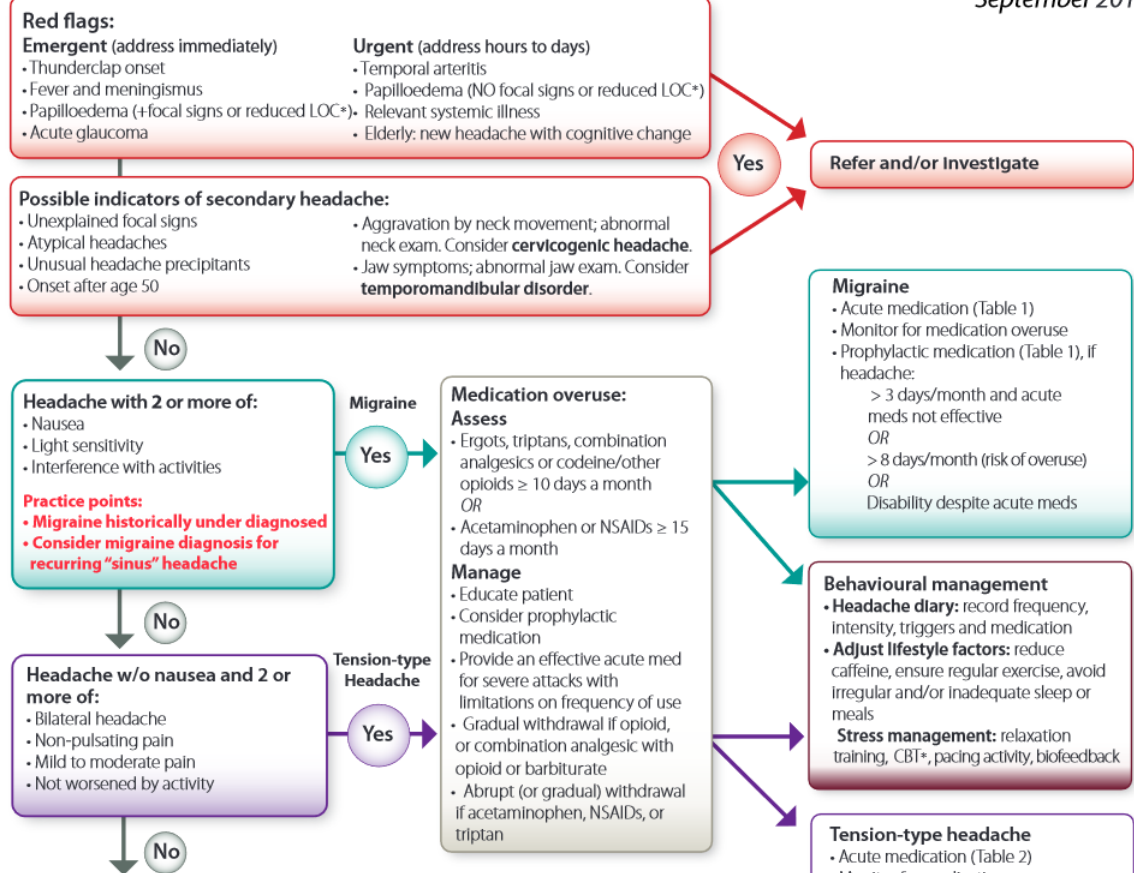
Pearls: Choosing Wisely

Don't do imaging for uncomplicated headache unless red flags are present. (Choosing Wisely)



Quick Reference: GUIDELINE FOR PRIMARY CARE MANAGEMENT OF HEADACHE IN ADULTS

September 2016



Knowing which antibiotic to use for which infections:

