DEFINITION

- Exposed (close contact) to a person who is diagnosed (confirmed by testing) or suspected (PUI) to have COVID-19 (Coronavirus Disease 2019).
- Traveled from another country (international travel).
- Traveled back from another city or state where there is major community spread of COVID-19.

Note to Triager:

- The best COVID-19 guideline choice depends on public health department recommendations (PHD) and testing availability in the patient's community.
- If PHD recommends testing on all suspected COVID-19 patients and testing is readily available, use Coronavirus (COVID-19) Exposure guideline.
- If PHD does not recommend testing on all suspected COVID-19 patients and/or if testing is not readily available, use Coronavirus (COVID-19) Diagnosed or Suspected.

This guideline was last updated 3/28/2020.

COVID-19 EXPOSURE (Close Contact) is defined as:

- Living in the same house with a confirmed or suspected COVID-19 case
- Being within 6 feet (2 meters) of a confirmed or suspected COVID-19 case for a prolonged period of time (CDC). Examples of such close contact include kissing or hugging, sharing eating or drinking utensils, carpooling, close conversation, or performing a physical examination (relevant to healthcare providers). A prolonged close conversation is probably at least 10 minutes.
- OR having direct contact with infectious secretions of a confirmed COVID-19 case (e.g., being coughed on)

The following are not Close Contact exposures:

- Living in a city or town where there are one or more confirmed cases of COVID-19. Exception: it is one of the high transmission geographic areas listed by the CDC at https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html.
- Walking by a person who has COVID-19.

A Person Under Investigation (PUI) is a person with symptoms who is suspected as having COVID-19 by a healthcare provider.

- These are people who have common symptoms of COVID-19 and should be tested, if testing is available.

Note: The term coronavirus used throughout this guideline only refers to the novel or new coronavirus disease (COVID-19). It does not refer to the common coronavirus that causes the common cold.

TRIAGE ASSESSMENT QUESTIONS

Office Hours Telephone Triage Protocols | Adult | 2020

Coronavirus (COVID-19) - Exposure
Call EMS 911 Now

- **SEVERE** difficulty breathing (e.g., struggling for each breath, speak in single words, bluish lips)
  
  R/O: respiratory failure, hypoxia

- Sounds like a life-threatening emergency to the triager

**See More Appropriate Protocol**

1. Adult has symptoms of COVID-19 (fever, cough, or SOB) AND [2] lab test positive
   
   Go to Guideline: Coronavirus (COVID-19) - Diagnosed or Suspected (Adult)

   
   Go to Guideline: Coronavirus (COVID-19) - Diagnosed or Suspected (Adult)

   
   Go to Protocol: Breathing Difficulty (Adult)

   
   Go to Protocol: Cough (Adult)

   
   Go to Protocol: Common Cold (Adult)

Go to ED Now

1. Difficulty breathing occurs AND [2] within 14 days of COVID-19 EXPOSURE (Close Contact)
   
   R/O: Coronavirus pneumonia. Reason: Meets PUI criteria (persons under investigation). Note: triager should call ahead to the ED.

2. Patient sounds very sick or weak to the triager
   
   Reason: severe acute illness or serious complication suspected. Note: triager should call ahead to the ED.

**Discuss with PCP and Callback by Nurse within 1 Hour**

1. Fever (or feeling feverish) OR cough AND [2] within 14 Days of COVID-19 EXPOSURE (Close Contact)
   
   R/O: Coronavirus infection. Note: HCP will decide if testing is indicated and where to go. Meets PUI criteria. Note: Typically, the fever is greater than 100.4 F (38.0 C). However, people who are elderly or have a weak immune system may not have a significant fever.

2. Fever (or feeling feverish) OR cough occurs AND [2] within 14 days of travel from another country (international travel)
   
   R/O: Coronavirus infection. Note: HCP will decide if testing is indicated and where to go.

3. Fever (or feeling feverish) OR cough occurs AND [2] within 14 days of travel from a city or area with major community spread
   
   R/O: Coronavirus infection. Note: HCP will decide if testing is indicated and where to go.

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Coronavirus (COVID-19) - Exposure


Discuss with PCP and Callback by Nurse Today
R/O: viral syndrome. Note: patient has no cough, fever, or shortness of breath. It is less likely that this is COVID-19. Note: Referral to telemedicine is an appropriate alternative disposition.

