

COVID-19+ Patient or PUI Identified at Building Entrance

1. COVID-19+ patient or Person Under Investigation (PUI) will be provided with a surgical mask to place over their nose and mouth. Hand sanitizer should also be provided.
2. Patient will be asked to wait at the building entrance/lobby, with at least 6 feet distance from other patients and visitors, while the patient's clinical destination is contacted.
3. Screening staff will TigerText/Call the patient's clinical destination to alert them of patient arrival and positive screen.
4. The designated staff member* (DS) at the patient's clinical destination will be alerted, and will notify the provider scheduled to see the patient.

Has the provider pre-approved** COVID+ or PUI in-person visit?

Yes

No

1. The DS will notify the provider scheduled to see the patient and provide screening information.
2. The provider should contact the patient at the building entrance or waiting area via phone to assess medical necessity of in-person visit.
3. The provider will decide if scheduled in-person visit should proceed with safety precautions, patient should be sent for COVID-19 testing, or patient should be rescheduled for future in-person or telehealth visit based on medical necessity and the patient's immediate clinical needs.
4. The provider should notify the DS of the plan of care for the patient.

Yes

Has the provider decided to proceed with in-person visit?

No

1. The DS should don a N95 mask and face shield, and proceed to the building entrance to meet the patient and escort them to the clinical location.
2. The DS should escort the patient to the elevator if the visit will not be completed on the main floor. No other patients or staff should be present in the elevator car. The DS should operate the elevator and use the express option if available.
3. The DS should escort the patient directly to the exam room upon arrival to the correct floor. Low traffic routes (e.g. clinic back entrance, clear hallways) should be utilized if available. Once the patient is roomed, the door should be closed.
4. The provider and other clinical staff should don full PPE prior to, and doff full PPE after completing, the visit. Another staff member on the unit should witness the PPE donning and doffing process.
5. At the completion of the visit, the DS, with a N95 mask and face shield in place, should be notified to return and escort the patient to the building exit. Low traffic routes (e.g. clinic back entrance, clear hallways) should be utilized if available.
6. The DS should operate the elevator during the patient's exit, and no other patients or staff should be present in the elevator car.
7. The DS should contact housekeeping staff to complete a terminal clean on the exam room that was utilized for the patient visit.

1. The provider should refer the patient for COVID-19 testing or reschedule the patient for a future in-person or telehealth visit.

2. The provider should speak with the patient via phone, while the patient is at the building entrance, to address their concerns, discuss next steps, and communicate clearly that the provider is still caring for the patient and will ensure follow up. This phone encounter should be documented in the patient's medical record.

*Designated staff member (DS) may be the floor captain, clinical/nurse manager, or other identified staff member.

**Once a provider has decided to schedule an in-person visit with a COVID-19 positive patient or PUI, the clinic designated staff member (DS) should be notified of the pre-approved visit. "COVID Protocol" may be placed in the schedule comments section in Allscripts.