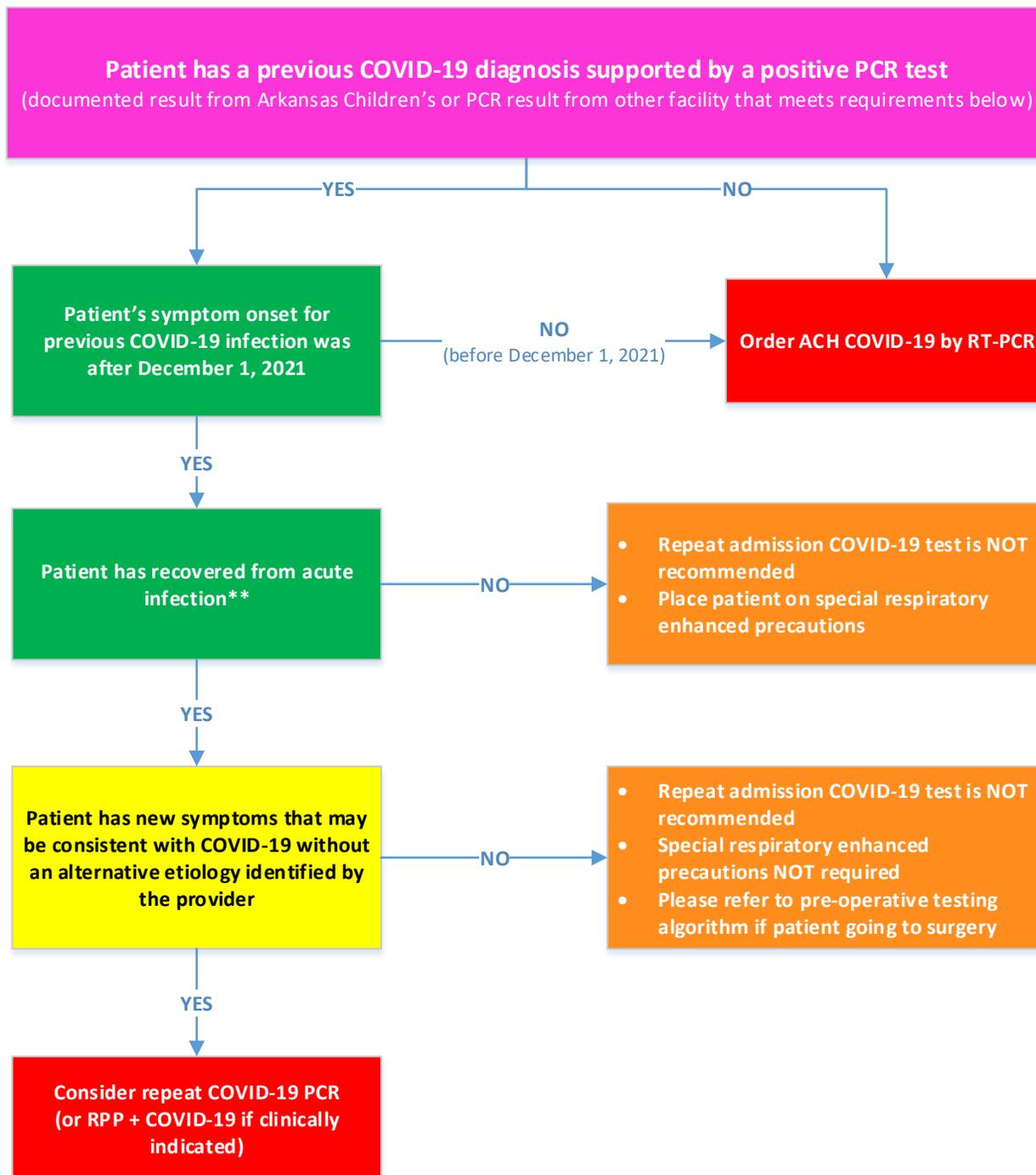


ACH COVID-19 Pre-Admission Testing Inpatient Areas

This pathway is intended as a guide for staff/providers and is not intended to replace clinical judgement.
Students refer to educational institution guidelines for caring for COVID positive patients

