2019-nCoV PROTOCOL

**REFERRAL (Phone)**
Screen as part of medical clearance

**PATIENT PRESENTS TO ADMITTING**
Screen in Sally Port or enclosed area

**INPATIENT**
If Fever develops

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**2019-nCoV SCREENING CRITERIA**

**FEVER, OR COUGH or SHORTNESS OF BREATH**
AND
Has had close contact with a confirmed COVID-19 patient within 14 days of symptom onset?
Close Contact = being within 6 feet for a prolonged period of time OR having direct contact with infectious secretions of a COVID-19 case (i.e. being coughed up)

**FEVER; AND COUGH or SHORTNESS OF BREATH**
AND
Has traveled to one of the following international areas in the last 14 days?
CHINA, IRAN, ITALY, JAPAN, SOUTH KOREA

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**IF ABOVE ARE TRUE = MEETS CRITERIA FOR REPORTING A PERSON UNDER INVESTIGATION (PUI)**

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**DO NOT PERFORM PSYCH EVALUATION**
Place facemask on patient (if not compliant; provide face masks for transporter and HCP)
Wear appropriate PPE

- **If transported from Emergency Department:**
  Non-Admit with instruction to return to Emergency Department

- **NOT Transported from Emergency Department:**
  Non-Admit with instruction to transport to Emergency Department (contact ED with clinical information)

**Isolate patient**
Follow standard infection control protocols
Contact Health Department for further instruction.
(Activated Negative Pressure Room or Private room with HEPA filtration may be used; but only necessary if person tests positive or by directive of Health Department)

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Contact Health Department to report at-risk patients and their clinical status.

In consultation with clinicians, DOH will:
Determine if patient is a PUI for COVID-2019
Assess need to collect specimens to test for 2019-CoV
Determine disposition

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**SIGNATURE**
Marie Williams, Commissioner

**DATE**
3.11.20

03.06.20 GY