ACH COVID-19 Screening
Ambulatory Care

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

***No UAMS TRAINEES are to be involved in the care of a patient with acute respiratory symptoms unless they have completed COVID-19 training—See JEDI app*** Otherwise no trainees

![Diagram of the screening process]

**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


**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
- Place in private room with door closed if negative pressure room unavailable
- Notify Attending and COM
- Provider to ensure patient is stable for clinic visit
- Limit number of staff taking care of patient
- Place patient on Special Respiratory Enhanced Contact Isolation (see yellow PPE box)
- Obtain cell phone number to contact primary caregiver and for clinic point person (COM, TL, RN)

**GO TO CORONAVIRUS POSITIVE SCREEN PATHWAY FOR AMBULATORY CARE**

**YES = POSITIVE SCREEN**
**NO = NEGATIVE SCREEN**

**Proceed as normal**
Provide mask for patients with respiratory symptoms and place on respiratory contact precautions

**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.

**Suspected**
External to AC please call 1-800-743-3616 with questions
Internal to AC please call IP on-call with any questions that are outside the guidance provided here (does not fit the guideline)

**Questions? E-mail covid-19taskforce@archildrens.org**
ACR COVID-19 Positive Screen Pathway
Ambulatory Care

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**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
  - 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

**Testing Decision Making**

<table>
<thead>
<tr>
<th>Clinical Features</th>
<th>Risk Factors</th>
<th>Flu Testing</th>
<th>RPP Testing</th>
<th>COVID-19 Testing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asymptomatic</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Acute Respiratory</td>
<td>Travel</td>
<td>Clinician</td>
<td>No</td>
<td><strong>No</strong> if Flu (+)</td>
</tr>
<tr>
<td>Infection</td>
<td>OR</td>
<td>Judgement</td>
<td>YES if exposure to a known COVID-19 (+) contact/Person Under Investigation <strong>Send out to reference lab if not being admitted</strong></td>
<td></td>
</tr>
<tr>
<td>Acute Respiratory</td>
<td>Immunosuppressed or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infection</td>
<td>compromised</td>
<td>Follow above decision making</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*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.

**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 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; endotracheal suction.

**Provider Resources**
- Arkansas Department of Health: 2019 Novel Coronavirus
- Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for 2019 Novel Coronavirus

**Discharge**
- Review follow-up recommendations
- Supportive care including hydration and antipyretics
- Quarantine instructions, including duration
- Process for revisit
- Provide caregiver with AC RN triage line should questions arise: 1-800-743-3616
- CDC home care guidance

**Patient too ill for outpatient evaluation and treatment**
- Ensure proper isolation protocol is followed
- Transfer to nearest Emergency Department
- Arkansas Children’s Transfer: 1-800-ACH-HELP

Questions? E-mail: covid-19taskforce@archildrens.org
ACH COVID-19 Screening
Emergency Department

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**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

YES = POSITIVE SCREEN

NO = NEGATIVE SCREEN

**STOP**
- Place mask on patient, family, and escorting staff
- Patient stable: Triage RN will escort patient out the entrance of ED to the Decontamination Room. Negative pressure rooms on Zone 1 (rooms 8, 10, 12, 14, 15) can be used.
- Place patient on Special Respiratory Enhanced Contact Isolation (see yellow PPE box)

**Inform ED Team Leader, Attending**
- External to AC please call 1-800-743-3616 with questions
- Internal to AC please call IP on-call with any questions that are outside the guidance provided here (does not fit the guideline)

**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

**Proceed as normal**
Provide mask for patients with respiratory symptoms and place on respiratory contact precautions

**Proceed as normal**
Patient can be placed in any open room

**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)
- Same RN to triage patient, complete primary assessment, and complete necessary orders
- Advise patient and family to not leave room and provide TL/PCM phone number to call for questions
- Registration & Financial Counseling to be completed over phone
- Cluster care – minimize room entry

**ED Team Leader / ED PCM**
- Notify ED PCM 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 patients in triage waiting room when patient entered ED
- Collect list of staff members who came in contact with patient (ED, Security, EVS, Admissions, etc.)

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

Questions? E-mail covid-19taskforce@archildrens.org
**ACH COVID-19 Positive Screen Pathway**  
**Emergency Department**

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### 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
- Travel to area where COVID-19 is endemic


### Clinical Features

<table>
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<tr>
<th>Feature</th>
<th>Risk Factors</th>
<th>Flu Testing</th>
<th>RPP Testing</th>
<th>COVID-19 Testing</th>
</tr>
</thead>
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<tr>
<td>Asymptomatic</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Acute Respiratory Infection</td>
<td>Travel</td>
<td>None</td>
<td>None</td>
<td>NO if Flu/RPP (+) OR (-) and patient is well YES if (+) contact to a known COVID-19 contact/PUI²</td>
</tr>
<tr>
<td></td>
<td>Or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Close contact with someone (confirmed) with COVID-19</td>
<td>YES if not sending RPP; NO if sending RPP</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>Acute Respiratory Infection requiring hospitalization or critically ill</td>
<td>Travel</td>
<td>None</td>
<td>None</td>
<td>YES (To ADH with PUI form)</td>
</tr>
<tr>
<td></td>
<td>Or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Close contact with someone (confirmed) with COVID-19</td>
<td>NO</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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
- 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

### Discharge
- Review follow-up recommendations
- Supportive care including hydration and antipyretics
- Quarantine instructions, including duration
- Follow up with PCP
- Provide caregiver with AC RN triage line should questions arise: 1-800-743-3616
- CDC home care guidance

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

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***Otherwise no trainees

- **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 or must complete ADH PUI form and send with swab to lab)
  - Consider testing for flu and/or Respiratory Pathogen Panel (RPP) as clinically indicated

- **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 IP on-call 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

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**ACH COVID-19 Positive Screen Pathway**

**Inpatient Areas**

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**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
- Travel to area where COVID-19 is endemic


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

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

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

**POSITIVE**
- Disclose to family
- Move patient to negative pressure room
- Continue current management of patient per standard of care

**NEGATIVE**
- 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
- Provide caregiver with AC RN triage line should questions arise: 1-800-743-3616
- CDC home care guidance

**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.

**Negative Pressure Rooms:**
- 4C med: 3 rooms: 4C-04, 4C-05, 4C-06
- 4D Neuro: 2 rooms: 4D-05, 4D-06
- 3D: 3 rooms: 3D-03, 3D-04, 3D-05
- PICU: 2 rooms: Rm 23, Rm 26
- ED: rooms 1, 3, 8, 10, 12, 14, 15, Decon
- NICU: MP3, 4, and 5
- ACNW - 2 Inpatient rooms 17 and 20

**Nursing Supervisor will assign rooms**

Questions? E-mail covid-19taskforce@archildrens.org
ACH 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

AND

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?

POSITIVE SCREEN

NEGATIVE SCREEN

NO

YES

Intubate/extubate patient in Room 14
All aerosolizing procedures to be performed in Room 14
Place HEPA filter on vent
Limit personnel involved in care and all must wear eye protection and N-95 mask or PAPR

Move patient to another OR suite for procedure if NOT an aerosolizing procedure

Continue routine management of patient per standard of care

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