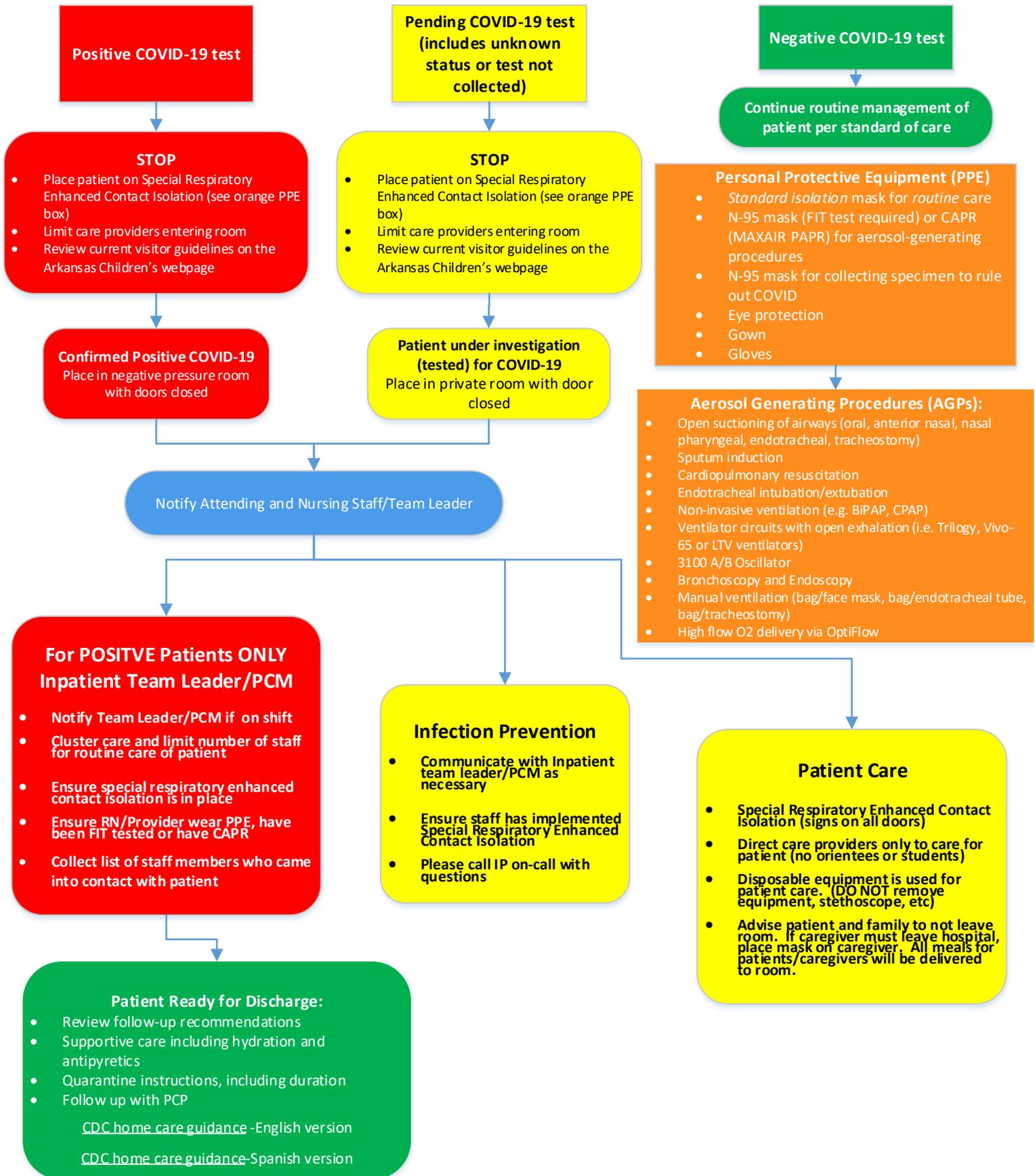


*If patient was asymptomatic at time of diagnosis, date of first positive PCR test should be used in place of the date for symptom onset

**Recovery = 10 days from symptom onset* for persons with mild infection or 20 days from symptom onset* for persons admitted with COVID-19 infection or immunocompromised persons AND resolution of fever for at least 24 hours (without antipyretic) AND improvement of symptoms

ACH COVID-19 Pathway Inpatient Areas

This pathway is intended as a guide for staff/providers and is not intended to replace clinical judgement. Students refer to educational institution guidelines for caring for COVID positive patients



Positive COVID-19 test

STOP

- Place patient on Special Respiratory Enhanced Contact Isolation (see orange PPE box)
- Limit care providers entering room
- Review current visitor guidelines on the Arkansas Children's webpage

Confirmed Positive COVID-19
Place in negative pressure room with doors closed

Pending COVID-19 test (includes unknown status or test not collected)

STOP

- Place patient on Special Respiratory Enhanced Contact Isolation (see orange PPE box)
- Limit care providers entering room
- Review current visitor guidelines on the Arkansas Children's webpage

Patient under investigation (tested) for COVID-19
Place in private room with door closed

Negative COVID-19 test

Continue routine management of patient per standard of care

Personal Protective Equipment (PPE)

- Standard isolation mask for routine care
- N-95 mask (FIT test required) or CAPR (MAXAIR PAPR) for aerosol-generating procedures
- N-95 mask for collecting specimen to rule out COVID
- Eye protection
- Gown
- Gloves

Aerosol Generating Procedures (AGPs):

- Open suctioning of airways (oral, anterior nasal, nasal pharyngeal, endotracheal, tracheostomy)
- Sputum induction
- Cardiopulmonary resuscitation
- Endotracheal intubation/extubation
- Non-invasive ventilation (e.g. BiPAP, CPAP)
- Ventilator circuits with open exhalation (i.e. Trilogy, Vivo-65 or LTV ventilators)
- 3100 A/B Oscillator
- Bronchoscopy and Endoscopy
- Manual ventilation (bag/face mask, bag/endotracheal tube, bag/tracheostomy)
- High flow O2 delivery via OptiFlow

Notify Attending and Nursing Staff/Team Leader

**For POSITIVE Patients ONLY
Inpatient Team Leader/PCM**

- Notify Team Leader/PCM if on shift
- Cluster care and limit number of staff for routine care of patient
- 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

Infection Prevention

- Communicate with Inpatient team leader/PCM as necessary
- Ensure staff has implemented Special Respiratory Enhanced Contact Isolation
- Please call IP on-call with questions

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.

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 -English version](#)
- [CDC home care guidance-Spanish version](#)

Addendum to Clinical Guidelines for Bed Placement

3/25/20 V.1.0

<p>COVID-19 (confirmed positive)</p>	<ul style="list-style-type: none"> • Place patient on Special Respiratory Enhanced Contact Isolation precautions • Place patient in an Airborne Infection Isolation Room (AIIR); if AIIR not available, place in negative pressure room or regular patient room with door closed
<p>R/O COVID-19 (formerly PUI)</p>	<ul style="list-style-type: none"> • Place patient on Special Respiratory Enhanced Contact Isolation precautions • Place patient in a regular private room with door closed

See [COVID Patient Placement/PICU Critical Care COVID Overflow](#) algorithm for appropriate room assignment