ACNW COVID-19 Screening
Ambulatory Care

This pathway is intended as a guide for staff/providers and is not intended to replace clinical judgement.

Screening
(Staff member screening to wear regular mask during screening process)
- All patients screened on arrival by Kiosk or Admissions
- Screen all patients/family/caregivers on arrival for exposure to COVID-19 positive person or PUI, travel to endemic area AND for the following symptoms:
  - Fever AND/OR Cough OR Shortness of breath

Personal Protective Equipment (PPE)
- Regular mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating (likely to produce cough) procedures
- Eye protection
- Gown
- Gloves

STOP
- Place mask on patient, family, and escorting staff
- Notify ED Team Leader
- Escort to Emergency Department

YES = POSITIVE SCREEN
- If pt. UNSTABLE call ED team leader for transfer to ED

NO = NEGATIVE SCREEN
- Proceed as normal. Mask if only symptoms present and send to destination.

GO TO CORONAVIRUS POSITIVE SCREEN PATHWAY FOR AMBULATORY CARE

Caregiver Positive Screen
If caregiver/family member screens positive, refer them to their Primary Care Provider OR
if caregiver is unstable, follow normal escalation procedure, including proper isolation.
### Clinical Features COVID-19 Testing

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Testing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asymptomatic</td>
<td>None</td>
</tr>
<tr>
<td>Acute Respiratory Infection</td>
<td>NO if Flu/RPP (+) OR (-) and patient is well</td>
</tr>
<tr>
<td>Acute Respiratory Infection requiring hospitalization or critically ill</td>
<td>YES (To ADH with PUI form) <em>Sterile Saline ok if run out of viral transport media</em></td>
</tr>
</tbody>
</table>

**Testing Decision Making**

1. Reference Lab (LabCorp): Order “2019 Novel Coronavirus SARS-CoV-2 by PCR”. Collect (1) NP swab in viral transport media and send to main lab.
2. PUI form must accompany RPP test to the lab. Lab will order COVID-19 (ADH) test. If we run out of viral transport media, (1) NP swab in sterile saline is acceptable for COVID-19 (ADH) testing; however, the RPP will not be able to be performed.

### Personal Protective Equipment (PPE)
- Regular mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating (likely to produce cough) procedures (nebulized treatments, Swabbing for tests)
- Eye protection
- Gown
- Gloves

### General Aerosol Generating Procedures:
- Collection of sputum sample; tracheal intubation; suction before or after intubation; nebulizer treatments; manipulation of oxygen masks; manual ventilation; bronchoscopy; non-invasive ventilation; defibrillation; chest physiotherapy; high flow oxygen; tracheostomy; manipulation of BiPap mask; or endotracheal suction.

### Provider Resources
- Infection Prevention Clinician Resources
- CDC Information for Healthcare Professionals
- Arkansas Department of Health: 2019 Novel Coronavirus
- Interim Guidance for Implementation Home Care of People Not Requiring Hospitalization for 2019 Novel Coronavirus

### Patient too ill for outpatient evaluation and treatment

### Transfer to Emergency Department
- Ensure proper isolation protocol is followed
- Call ED Team Lead and plan for transfer to emergency department
ACNW COVID-19 Screening
Emergency Department

This pathway is intended as a guide for staff/providers and is not intended to replace clinical judgement.

**Screening**
(Staff member screening to wear regular mask during screening process)
- Screen all patients/family/caregivers on arrival to ED for exposure to COVID-19 positive person or PUI, travel to endemic area AND for the following symptoms:
  - Fever AND/OR Cough OR Shortness of breath
- Patient Referrals: Answers to screening questions will be obtained from OSH and on arrival to ED
  - Patients arriving by EMS will be screened during radio report or at EMS door

**Personal Protective Equipment (PPE)**
- Regular mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating (likely to produce cough) procedures
- Eye protection
- Gown
- Gloves

**STOP**
- Place mask on patient, family, and escorting staff
- Patient stable: Notify charge nurse, he/she will determine who will escort patient to AIIR rooms 6 and 7, negative pressure rooms 21, 22, 23, 24.
- Place patient on Special Respiratory Enhanced Contact Isolation (see yellow PPE box)
- Obtain cell phone number to contact primary caregiver and for ED point person (TL, RN)

**Inform ED Team Leader, Attending**
- Proceed as normal
  - Provide mask for patient and place on respiratory contact precautions