[1] COVID-19 EXPOSURE within last 14 days AND [2] NO cough, fever, or breathing difficulty AND [3] exposed person is a healthcare worker who was NOT using all recommended personal protective equipment (i.e., a respirator-N95 mask, eye protection, gloves, and gown)
Reason: Exposed person should consult with occupational health and determine if they can return to work. Note: Referral to telemedicine is an appropriate alternative disposition.

Home Care
Reason: Follow local or state PHD guidance about staying at home, monitoring symptoms, etc.

Reason: Asymptomatic for 14 days. Risk of developing COVID-19 infection has passed. Reassure and discontinue isolation.

[1] No COVID-19 EXPOSURE BUT [2] living with someone who was exposed and who has no fever or cough
Reason: no exposure, no symptoms.

[1] Living in area with major community spread within last 14 days AND [2] NO cough or fever or breathing difficulty
Reason: Follow local or state PHD guidance about staying at home, monitoring symptoms, etc.

[1] Travel from city or country with major community spread within last 14 days AND [2] NO cough or fever or breathing difficulty
Reason: Follow local or state PHD guidance about staying at home, monitoring symptoms, etc.

Reason: unrealistic fear of exposure and needs reassurance

COVID-19, questions about
Reason: no exposure, no symptoms

COVID-19 Testing, questions about
Reason: no exposure, no symptoms

Moved up [6]: Discuss with PCP and Callback by Nurse Today
Moved up [13]: [1] No COVID-19 EXPOSURE BUT [2] living with someone who was exposed and who has no fever or cough
Moved up: [12] Symptoms appear
Moved up [11]: [12] No COVID-19 EXPOSURE, but has testing who needs it
Moved [10]: [2] expose to coronavirus
Moved: [9] more than
Moved: [8] after exposure to coronavirus
Moved: [7] Covid-19, questions about
Moved: [6]bourne, no symptoms
Moved: [5] S symptoms appear
Moved: [4] COVID-19, questions about
Moved: [2] COVID-19, questions about
Moved: [1] COVID-19, questions about
Moved: 2
Moved: [1] Travel from or living in high risk area (identified by CDC) AND [2] within last 14 days AND [3] NO cough or fever or breathing difficulty
Reason: Patient is asymptomatic and has no known definite exposure; however, patient could still develop symptoms and their workplace may prefer patient to stay/work at home. Note: See CDC list of affected geographic areas of transmission at https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html. Note: Referral to telemedicine is an appropriate alternative disposition.

Deletion moved up [6]: [1] No COVID-19 EXPOSURE BUT [2] living with someone who was exposed and who has no fever or cough

Deletion moved up: [1] Travel from or living in high risk area (identified by CDC) AND [2] within last 14 days AND [3] NO cough or fever or breathing difficulty
Reason: Patient is asymptomatic and has no known definite exposure; however, patient could still develop symptoms and their workplace may prefer patient to stay/work at home. Note: See CDC list of affected geographic areas of transmission at https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html. Note: Referral to telemedicine is an appropriate alternative disposition.

Moved: 2
Moved: more than
Moved: Symptoms appear
Moved: after exposure to coronavirus
Moved: Covid-19, questions about
Moved: no exposure, no symptoms
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COVID-19 Prevention and Healthy Living: questions about note: how to protect you and your family; how to reduce anxiety and stress.