Try typing in the **name of any infection** in Pathways search

It will take you to the right page of the Bugs and Drugs manual

e.g. try typing

- pneumonia
- sinusitis
- cat bite
- cellulitis

Bacterial Vaginosis - Treatment Recommendations (Bugs and Drugs)
Clostridium Difficile - Antibiotic Treatment (Bugs and Drugs)
Conjunctivitis - Diagnosis and Antibiotic Treatment (Bugs and Drugs)
Dental Care - Antibiotic Prophylaxis in Patients with Joint Replacements (Bugs and Drugs)
Diverticulitis - Antibiotic Treatment Recommendations (Bugs and Drugs)
Genital Herpes - Treatment Recommendations (Bugs and Drugs)
Gonococcal Infections - Antibiotic Treatment Recommendations (Bugs and Drugs)
Herpes Zoster / Shingles - Treatment Recommendations (Bugs and Drugs)
Otitis Externa - Prevention and Treatment (Bugs and Drugs)
Otitis Media - Pediatric Diagnosis and Antibiotic Treatment (Bugs and Drugs)
Pharyngitis - Adult Diagnosis and Antibiotic Treatment (Bugs and Drugs)
Pharyngitis - Pediatric Diagnosis and Treatment (Bugs and Drugs)
Pneumonia - Diagnosis and Antibiotic Treatment (Bugs and Drugs)
Sinusitis - Diagnosis and Antibiotic Treatment (Bugs and Drugs)
Syphilis - Diagnosis and Treatment Recommendations (Bugs and Drugs)
Travellers' Diarrhea Treatment (Bugs and Drugs)
Trichomonas - Treatment Recommendations (Bugs and Drugs)
Urinary Tract Infections - Diagnosis and Antibiotic Treatment (Bugs and Drugs)
Animal Bites - Antibiotic Treatment Recommendations for Adults (Bugs and Drugs)
Animal Bites - Antibiotic Treatment Recommendations for Children (Bugs and Drugs)
Cellulitis - Diagnosis and Treatment (Bugs and Drugs)
Cervicitis Antibiotic Treatment (Bugs and Drugs)
Chlamydia Antibiotic Treatment Recommendations (Bugs and Drugs)
Chronic Bronchitis - Acute Exacerbation - Diagnosis and Antibiotic Treatment (Bugs and Drugs)
Helicobacter - H Pylori Antibiotic Treatment (Bugs and Drugs)
Human Bites - Antibiotic Treatment Recommendations (Bugs and Drugs)
Mastitis - Antibiotic Recommendations (Bugs and Drugs)

Try Typing “Chlamydia” in search and you will get both:

- a handout for the patient and
- a direct link to the right page of bugs and drugs

The screenshot shows a web application interface with a dark header bar. On the left, there are navigation links: Home, Admin (0/218), Resources, Forms, Favourites, and You. On the right, there is a search bar containing the text 'chlamydia'. Below the header, there are two rows of filter buttons. The first row has a red 'Show Me' button followed by buttons for 'Everything', 'Specialists', 'Clinics', 'Community Services', 'Physician Resources', 'Patient Info', 'Areas of Practice', and 'Forms'. The second row has a red 'In' button followed by buttons for 'My Regional Divisions' and 'All Divisions'. Below the filters, there are two sections of search results. The first section is titled 'Patient Info: Handouts' and contains a link 'Chlamydia Handout - Multilingual (HealthLinkBC)'. The second section is titled 'Physician Resources: Medication' and contains a link 'Chlamydia Antibiotic Treatment Recommendations (Bugs and Drugs)'. The word 'Chlamydia' in both links is highlighted with an orange background.

Home | Admin 0/218 | Resources | Forms | Favourites | You | chlamydia

Show Me Everything Specialists Clinics Community Services Physician Resources Patient Info Areas of Practice Forms

In My Regional Divisions All Divisions

Patient Info: Handouts

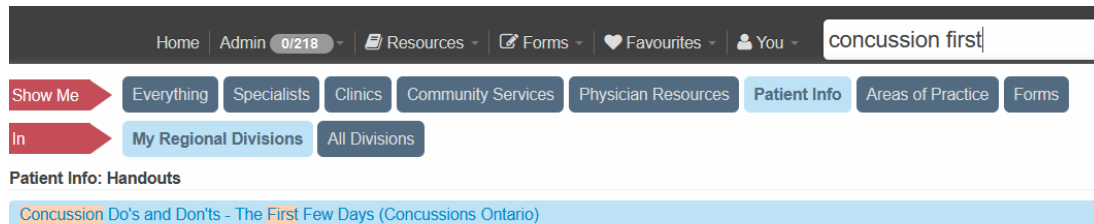
[Chlamydia Handout - Multilingual \(HealthLinkBC\)](#)

