

Guidelines for Universal Inpatient Screening for COVID-19

Yes Test

- Inpatients not meeting PUI criteria
 - Inpatients going to a COVID naïve Skilled Nursing Facility
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- Do NOT use PUI/COVID-19 Diagnosis
 - Patient NOT to be placed on isolation unit/precautions

Screening upon admission will help...

- Prevents asymptomatic transmission and inadvertent exposure to Healthcare Workers and improves overall inpatient safety
 - Quickly identifies small number of patients that screen positive during hospital stay
 - Prevents delays in procedures and surgeries
 - Allows timely discharges and transfers (e.g., Skilled Nursing Facility, Long Term Care, Mercy ship)
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- These patients should **not** be identified as PUI and do **not** require isolation precautions.
 - COVID-related PPE usage is **not** indicated for these patients.

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Guidelines for Routine COVID-19 Testing Based on Patient Categories

No Test

Consider Test

Yes Test

Category 1

Category 2

Category 3

Category 4

Category 5

Category 6

All people who are asymptomatic, **including** known or possible exposures and/or recent travel

Symptoms of fever, cough, and/or shortness of breath; **not** requiring hospitalization

Symptoms of fever, cough, and/or shortness of breath; NOT requiring hospitalization, in high risk patients*, and asymptomatic patients requiring urgent airway or intestinal surgery

Symptoms of fever, cough, and/or shortness of breath with no other diagnosis in: all healthcare workers, first responders, SNF/LTC residents, dialysis patients

Patients requiring hospitalization including: symptomatic with fever, cough, and/or shortness of breath; asymptomatic L&D; other inpatients being considered for transfer

Inpatients not meeting PUI criteria; including inpatients going to a COVID naïve SNF

Do NOT use PUI/COVID-19 diagnoses; Do NOT place the patient on isolation unit or precautions

Sputum or Swab

Swab

*Adults >65, immunocompromised, cancer, transplant, advanced HIV, chronic lung and/or heart disease, diabetes with A1C >8.0, pregnancy, morbid obesity, and homeless ; travel or close contact with confirmed COVID-19 patient within the last 14 days

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Guidelines for COVID-19 Testing with Abbott SARS-CoV-2 Rapid Assay

(As this is a limited resource, the guidance below is provided to define prioritization. Local reprioritization may occur in times of Surge.)

Clinical Prioritization Criteria

Priority 1

Pregnant women coming into L&D for admission with expected delivery within 24 hours

Priority 2

ICU/SDU admissions of low and/or moderate suspicion COVID PUIs

Priority 3

Patients requiring emergency (within 24hrs) Airway and/or Intestinal surgery

Ordering Instructions / Operations:

- Tests will be shipped to the Regional Reference Lab and distributed to Local Command Centers according to medical center scale; will monitor supply/demand on a regular basis and shift allocations accordingly
- Any provider can place an order for this test in KPHC; clinical prioritization criteria will be provided in the order set as guidance to the provider (no click req'd)
- Approval process will be accomplished by order review at the point of kit pick-up from the Local Command Center
- If test was not ordered appropriately, ordering provider will be directed to place an alternative COVID-19 testing order
- Each local command center will monitor orders, noting the ordering provider and clinical indication
- A small batch of tests will also be kept on reserve at the Regional Lab for emergencies and will be distributed (via A-Line) upon request by the Local Command Center

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