CARE ADVICE COVID-19

1. Our knowledge of COVID-19 is expanding...

2. An outbreak of this infection began in Wuhan, Hubei Province, China in December 2019.

3. The first patient in the United... [1]

4. Four patients were confirmed in... [2]

5. The World Health Organization... [3]

6. The Centers for Disease Control... [4]

7. The Centers for Disease... [5]

8. Currently the CDC recommends... [6]

9. The CDC does not currently... [7]

10. There is no vaccine or... [8]

11. FAQ - Should I wear a face mask... [9]

12. The CDC does not currently... [10]

13. Avoid close contact with people... [11]

14. Wash hands often with soap and... [12]

15. Avoid touching the eyes, nose or... [13]

16. Do not share eating utensils (e.g.,... [14]

17. COVID-19 - How to Protect... [15]

18. Avoid close contact with people... [16]

19. This is how most respiratory viruses... [17]

20. It is possible that a person can get... [18]

21. However, this is not the main way COVID... [19]

22. CDC Travel FAQs:... [20]

23. CDC Travel Health Website:... [21]

24. CDC Travel:... [22]

25. COVID-19 - Travel:... [23]

26. The Centers for Disease... [24]

27. The World Health Organization... [25]

28. Four patients were confirmed in... [26]

29. The first patient in the United... [27]

30. Avoid touching the eyes, nose or... [28]

31. Do not share eating utensils... [29]

32. COVID-19 - How to Protect... [30]

33. Avoid close contact with people... [31]

34. Wash hands often with soap and... [32]

35. Avoid touching the eyes, nose or... [33]

36. Do not share eating utensils... [34]

37. COVID-19 - How to Protect... [35]

38. Avoid close contact with people... [36]

39. Wash hands often with soap and... [37]

40. Avoid touching the eyes, nose or... [38]

41. Do not share eating utensils... [39]

42. COVID-19 - How to Protect... [40]

43. Avoid close contact with people... [41]

44. Wash hands often with soap and... [42]

45. Avoid touching the eyes, nose or... [43]

46. Do not share eating utensils... [44]

47. COVID-19 - How it is Spread:... [45]

48. The virus likely spreads through... [46]

49. Other less common symptoms... [47]

50. The first patient in the United... [48]

51. Four patients were confirmed in... [49]

52. The World Health Organization... [50]

53. The Centers for Disease Control... [51]

54. The first patient in the United... [52]

55. Four patients were confirmed in... [53]

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97. The Centers for Disease Control... [95]

98. The first patient in the United... [96]

99. Four patients were confirmed in... [97]

100. The World Health Organization... [98]

101. The Centers for Disease Control... [99]

102. The first patient in the United... [100]

103. Four patients were confirmed in... [101]
Exposure (close contact - international travel - et.al.) with Cough or Fever or SOB

1. Note to Triager - COVID-19 Testing is Recommended:
   - Indications: Testing is generally indicated for a person who has a cough, fever, or shortness of breath and any possible exposure to COVID-19. A healthcare provider needs to order the test.
   - What is the test? The test is a nose or throat swab.
   - Where can a person get tested? COVID-19 testing is becoming more available from local and state public health departments. Commercial labs now can perform COVID-19 testing. However, it may still be difficult to find a place to get tested. Use your judgment and knowledge of current public health department recommendations. Remember, there is no treatment for COVID-19. Test results only help with decision-making and preventing spread.
   - Who should get prioritized for testing? Healthcare workers and first responders have top priority. Hospitalized patients have top priority. Lowest priority are healthy people under 65 years old who have mild symptoms.
   - What about a standing order? As testing becomes more widely available, call centers should talk with their medical leadership about triagers being able to use a standing order for testing.

2. Alternate Disposition - Call Telemedicine Provider:
   - Telemedicine may be your best choice for care during this COVID-19 outbreak.
   - You should call a telemedicine provider if your own healthcare provider is not available.

3. Testing or In-Person Visits - Patient or Triager Should Phone Ahead:
   - Wherever you go for care, it is important to phone ahead first.
   - Tell them that you may have been exposed to coronavirus and you are now having symptoms (e.g., fever, cough).
   - You Must do this so that the healthcare workers can make plans to prevent spread of coronavirus to others.

4. Testing or In-Person Visits - Patient Must Tell Healthcare Personnel:
   - Tell the first healthcare worker you meet that you may have been exposed to COVID-19.
   - Tell them you have symptoms and have been sent for COVID-19 testing.

5. Home Isolation Is Needed:
   - Stay at home. Home isolation is needed to prevent the spread of infection to others.
   - Do Not allow any visitors

Office Hours Telephone Triage Protocols | Adult | 2020

Coronavirus (COVID-19) - Exposure
• Do Not go to work or school
• Do Not go to church, child care centers, shopping, restaurants, or other public places.
• Do Not shake hands.
• Avoid close contact with others (hugging, kissing).
• Avoid public transportation or ride sharing.

6. Cover Your Mouth and Nose, Wear a Mask:
   • Cover your mouth and nose with a disposable tissue (e.g., Kleenex, toilet paper, paper towel) or washcloth.
   • Ask for a mask to wear over your mouth and nose.