Physician Resources: Medication

[Chlamydia Antibiotic Treatment Recommendations \(Bugs and Drugs\)](#)

Concussion: The first few days

Handout for patients



Concussion Do's and Don'ts: the first few days



The individual with concussion SHOULD:

- ✓ **See a doctor or nurse practitioner for help**
- ✓ **The first 48 hours – physical AND mental rest!**
Sleep at night, rest during the day.
- ✓ **Take it slowly returning to daily activities and sport**
Talk with your doctor or nurse practitioner about when you can return to work or school.
Talk with your doctor or nurse practitioner about a return to play protocol.
Talk with your employer or teacher about returning bit by bit.
As you start to feel better, it's important to get back to doing your normal activities as you can tolerate them. Start by doing just a little, and if you feel okay, then you can try to do a bit more. Take lots of rests and give yourself extra time.
- ✓ **Conserve your energy**
After a concussion, your brain has less energy to spare than it normally does. It is important to save physical and mental energy so that your brain can fully recover.
If symptoms return or you get new ones as you become more active, this is a sign that you are pushing yourself too hard.



The individual with concussion should NOT (until or unless your doctor or nurse practitioner says it's okay):

- ✗ **Be woken up every hour**
Increased sleep need is normal and necessary in the acute stage.
- ✗ **Be put in a dark room; avoiding all activity**
In the past, patients were told to have absolute rest and it is now accepted that light and cautious activity can be part of the healing process. Respect your brain and your body and have a conversation with your doctor or nurse practitioner about what this can look like for you.
- ✗ **Exercise/play sports, heavy household chores, or any activities that could lead to another concussion or cause symptoms to worsen**
Some people who have had repeated concussions may have serious long-term problems, including chronic difficulty with concentration, memory, headache, and sometimes physical skills (e.g., balance and coordination).
- ✗ **Return to full study or work**
Sometimes the demands of work/school can trigger symptoms following a concussion. You may need to take some time off work/school to rest and recover; or reduce your responsibilities for a short period of time.

Question

Find a patient handout that gives guidance about CONCUSSION and RETURN to WORK. Who created it?

Show Me

Everything

Specialists

Clinics

Community Services

Physician Resources

Patient Info

Areas of Practice

Forms

In

My Regional Divisions

All Divisions

Patient Info: Handouts

[Concussion - Return to Activity \(CATonline\)](#)[Concussion - Return to School \(CATonline\)](#)[Concussion - Return to Sport \(CATonline\)](#)[Concussion - Return to Work \(CATonline\)](#)