**GO TO CORONAVIRUS POSITIVE SCREEN PATHWAY FOR ED**

**Patient Care**
- Special Respiratory Enhanced Contact Isolation (signs on all doors)
- Attending/Fellow/APN and RN only to care for patient (no orientees or students)
- Disposable equipment is used for patient care. (DO NOT remove equipment, stethoscope, etc)
- Same RN to triage patient, complete primary assessment, and complete necessary orders
- Advise patient and family to not leave room and provide TL phone number to call for questions
- Registration & Financial Counseling to be completed over phone
- If advised by IP, collect 1 NP swab for respiratory pathogen panel (ACH) and possible ADH testing

**ED Team Leader**
- Notify ED TL on shift/on call
- Ensure airborne and enhanced contact isolation is in place
- Ensure RN/Provider wear PPE, have been FIT tested or have CAPR
- Collect list of patient’s in triage waiting room when patient entered ED
- Collect list of staff members who came into contact with patient (ED, Security, EVS, Admissions, etc.)

**GO TO CORONAVIRUS POSITIVE SCREEN PATHWAY FOR ED**

**YES = POSITIVE SCREEN**

**NO = NEGATIVE SCREEN**

**UNsuspected**
- Patient can be placed in any open room

**Suspected**
- If sick/in distress: Place in room 1 or 2
- FULL PPE for all team
- Collected list of staff members who came into contact with patient (ED, Security, EVS, Admissions, etc.)
ACNW COVID-19 Positive Screen Pathway

Emergency Department

This pathway is intended as a guide for staff/providers and is not intended to replace clinical judgement.

SYMPTOMS
Acute onset of fever AND/OR cough OR shortness of breath

EXPOSURE
Close contact with person with laboratory-confirmed COVID-19 or person who is under investigation for COVID-19
OR
Travel to area where COVID-19 is endemic

Initiate IMMEDIATE Special Respiratory Enhanced Contact Isolation Precautions

- Apply regular mask to patient, family, escorting staff
- Escort patient & family immediately to a negative pressure isolation room
- Place in private room with door closed if negative pressure room unavailable

History & Physical Exam

- Respiratory symptoms, duration, and timing of onset
- Ask about ill family members/close contacts
- Ask that all accompanying family members remain at bedside with patient
- Consider other etiologies based on history of travel or exposure

Discharge

- Review follow-up recommendations
- Supportive care including hydration and antipyretics
- Quarantine instructions, including duration
- Follow up with PCP
- CDC home care guidance

Admission

- Admit to an appropriate inpatient isolation room
- Mask patient, family, and staff during transport
- Call ADH and fill out PUI form (if testing)

Clinical Features | COVID-19 Testing |
--- | --- |
Asymptomatic | None |
Acute Respiratory Infection | NO if Flu/RPP (+) OR (-) and patient is well YES if (+) contact to a known COVID-19 contact/PUI¹ |
Acute Respiratory Infection requiring hospitalization or critically ill | YES [To ADH with PUI form] *Sterile Saline ok if run out of viral transport media² |

Personal Protective Equipment (PPE)

- Regular mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating (likely to produce cough) procedures
- Eye protection
- Gown
- Gloves

General Aerosol Generating Procedures:
collection of sputum sample; tracheal intubation; suction before or after intubation; nebulizer treatments; manipulation of oxygen masks; manual ventilation; bronchoscopy; non-invasive ventilation; defibrillation; chest physiotherapy; high flow oxygen; tracheostomy; manipulation of BiPap mask; or endotracheal suction.

Other Diagnostic Testing

- Portable CXR if clinically warranted
- CT not indicated unless concern for other process
- Consider other laboratory testing to guide clinical management

¹-Reference Lab (LabCorp): Order “2019 Novel Coronavirus SARS-CoV-2 by PCR” Collect (1) NP swab in viral transport media and send to main lab. 2- PUI form must accompany RPP test to the lab. Lab will order COVID-19 (ADH) test. If we run out of viral transport media, (1) NP swab in sterile saline is acceptable for COVID-19 (ADH) testing; however, the RPP will not be able to be performed.

²*Sterile Saline ok if run out of viral transport media

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V. 1.2

ACNW COVID-19 Screening Inpatient Areas

This pathway is intended as a guide for staff/providers and is not intended to replace clinical judgement.

