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Preserving Women's Health COVID-19 Newsletter

NAVY MEDICINE FEMALE FORCE READINESS CLINICAL COMMUNITY (FFRCC)

The FFRCC developed this Newsletter with the purpose of supporting providers amidst emerging challenges related to COVID-19 and ensuring the continuous delivery of quality care to active duty service women under current circumstances. Please provide any further information, best practices, or resources to address patient and provider needs during this time to the BUMED Office of Women's Health.

Disclaimer: Any mention of commercial services or applications is provided as a matter of common interest and is not intended as an endorsement.

01. LEVERAGING TELEHEALTH DURING COVID-19

Three video communication apps have been approved for use across the Military Health System (MHS) to **conduct virtual visits with patients**: [FaceTime](#), [Google Duo](#), and [Skype](#). However, use of these platforms is permitted at each command's discretion and providers must ensure that their command leadership approves the use of these applications prior to any engagement with these resources. In addition, clinicians who plan to provide remote care must complete [the Joint Knowledge Online Virtual Health Provider training](#). Providers should also restrict their phone numbers when contacting patients in accordance with the [DHA Virtual Health Guidance](#). DHA has also approved use of Commercial Virtual Remote (CVR), a Department of Defense (DoD) developed version of [Microsoft Teams](#) to communicate with patients. This platform enables users to **create shared workspaces for audio, video, and instant messaging**. Users should be aware this is a **temporary solution** and all **stored data will be destroyed at the conclusion of the COVID-19 emergency**. As part of a gradual CVR rollout over the next several weeks Navy users will receive an automated email message inviting CVR account registration by Command.

02. MENTAL HEALTH DURING COVID-19

Quarantine and social distancing measures come with psychological challenges and stressors from changes in routine and limited social and physical contact. Now is an especially important time for healthcare providers to promote psychological well-being for female Sailors and Marines. **Clear, understandable, and practical communication** can reduce adverse psychological responses and increase positive behaviors. There are many **military mental health apps** that can be recommended to patients such as [BREATHE2RELAX](#), an app to help manage stress, and [Virtual Hope Box](#), which helps reduce symptoms of depression. See the "Mental Health Mobile Apps Sheet" on [SharePoint](#) for more resources. Additionally, [Headspace](#), a civilian sector app for meditation, is offering a free year subscription to providers with NPI numbers. Changes in routine and feelings of isolation create additional challenges for those struggling with substance abuse. Many **recovery and support groups** are offering online Zoom, dial-in, or online forum meetings such as [Alcoholics Anonymous](#), [Narcotics Anonymous](#), and [Unity Recovery](#). See the "SARP Resource Sheet" on the [SharePoint](#) for more substance abuse recovery resources for female Sailors and Marines.

03. ACCESS TO CONTRACEPTION DURING COVID-19

Encouraging your female Sailors and Marines to **consider contraceptive options** and take action towards family planning protects women from the stress of an unintended pregnancy and **promotes readiness across the force**. Providers are encouraged to **use telehealth** for patients who would like to begin using contraception or need a prescription renewal. A 12-month supply of oral contraceptives (OCPs) can be prescribed at one time and it is recommended to **use a mail order pharmacy** to fill OCP prescriptions. In addition, patients currently using long acting reversible contraceptives (LARCs) may benefit from guidance on using their LARC device for extended use beyond Food and Drug Administration (FDA) approval at this time. Clinical research demonstrates that **extended LARC use is safe and effective for certain devices**. Providing your patient with the option to extend the use of their LARC device beyond the FDA-approved duration can support efforts to social distance and offer greater convenience as patients are allotted more time before needing to have the device removed and replaced.

| Name of LARC | FDA-Approved Duration | Extended Use Duration |
|--|-----------------------|-----------------------|
| NEXPLANON® (Etonogestrel single rod implant) | 3 years | 4-5 years |
| Paragard® (Copper T380A IUD) | 10 years | 12 years |
| Mirena® (Levonorgestrel 52 mg IUD) | 5 years | 7 years |

04. PHYSICAL FITNESS DURING COVID-19

Some patients that are suffering from musculoskeletal (MSK) injuries will be unable to access physical therapy during this time. Encourage female Sailors and Marines to utilize home exercise programs on [Rehab, Refit, Return to Duty](#) (Rx3) or the [Physera](#) App to **aid recovery from MSK injuries**, and the [Recover Athletics](#) App to **recover from** and **prevent running injuries**. There are many free resources for service women to continue exercise at home. [Navy Operational Fitness and Fueling System](#) (NOFFS) site offers workout programs, nutrition guidance and virtual trainers. [Marine Corps' FitForce](#) offers a "USMC Workout of the Day." [Nike Training Club Premium](#) App workouts are free until further notice and [Peloton](#) App workouts are free for 90 days. Both apps offer a range of workouts at various difficulty levels: **cardio, high intensity interval training (HIIT), strength training, mobility, running, and yoga classes**.

FURTHER RESOURCES

As we weather the impact of COVID-19, it is of utmost importance that we continue to work together as a community to ensure continued provision of critical women's healthcare and share best practices to promote wellbeing. In addition to the articles and guidance summarized within this newsletter, there are more resources available on the FFRCC SharePoint Site, found [here](#).