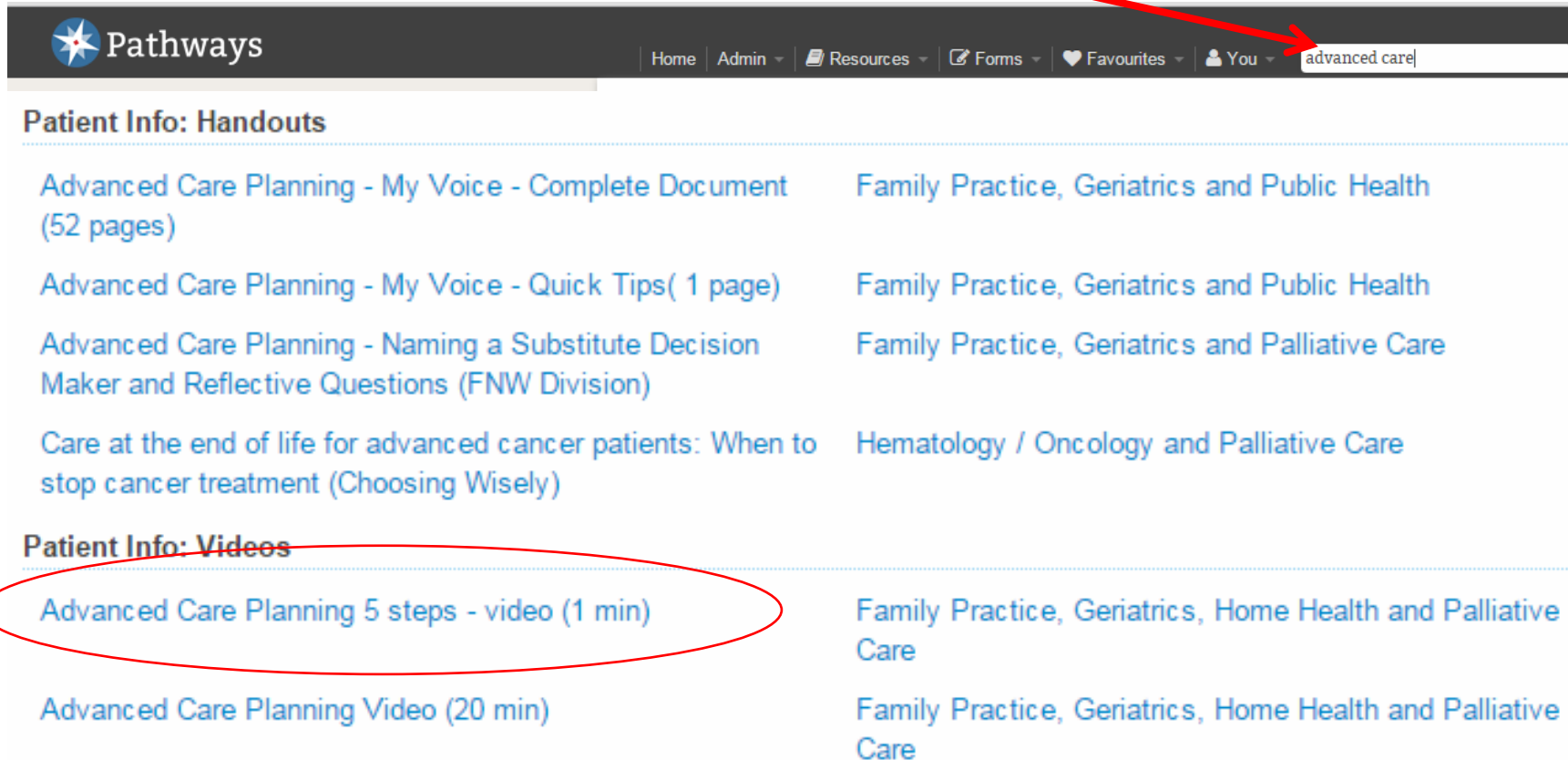
Return to Work

This tool is a guideline for managing an individual's return to work following a concussion and does not replace medical advice. The goal for each stage is to find the 'sweet spot' between doing too much and doing too little. Timelines and activities may vary by direction of a health care professional.

