Screening Patients for Suspected 2019 Novel Coronavirus (COVID-19) in Outpatient Healthcare Settings

The Philadelphia Department of Public Health (PDPH) is issuing this clinical screening algorithm to help guide ambulatory care sites in properly assessing patients and protecting their staff while assessing patients for possible 2019 Novel Coronavirus infection (COVID-19). This guidance is not intended for use by non-healthcare sites. Patients who are thought to be at risk of COVID-19 infection should be identified by screening at the earliest practical point in patient flow. This might be at reception or triage. In preparing to implement this protocol, please inventory all Personal Protective Equipment (PPE) and specimen collection supplies and order materials as needed.

- Screening consists of asking patients for the presence of symptoms PLUS travel from a region affected by COVID-19 or close contact with a confirmed or suspect COVID-19 case within 14 days of illness onset.
  - Symptoms include fever >100.4°F and/or signs and symptoms of lower respiratory illness (e.g. cough or shortness of breath).
  - Close contact with a laboratory-confirmed or suspect COVID-19 case
  - History of travel from a region affected by COVID-19. Travel history or contact with a confirmed COVID-19 case is only relevant if it occurred within 14 days of symptom onset.

- It is important to remember that these are screening criteria, useful in identifying persons who require additional evaluation. These are not diagnostic criteria for COVID-19. Patients with symptoms of lower respiratory illness and a pertinent travel history might have any number of other conditions, including influenza, or other respiratory viral infections.

- If a patient is suspected of having COVID-19 based on clinical symptoms and epidemiological history, they should be promptly given a surgical mask and escorted to a private examination room. If available, patients with suspected COVID-19 should be placed in a negative pressure or Airborne Infection Isolation Room (AIIR).

- The clinician should don appropriate PPE and use dedicated medical equipment for patient care activities.
  - PPE includes gloves, disposable gowns, NIOSH certified N-95 respirator and eye protection.
• If clinical and travel history and COVID-19 virus exposure evaluation indicate possible COVID-19, report the patient to the Philadelphia Department of Public Health (PDPH) at 215-685-6748 or 215-686-4514 (after hours) for determination of Persons Under Investigation (PUI) status. You may also be asked to provide names of persons known to be in close contact with the suspected COVID-19 case, including household contacts, attendants, and clinic staff, so that appropriate follow-up can be implemented.

• For patients who fulfill PUI criteria, collect a nasopharyngeal and oropharyngeal swab and place in viral transport medium. Please contact PDPH if you do not have viral transport media available. If the patient has a productive cough, sputum should also be collected in a sterile specimen container. All samples should be promptly refrigerated. Please collect an additional nasopharyngeal swab for seasonal respiratory virus testing. Please ensure that clinicians performing specimen collection have the appropriate PPE.

• If your facility is not able to provide appropriate PPE (i.e. N95 masks) for clinic staff caring for the patient or ensure a private room, the patient should be referred to another facility for evaluation, or may be discharged home with follow-up from PDPH. A decision to discharge home should be done in consultation with PDPH so that appropriate follow-up and isolation recommendations can be implemented.

• PDPH will assist with specimen processing for shipment to the state public health laboratory for testing. COVID-19 testing is now also available through commercial laboratories (Labcorp and Quest). Tests can be ordered directly through both commercial laboratories, however, specimens need to be collected at a provider's office. Commercial respiratory virus assays including Biofire are NOT able to detect COVID-19.

• Follow routine cleaning and disinfection procedures with EPA-approved hospital grade disinfectant, ideally with a product labeled for emerging viral pathogens. If such products are not available, a product with claims against human coronaviruses should be used.

Resources: