ADULT OFFICE TRIAGE for Patient Calls w/ Respiratory Symptoms – DO NOT BRING PT INTO OFFICE without PUI precautions

START: Telephone Triage

If patient has symptoms → **Triage to MD /APRN / PA or Call Center if no clinician available**

Asymptomatic COVID exposure

Nursing or clinician: Review and confirm exposure meets CDC definition

ADVICE FOR ALL ASYMPTOMATIC PATIENTS:
- Self monitor per CDC
- Call back for fever or respiratory symptoms
- Exposure recommendations:
  - HCW exposure - refer to YNHHS algorithm
  - Household exposure - self quarantine 14 days, regardless of test results, monitor for symptoms and test on day 5.
  - Community exposure - self quarantine 14 days, monitor for symptoms, test on day 5

Symptoms e.g.
- Cough, shortness of breath, or difficulty breathing
- Fever or chills
- Muscle or body aches
- Headache
- Vomiting or diarrhea
- New loss of taste or smell

ADVICE FOR ALL SYMPTOMATIC PATIENTS:
- Self isolate pending results of COVID test
- Symptom management
- Call back for worsening symptoms
- Advise against emergency room or walk-in unless severe symptoms
- Order COVID testing (PCR if available)
- Order FLU testing if indicated and available - treat those at high risk for complications empirically with Tamiflu without delay

Severe Symptoms
- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Dyspneic (RR > 25)
- Tachycardia (HR > 110)
- Pulse oximetry <94%
- Temperature >101.5 for 3 days

- Refer to ED for assessment and possible admission
- If ambulance needed must inform "COVID Suspect"

COVID TEST

Negative
- Home isolation – until symptoms resolve
- Symptom management
- Call back for worsening
- Repeat testing day 3 if indicated

Positive
- Home isolation minimum 10 days, assuming improvement and ≥ 1 day afebrile
- Symptom management
- Regular patient outreach

See COVID positive pathway

SIM COVID AMBULATORY GUIDELINE 3/29/20
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