7. Wash Your Hands with Soap and Water:
   • Wash your hands and face frequently with soap and water.
   • This is especially important after coughing or sneezing.

8. Note to Triager - Ibuprofen Concerns:
   • Discuss only if caller brings up concerns about ibuprofen.
   • Response: The CDC, WHO, and other experts continue to support the use of ibuprofen (if needed) for patients with COVID-19. They found no scientific evidence to support the claim that ibuprofen made COVID-19 worse.

9. For All Fevers:
   • Drink cold fluids to prevent dehydration.
   • Dress in 1 layer of lightweight clothing and sleep with 1 light blanket.
   • For fevers less than 101°F (38.3°C), fever medicines are usually not needed.

10. Fever Medicines:
    • For fevers above 101°F (38.3°C) take either acetaminophen or ibuprofen.
    • They are over-the-counter (OTC) drugs that help treat both fever and pain. You can buy them at the drugstore.
    • The goal of fever therapy is to bring the fever down to a comfortable level. Remember that fever medicine usually lowers fever 2 degrees F (1 - 1 1/2 degrees C).
    • Acetaminophen (e.g., Tylenol):
        • Regular Strength Tylenol: Take 650 mg (two 325 mg pills) by mouth every 4-6 hours as needed. Each Regular Strength Tylenol pill has 325 mg of acetaminophen.
        • Extra Strength Tylenol: Take 1,000 mg (two 500 mg pills) every 8 hours as needed. Each Extra Strength Tylenol pill has 500 mg of acetaminophen.
        • The most you should take each day is 3,000 mg (10 Regular Strength or 6 Extra Strength pills a day).
    • Ibuprofen (e.g., Motrin, Advil):
        • Take 400 mg (two 200 mg pills) by mouth every 6 hours.
        • The most you should take each day is 1,200 mg (six 200 mg pills), unless your doctor has told you to take more.

11. Fever Medicines - Extra Notes:
    • Use the lowest amount of medicine that makes your fever better.
    • Acetaminophen is thought to be safer than ibuprofen or naproxen in people over 65 years old. Acetaminophen is in many OTC and prescription medicines. It might be in more than one medicine that you are taking. You need to be careful and not take an overdose. An acetaminophen overdose can hurt the liver.
    • McNeil, the company that makes Tylenol, has different dosage instructions for Tylenol in Canada and the United States. In Canada, the maximum recommended dose per day is 4,000 mg or twelve Regular-Strength (325 mg) pills. In the United States, McNeil recommends a maximum dose of ten Regular-Strength (325 mg) pills.
• **Caution:** Do not take acetaminophen if you have liver disease.
• **Caution:** Do not take ibuprofen if you have stomach problems, kidney disease, are pregnant, or have been told by your doctor to avoid this type of anti-inflammatory drug. Do not take ibuprofen for more than 7 days without consulting your doctor.
• **Before taking any medicine, read all the instructions on the package.**

12. **Cough Medicines:**
• **OTC Cough Syrups:** The most common cough suppressant in OTC cough medications is dextromethorphan. Often the letters “DM” appear in the name.
• **OTC Cough Drops:** Cough drops can help a lot, especially for mild coughs. They reduce coughing by soothing your irritated throat and removing that tickle sensation in the back of the throat. Cough drops also have the advantage of portability - you can carry them with you.
• **Home Remedy - Hard Candy:** Hard candy works just as well as medicine-flavored OTC cough drops. People who have diabetes should use sugar-free candy.
• **Home Remedy - Honey:** This old home remedy has been shown to help decrease coughing at night. The adult dosage is 2 teaspoons (10 ml) at bedtime. Honey should not be given to infants under one year of age.

13. **Caution - Dextromethorphan:**
• Do not try to completely suppress coughs that produce mucus and phlegm. Remember that coughing is helpful in bringing up mucus from the lungs and preventing pneumonia.
• **Research Notes:** Dextromethorphan in some research studies has been shown to reduce the frequency and severity of cough in adults (18 years or older) without significant adverse effects. However, other studies suggest that dextromethorphan is no better than placebo at reducing a cough.
• **Drug Abuse Potential:** It should be noted that dextromethorphan has become a drug of abuse. This problem is seen most often in adolescents. Overdose symptoms can range from giggling and euphoria to hallucinations and coma.
• **CONTRAINDICATED:** Do not take dextromethorphan if you are taking a monoamine oxidase (MAO) inhibitor now or in the past 2 weeks. Examples of MAO inhibitors include isocarboxazid (Marplan), phenelzine (Nardil), selegiline (Eldepryl, Emsam, Zelapar), and tranylcypromine (Parnate). Do not take dextromethorphan if you are taking venlafaxine (Effexor).

