Clinical Response Guidelines for COVID-19 in an outpatient setting (primary care clinics, private medical offices, urgent and primary care centres, and Northern Health clinics)

For patient presentation to Emergency Department, use the ED ALGORITHM

SCREENING at RECEPTION

Screening Criteria for All Patients:

Patients with compatible symptoms (e.g. fever, cough, difficulty breathing)

And

Travel within 14 days of symptom onset to an affected area.

Or

Close contact with a confirmed or probable case of COVID-19 or other index of suspicion (e.g. contact with an ill person with such travel history)

Positive Screen

Negative Screen

- Screening staff/clinician to don gloves, surgical mask and eye protection (goggles/face shield)
- 2. Have patient don a surgical mask and use hand sanitizer
- 3. Immediately inform patient of requirements for contact and droplet (isolation) precautions

Low risk of COVID-19: Continue routine assessment & universal precautions

- Screening staff/clinician escorts patient to designated assessment room (no shared room if possible or arrange a phone call or transfer)^a
- 2. Place patient on Contact/Droplet precautions (post signage on door)
- 3. Test for COVID-19
- 4. All equipment brought into patient room must remain in room until cleaneda
- 5. Use N95 mask for all aerosol-generating procedures (see additional precautions)

Discharge Patient Home with Instructions

- Ensure patient receives
 Handout 'Information
 About Novel Coronavirus
 for Patients Tested and/or
 Cared For In Community' d
- 2. Upon discharge home, escort patient through alternate route where available; not through the waiting area, if possible.

Patient Requires
Higher Level of Care

- Contact the Emergency Department to provide prenotification of suspected or known COVID-19 patient's arrival
- Inform patient to present to the Emergency Department Triage Desk and **not** the waiting room
- 3. If urgent care required call '911' to arrange transport to Emergency Department: State "Suspected COVID-19 (Coronavirus)"

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SCREENING & ASSESSMENT

- Display posters at entrances with instructions for patients with respiratory symptoms to identify themselves immediately to staff/reception ('Facility Entry Reception Poster' on OurNH)
- Screen ALL patients presenting to outpatient setting (primary care settings) for COVID-19 using screening criteria
- Wherever possible have **Designated Route of Movement** for positive screened patient to designated
 assessment area (i.e. reception to assessment room, assessment room to outside; ensure movement route
 is clear of people and equipment prior to moving patient
- d Ensure Handout given to patient 'Information About Novel Coronavirus (COVID-19) for Patients Being Tested and/or Cared For In Community' – available on OurNH under 'Novel Coronavirus'

ISOLATION

- Immediately upon positive screening and where possible, place patient in Designated Assessment Area (see below for specifics)^a GOAL: Rapid Isolation of Patient To Reduce Risk of Transmission
 - o 2 meters separation between patients
 - o Minimize patient movement; and traffic/visitors into patient room

DESIGNATED ASSESSMENT AREA ^a

- For Designated Assessment Room:
 - o Single-bed, closed room with dedicated washroom, if possible; closed door to hallway
 - If no single-room option, apply a 2-metre separation between beds with privacy curtains closed; do not share items between patients
 - o If possible use room with 100% cleanable surfaces only (i.e. no carpet, etc.)
 - o Remove all non-essential equipment and furniture from rooms to minimize contamination
 - o Stethoscopes and other frequently used equipment to be left in designated room
 - o Chart, pens and wireless phones must stay in room until disinfected
 - o Any equipment removed from room must be disinfected using a hospital-approved disinfectant
 - o Room to be immediately cleaned upon patient discharge

TESTING AND LABORATORY 6

- Collect either a Nasopharyngeal or Throat swab (Nasopharyngeal preferred sample collection):
 - o Add "COVID-19" to ALL Lab Requisitions (alerts Lab staff to use additional PPE when handling samples)
- For clinic staff performing Point of Care Testing (i.e. urinalysis and/or blood glucose), ensure gloves, masks, and eye protection (goggles/face shield) donned

ADDITIONAL PRECAUTIONS

- Universal precautions including scrupulous hand washing before and after patient contact putting on and taking off mask, etc.
- Have alcohol-based hand rubs (60-90% alcohol) readily available at clinic reception, waiting room, and in assessment areas
- Increase frequency of cleaning of high-touch areas with routine cleaning products (i.e. reception area, assessment rooms, etc.)
 - Additional precautions including N95 mask with eye protection must be worn during aerosol-generating procedures (i.e. open suctioning of respiratory tract, intubation, bronchoscopy, CPR):
 - Avoid BIPAP (Bi-level Positive Airway Pressure) therapy
 - Administer O₂ without humidification

RESOURCES

- For questions, contact Communicable Disease Team: 1-855-565-2990 or <u>CentralCDHUB@northernhealth.ca</u> from 8:30 am to 4:30 pm Monday to Friday. After hours, NH MHO on-call 250-565-2000, press 7 for Switchboard
- If suspected Health Care Worker exposure, call Provincial Workplace Centre at 1-866-922-9464
- Contact your Infection Control Professional as needed

Resources available on OurNH under 'Novel Coronavirus'

Please contact Northern Health Communications Advisor, Bailee Denicola at Bailee.Denicola@northernhealth.ca if you require signage, patient information handouts, or other resources found on OurNH.