AT HOME			AT WORK		
STAGE 1:	STAGE 2:	STAGE 3:	STAGE 4:	STAGE 5:	STAGE 6:
Initial physical and cognitive rest <ul style="list-style-type: none"> Rest in a quiet and calm environment. Try activities that do not aggravate symptoms (e.g., listening to quiet music or colouring). Sleep as much as your body needs while trying to maintain a regular night sleeping schedule. Limit: <ul style="list-style-type: none"> Lengthy social visits. Screen time (smartphone, computer, television) and reading. Avoid: <ul style="list-style-type: none"> Sports or physical activities that increase your heart rate or cause you to break a sweat. <p>NOTE: It is recommended to discuss driving with a licensed medical professional for safety considerations.</p>	Light activity <ul style="list-style-type: none"> Gradually increase cognitive activity by trying simple, familiar tasks (e.g., reading, watching TV, using the computer or drawing). Go for walks or try other light physical activity (e.g., swimming, stationary bike, light housework), without becoming short of breath. Take frequent rest periods; keep napping to a minimum. Begin with brief periods of activity, up to 30 minutes. Start thinking about returning to work: communicating with the workplace, a return to work plan, and your commute. 	Prepare to return to work—at home <ul style="list-style-type: none"> Continue to increase cognitive activity. Continue to return to pre-injury physical activities (e.g., grocery shopping, gardening, jogging, light weight training). Contact workplace to discuss a tailored Return to Work plan. Attempt to commute to work to assess if it aggravates symptoms or drains energy. A regular sleeping schedule supports a successful return to work. Work your way up to 2 hours of activity, with breaks as needed. 	Prepare to return to work—at work <ul style="list-style-type: none"> Work accommodations can include: flexible hours, reduced workload, extra time for tasks, access to a quiet, distraction-free work environment. Arrange to return to work on a graduated basis. Consider number of hours per day and appropriate accommodations. Work your way up to an additional 2 hours of activity, with breaks as needed. Have a plan to leave work and return to Stage 2 if symptoms worsen. 	Begin graduated return to work <ul style="list-style-type: none"> Return to work according to your graduated return to work plan, with the agreed upon number of hours per day and accommodations. At work, start with less demanding activities before more difficult ones. Gradually increase working hours week-to-week, or sooner, as appropriate. 	Regular work hours with modifications, as needed <ul style="list-style-type: none"> Decrease accommodations as energy and capacity increases. Accommodations can be phased out in "trial" periods, to ensure that they are no longer needed. Monitor energy levels for completing household tasks and participating in social or recreational activities after the work day.
Rest <p>When symptoms start to improve OR after resting for 2 days max, BEGIN STAGE 2</p>	Gradually Increase activity <p>When 30 minutes of activity is tolerated, BEGIN STAGE 3</p>	Prepare to return to work <p>When 4 hours of activity is tolerated, with breaks as needed, BEGIN STAGE 4</p>	Return to work with accommodations and a personalized Return to Work plan <p>When ready for regular work hours with accommodations, BEGIN STAGE 5</p>	Adjust workplace accommodations, as needed <p>When regular work hours are tolerated with min. accommodations, BEGIN STAGE 6</p>	Full return to work <p>Once you have COMPLETED STAGE 6, Return to Work strategy completed</p>

Recognizing that workplace environments vary by industry and occupation, returning to work may focus more on a return to cognitive activity, physical activity, or a combination of both. It is normal to experience symptoms during recovery; you do not have to wait to be symptom free before returning to work. However, after Stage 2, if new or worsening symptoms appear at any stage, go back to the previous stage for at least 24 hours. You may need to move back a stage more than once during the recovery process.

Pathways Tools to help with Advance Care Planning
Type: "ADVANCE CARE"
into Pathways search box to see a list of tools



The screenshot shows the Pathways website interface. At the top, there is a dark navigation bar with the Pathways logo on the left and a search bar on the right. The search bar contains the text "advanced care". A red arrow points from the text "into Pathways search box" in the preceding text to the search bar. Below the navigation bar, the page is divided into two sections: "Patient Info: Handouts" and "Patient Info: Videos". The "Handouts" section lists four documents with their titles and associated medical specialties. The "Videos" section lists two videos, with the first one, "Advanced Care Planning 5 steps - video (1 min)", circled in red.

Pathways Home Admin Resources Forms Favourites You advanced care

Patient Info: Handouts

Advanced Care Planning - My Voice - Complete Document (52 pages)	Family Practice, Geriatrics and Public Health
Advanced Care Planning - My Voice - Quick Tips(1 page)	Family Practice, Geriatrics and Public Health
Advanced Care Planning - Naming a Substitute Decision Maker and Reflective Questions (FNW Division)	Family Practice, Geriatrics and Palliative Care
Care at the end of life for advanced cancer patients: When to stop cancer treatment (Choosing Wisely)	Hematology / Oncology and Palliative Care

Patient Info: Videos

Advanced Care Planning 5 steps - video (1 min)	Family Practice, Geriatrics, Home Health and Palliative Care
Advanced Care Planning Video (20 min)	Family Practice, Geriatrics, Home Health and Palliative Care

Pathways Tools:

Videos to send to patients

Advanced care planning 5 steps video (1 min)

Who would speak for you

If you couldn't speak for
yourself?