**Screening**
(Staff member screening to wear regular mask during screening process)
- Screen all patients/family/caregivers for exposure to COVID-19 positive person or PUI, travel to endemic area AND for the following symptoms:
  - Fever AND/OR Cough OR Shortness of breath

**STOP**

- Place patient on Special Respiratory Enhanced Contact Isolation (see yellow PPE box)
- Move patient to a negative pressure room with door closed if available
- If no negative pressure room available, place in private room with door closed
- Limit care providers entering room
- Review current visitor guidelines on the Arkansas Children’s webpage

**Personal Protective Equipment (PPE)**
- Regular mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating (likely to produce cough) procedures
- Eye protection
- Gown
- Gloves

**Diagnostic Testing:**
- 2019 Novel Coronavirus SARS-CoV-2 PCR (1 nasopharyngeal swab in viral transport media, if not available sterile saline ok must complete ADH PUI form and send with swab to lab)
- Consider testing for flu and/or Respiratory Pathogen Panel (RPP) as clinically indicated

**Patient Care**
- Special Respiratory Enhanced Contact Isolation (signs on all doors)
- Direct care providers only to care for patient (no orientees or students)
- Disposable equipment is used for patient care. (DO NOT remove equipment, stethoscope, etc)
- Advise patient and family to not leave room. If caregiver must leave hospital, place mask on caregiver. All meals for patients/caregivers will be delivered to room.

**Infection Prevention**
- Communicate with Inpatient team leader/PCM as necessary
- Add rule-out COVID-19 header in Epic chart
- Ensure staff has implemented Special Respiratory Enhanced Contact Isolation
- Please call Infection Prevention with questions

**Inpatient Team Leader/PCM**
- Notify Team Leader/PCM if on shift
- Cluster care and limit number of staff for routine care of patient
- Notify Nursing Supervisor/AOC
- Ensure special respiratory enhanced contact isolation is in place
- Ensure RN/Provider wear PPE, have been FIT tested or have CAPR
- Collect list of staff members who came into contact with patient

**GO TO CORONAVIRUS POSITIVE SCREEN PATHWAY FOR INPATIENT**
ACNW COVID-19 Positive Screen Pathway
Inpatient Areas

This pathway is intended as a guide for staff/providers and is not intended to replace clinical judgement.

Initiate IMMEDIATE Special Respiratory Enhanced Contact Isolation Precautions
- Ensure patient is in a negative pressure room with door closed if available
- If no negative pressure room available, place in private room with door closed
- Limit care providers entering room
- Review current visitor guidelines on the Arkansas Children’s webpage

Personal Protective Equipment (PPE)
- Regular mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating (likely to produce cough) procedures (Nebulizer/Suctioning/HHFNC/Intubation)
- Eye protection
- Gown
- Gloves

General Aerosol Generating Procedures:
collection of sputum sample; tracheal intubation; suction before or after intubation; nebulizer treatments; manipulation of oxygen masks; manual ventilation; bronchoscopy; non-invasive ventilation; defibrillation; chest physiotherapy; high flow oxygen; tracheostomy; manipulation of BiPap mask; or endotracheal suction.

2019 Novel Coronavirus SARS-CoV-2 PCR (COVID-19) Test Results

• Disclose to family
• Continue current management of patient per standard of care

• Disclose to family
• Place on appropriate respiratory contact isolation for patients with respiratory symptoms
• Continue routine management of patient per standard of care

Patient Ready for Discharge:
- Review follow-up recommendations
- Supportive care including hydration and antipyretics
- Quarantine instructions, including duration
- Follow up with PCP
- CDC home care guidance

Negative Pressure Rooms:
Inpatient rooms 17 and 20
ACNW COVID-19 Screening
Perioperative Areas

PPE Precautions for:
- Person under investigation (test pending)
- Unable to obtain history
- Tested positive for COVID-19

SYMPTOMS
Acute onset of fever AND/OR cough OR shortness of breath

EXPOSURE
Close contact with person with laboratory-confirmed COVID-19 or person under investigation for COVID-19
OR
Travel to area where COVID-19 is endemic

Risk of aerosolization?

YES
- Intubate/extubate patient in PACU Room 1
- Place HEPA filter on mapleson circuit
- Limit personnel involved in care
- All must wear eye protection and N-95 mask or PAPR

NEGATIVE SCREEN
- Continue routine management of patient per standard of care

POSITIVE SCREEN
- Move patient to OR suite 1 for procedure if NOT an aerosolizing procedure

Personal Protective Equipment (PPE)
- Regular mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating (likely to produce cough) procedures (Nebulizer/Suctioning/HHFNC/Intubation)
- Eye protection
- Gown
- Gloves

General Aerosol Generating Procedures:
collection of sputum sample; tracheal intubation; extubation; suction before or after intubation; nebulizer treatments; manipulation of oxygen masks; manual ventilation; bronchoscopy; non-invasive ventilation; defibrillation; chest physiotherapy; high flow oxygen; tracheostomy; manipulation of BiPap mask; endotracheal suction; aerodigestive procedures; or upper endoscopy.

For any conditions not satisfied by this pathway, please contact Infection Prevention on-call