14. **Call Back If:**
• Breathing difficulty develops
• You become worse.

**COVID-19 Exposure with Other Symptoms (such as muscle aches / headache / sore throat)**

1. **Note to Triager - COVID-19 Testing May Be Indicated:**
• **Indications:** Testing is generally indicated for a person who has common COVID symptoms of cough, fever, or shortness of breath and any possible exposure to COVID-19. It may be sometimes indicated for a person with less common COVID symptoms such as muscle aches, headache, sore throat, or diarrhea. Talk with a healthcare provider if needed. A healthcare provider needs to order the test.
• **What is the test?** The test is a nose or throat swab.
• **Where can a person get tested?** COVID-19 testing is becoming more available from local and state public health departments. Commercial labs now can perform COVID-19 testing. However, it may still be difficult to find a place to get tested. Use your judgment and knowledge of current public health department recommendations.

Deleted: or High Risk Travel in Past 14 Days and No Respiratory Symptoms or Fever

Deleted: 1. Alternate Disposition - Telemedicine Within 24 Hours:

Deleted: 1. You need to call and discuss this with a telemedicine provider within the next 24 hours.

Deleted: Needed - Talk with HCP:

Deleted: the CDC and

Deleted: have or will soon have these tests available. This is a throat or nose swab test.

Deleted: The patient needs to be followed closely by the public health department and their healthcare provider.

Deleted: Possible sources of care are: The best care will depend on your local health system and community resources
Remember, there is no treatment for COVID-19. Test results only help with decision-making and preventing spread.

- **Who should get prioritized for testing?** Healthcare workers and first responders have top priority. Hospitalized patients have top priority. Lowest priority are healthy people under 65 years old who have mild symptoms.
- **What about a standing order?** As testing becomes more widely available, call centers should talk with their medical leadership about triagers being able to use a standing order for testing.

### Alternate Disposition - Call Telemedicine Provider:

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### Home Isolation Is Needed:

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### Measure Temperature:

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### Call Back If:

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### COVID-19 General Information and Possible COVID Exposure But No Symptoms

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### Isolation is Needed If Fever or Other Symptoms

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### Isolation will be needed if you develop a fever, body aches, chills, diarrhea, headache, or High Risk Travel 15 or More Days Ago.

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The patient should talk to the occupational health office for their workplace.

COVID-19 (Coronavirus Disease 2019) - Outbreak:

- An outbreak of this infection began in China in December 2019.
- Four patients were confirmed in Canada on January 31, 2020.
- The Centers for Disease Control and Prevention (CDC) is considered the source of truth for this guideline. This continues to be a rapidly changing situation and guidance from the CDC is being updated daily. See https://www.cdc.gov/coronavirus/2019-nCoV/index.html.

COVID-19 - Symptoms:

- COVID-19 can cause a respiratory illness, such as bronchitis or pneumonia.
- The most common symptoms are: cough, fever, and shortness of breath.
- Other less common symptoms are: body aches, chills, diarrhea, fatigue, headache, runny nose, and sore throat.
- Some people may have minimal symptoms or even have no symptoms (asymptomatic).

COVID-19 - Exposure Risk Factors:

- Close contact with a person who tested positive for COVID-19 AND contact occurred while they were ill.
- Living in or travel from a city or area where there is major community spread of COVID-19. This carries a lower risk compared to close contact if one follows social distancing recommendations. Community spread is now occurring in most of the US, especially in cities.
- International travel.

COVID-19 - How it is Spread:

- COVID-19 is spread from person to person.
- Respiratory Droplet from Coughing: The virus spreads from respiratory droplets that are produced when a person coughs or sneezes. The infected droplets can then be inhaled by a nearby person or land on the surface of their eyes.
- Surfaces: Most infected people also have respiratory secretions on their hands. These secretions get transferred to healthy people on doorknobs, faucet handles, etc. The virus then gets transferred to healthy people when they touch their face or rub their eyes.