Advance Care Planning - Five Steps



Fraserhealth



Subscribe

238

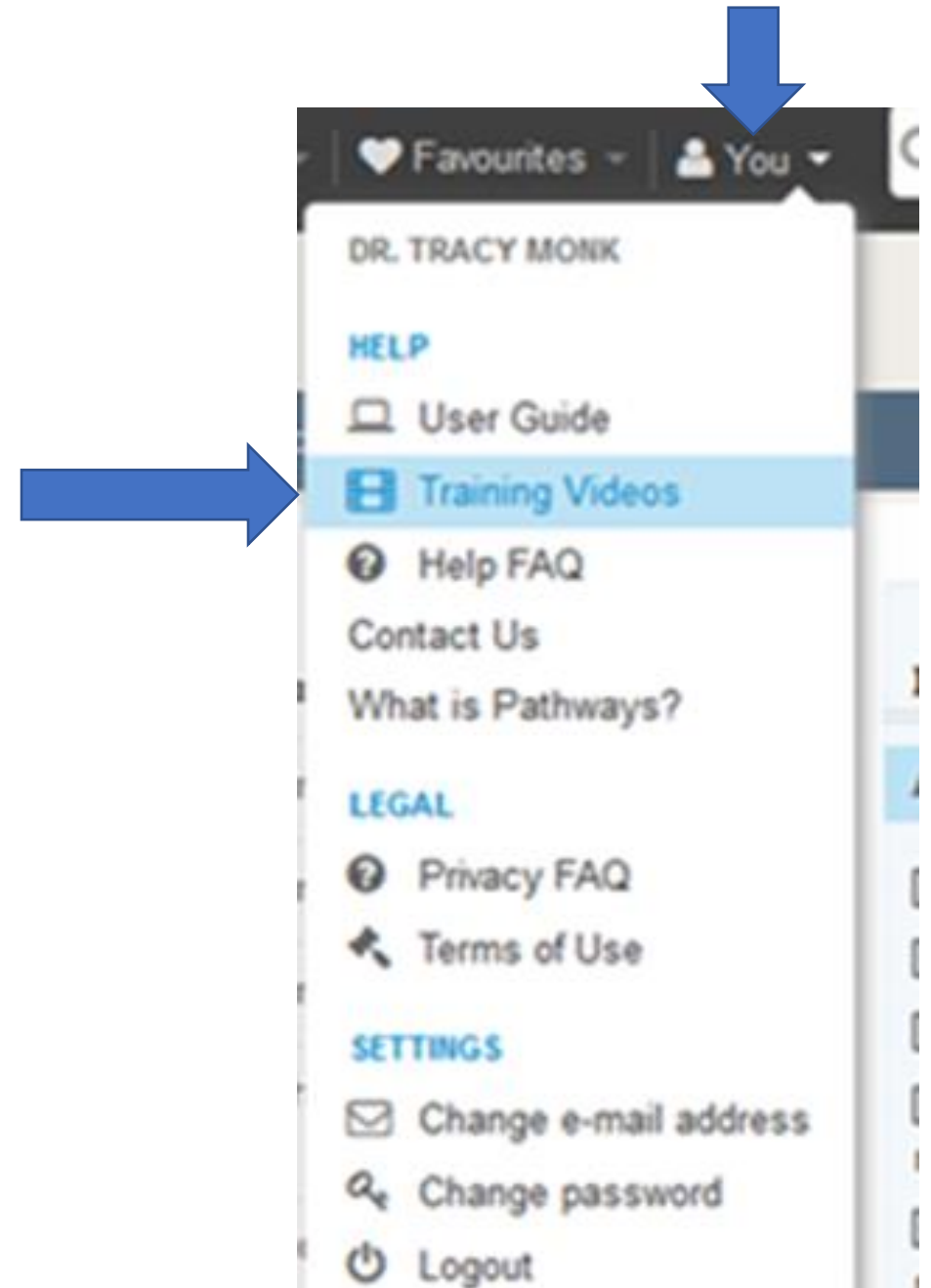
120 views

“You” Tab has Training Videos



Check them out :-)

