COVID -19 Protocol-March 13, 2020

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Ill your support in this time of rapid change and new procedures to deal with COVID-19. The CDC recommends testing be focused on patients with hig ndrome compatible with COVID-19. This will obviously change daily as the local epidemiologic risk changes as well as the availability of testing.

COVID-19—Remember that congestion and sore throat are less common symptoms. Focus on the cough, on and off fever, fatigue, and the shortness of umonia.

6) early on (43%) Myalgia or Arthralgia (14.8%)

67.7%) Sore Throat (13.9%) 1%) Headache (13.6%) duction (33.4%) Chills (11.4%)

Nasal Congestion (4.8%) Diarrhea (3.7%) Hemoptysis (0.9%)

Nausea or Vomiting (5.0%)

HIGHEST RISK: COUGH or DYSPNEA or other

OR suspected case in 14 days

f breath (18.6%)

ompatible symptoms PLUS: ON INCLUDING HEALTH CARE WITH A CONTACT of a lab con-

OR TRAVEL TO A GEOGRAPHICALLY REA in 14 days (Italy, Iran, China, South Korea)

ith face mask

it-follow FLOWCHART for MA in sment at car of Flu, oxygen s infection control: AIRBORNE/ N95 mask, eye shield, gown,

on and doff PPE

DOH Provider Line 1-800-456-7707

MODERATE RISK:

FEVER or COUGH or DYSPNEA or other compatible symptoms AND:

History TO A MODERATELY AFFECTED AREA in

14 days, or an evolving area OR CONCERN about exposure to a suspected person

Notify MA or PCP If PCP, after reviewing the risk for exposure, determines COVID-19 testing is appropriate:

Testing:

- Patient with face mask COVID visit-follow FLOWCHART for MA in
- PPE assessment at car of Flu, oxygen PPE: surgical mask, eye protection, gloves and gown
- If supplies run short we will evaluate
- based on the CDC recommendations below. Call LITAH DOH Provider Line 1-800-456-7707
 - **PUI Forms**

saturation

LOW RISK: Symptoms not strongly compa

AND No direct contact exposure to per travel

Conjunctival Congestion (0.8%)

Testing:

Patient with face mask-WAIT in waiting room

clinical scenario

- MD evaluation for alternate diag
- Follow infection control as need