Clinic 'COVID hotline' team for questioning and then, where necessary, be directed to follow the car-based testing protocol.

Patients who walk in for a pre-scheduled appointment will also encounter the entry sign. If no self-assessed symptoms, they will proceed to their appointment. If self-

Patients who walk in for Urgent Care will encounter an entry sign where they self-assess symptoms and, where appropriate, return to their cars to call the designated Tanner

assessed symptoms, they, too, will return to their car to place the hotline call. If cleared, they will return for their scheduled appointment. If not cleared, they will be scheduled

- for car-based testing with their PCP.
   For any clinic location where it is possible, waiting rooms should be divided and clearly marked for "sick visit" and "well visit" patients. Increased and visible sanitizing by staff of patient touch-points is important.
- marked for "sick visit" and "well visit" patients. Increased and visible sanitizing by staff of patient touch-points is important.

  As you can see on the attached flow chart, a patient who is negative for flu and low oxygen will be sent to the hospital for further testing. The "further testing" which we can't currently do is

the respiratory panel needed to warrant actual COVID-19 testing by the health department or authorized labs such as LabCorp and Quest. If/when that changes, we may be able to refer

patients directly for COVID-19 testing.