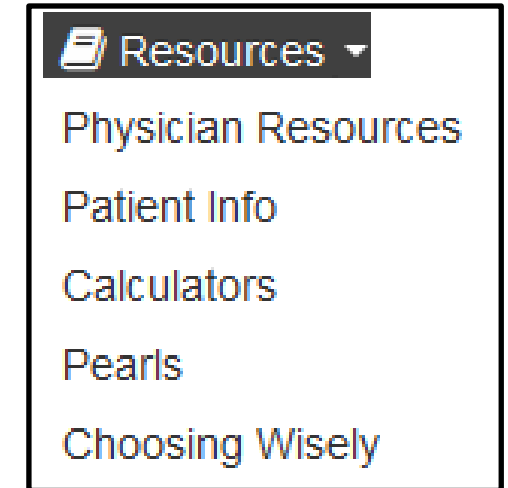
They include:

- **Pain Management Resources Tutorial**
- **Community Services Tutorial** Including How to find services for
 - Addictions,
 - Mental health,
 - and lots more!



Patient and Physician Resources -Summary Tips

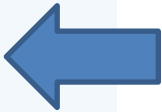
- Try out the email to patients feature 
- Save some favorites 
- Make it part of Divisional and educational events to show Pathways tools and encourage presenters to include Pathways sources
- Spend some time looking at the Resources so that you know them & feel comfortable using them during a visit
- **Check the Pathways banner daily**



Filter Physician Resources

Subcategories

- ☒ All
- ☐ Action Plans
- ☐ Algorithm / Care Pathway
- ☐ Anatomical Diagrams
- ☐ Calculators
- ☐ Community Service Physician Reference
- ☐ Decision Rules
- ☐ Diagnostic Tools
- ☐ Flowsheets
- ☐ Guidelines
- ☐ Instructional Audio
- ☐ Instructional Videos
- ☐ Medication
- ☐ Numbers Needed to Treat
- ☐ Risk Tables
- ☐ Scale and Scoring Tools
- ☐ Shared Decision Aids



Summary Tips

Getting to know the Physician Resources

Spend 15 minutes in a small group as part of other CME activity (e.g. do you have a PBSGL or REAL small group?)

each doc can pick some tools to share with the group

- Shared decision aids or
- Calculators or
- Scale and scoring tools

(remember that things like PHQ-9, ACE, CAGE are “Scale and Scoring” tools in Pathways, not “Forms”)



Participate in keeping Pathways the best it can be

- Send suggestions for resources
- Let us know when specialist, clinic or community service information looks incorrect by sending feedback
- Our administrators respond feedback in real time and also update everything every 6 months, but our users have their finger on the pulse . . Let us know!
- There's a feedback button at bottom of every listing



Incorrect Information? Let us know



PATHWAYS VIRTUAL CARE DIRECTORY

- Pathways is creating a public facing Virtual Care Directory to help support physicians and their patients with the shift to virtual care.
- Each clinic listing in the directory will provide basic contact information, relevant patient instructions, and a link their clinic website (if applicable).
- A Pathways Virtual Care Directory listing can also serve as a public webpage for clinics which do not have a website.
- By compiling all virtual care listings in one place, we can easily create linkages to appropriate COVID-19 assessment centres and provide patients with pertinent up-to-date information on how to access services.
- The directory will also help to support virtual networks of care as they form



PATHWAYS VIRTUAL CARE DIRECTORY

**The NEW province wide public facing directory will help the public to know
“Your Family Doctors are here for you” and here is how to access care.**

By compiling all virtual care listings in one place, we can easily create linkages to appropriate COVID-19 assessment or triage centres.

We will send out the survey link after this webinar

Make sure to fill in your information and you can identify whether you just want basic contact info (e.g. phone # and address),

or if you also want your listing to link to your clinic website

or if you have info you would like your patients to know and would like to have accessible on a webpage (without having to set up a website)



Pathways Questions?

To create a listing on the new virtual care directory,
please provide your information [HERE](#).

If you do not already have a Pathways account and want
access or if you have other questions,
Send a message to contact-us@pathwaysbc.ca