COVID-19 - How to Protect Yourself from Getting Sick:

- Avoid close contact with people known to have this new coronavirus infection. Try to stay at least 6 feet (2 meters) away from anyone who is coughing.
- Wash hands often with soap and water.
- Avoid touching the eyes, nose or mouth. Germs on the hands can spread this way.
- Do not share eating utensils (e.g., spoon, fork).

COVID-19 - Travel:

- The Centers for Disease Control and Prevention (CDC) maintains a website with latest recommendations regarding travel and your health.
8. COVID-19 - Information about Testing:
- Testing requires a doctor’s order (as with all medical tests).
- Testing is performed on material collected with a nose or throat swab. Swab specimens are then sent to the CDC and/or state public health department.
- Testing is becoming more available from state and public health departments. Commercial labs also now have these tests available.
- The results usually come back in 1 to 4 days, but may take longer depending on testing kit or testing site availability.
- Usually testing is only performed on people with symptoms. Any person who is being tested should be staying home (home isolation).

9. Other COVID-19 Facts:
- Incubation Period: Average 5 days (range 2 to 14 days) after coming in contact with a person who has COVID-19 virus.
- Expected Course: Studies from other counties have shown that about 80% have a mild illness, much like normal flu or a bad cold. The symptoms usually last 2 weeks.
- Complications: Viral pneumonia occurs in 5 to 10% of patients. People with complications generally recover in 3 to 6 weeks.
- Death Rate: The adult death rate is approximately 1% to 3%. The death rate is lower in children and younger adults. It is higher in older adults.
- Vaccine: There currently is no vaccine to prevent COVID-19. Many labs are working on developing a vaccine, but that will take at least a year.
- Treatment: Currently, there is no effective anti-viral medication for coronavirus. Treatment is supportive (e.g., oxygen and IV fluids) for hospitalized patients.

10. FAQ - Should I wear a face mask to protect me from getting COVID-19?
- The CDC does not currently recommend the use of face masks among the general public.
- If you have symptoms, you should wear a facemask when seeking medical care.

11. FAQ - Can someone spread the virus who is not sick?
- The virus spreads through respiratory droplets produced when an infected person coughs or sneezes. The droplets can then be inhaled by a nearby person.
- Therefore, an infected person is thought to be most contagious when they are sick and have symptoms of cough and fever.
- It is possible that an infected person could spread coronavirus before they start feeling sick. However, this is not the main way coronavirus spreads.

12. FAQ - Can I get coronavirus from touching an infected surface?
- It is possible that a person could get coronavirus by touching an object like a doorknob or a phone, or surfaces like a table or desk.
13. Call Back If:
   - You have more questions.

COVID-19 Testing - Prevention - Healthy Living

1. Note to Triager - When is COVID-19 Testing Indicated?
   - Indications: Testing is generally indicated for a person who has a cough, fever, or shortness of breath and any possible exposure to COVID-19. A healthcare provider needs to order the test.
   - What is the test? The test is a nose or throat swab.
   - Where can a person get tested? COVID-19 testing is becoming more available from local and state public health departments. Commercial labs now can perform COVID-19 testing. However, it may still be difficult to find a place to get tested. Use your judgment and knowledge of current public health department recommendations. Remember, there is no treatment for COVID-19. Test results only help with decision-making and preventing spread.
   - Who should get prioritized for testing? Healthcare workers and first responders have top priority. Hospitalized patients have top priority. Lowest priority are healthy people under 65 years old who have mild symptoms.
   - What about a standing order? As testing becomes more widely available, call centers should talk with their medical leadership about triagers being able to use a standing order for testing.

2. COVID-19 - Information about Testing:
   - Testing requires a doctor’s order (as with all medical tests).
   - Testing is performed on material collected with a nose or throat swab. Swab specimens are then sent to the CDC and/or state public health department.
   - Testing is becoming more available from state and public health departments. Commercial labs also now have these tests available.
   - The results usually come back in 1 to 4 days, but may take longer depending on testing kit or testing site availability.

3. COVID-19 - Where to Go for Testing:
   - Usually testing is only performed on people with symptoms. Any person who is being tested should be staying home (home isolation).

4. How to Protect You and Your Family from Getting COVID-19:
   - Avoid close contact with people known to have this new coronavirus infection. Try to stay at least 6 feet (2 meters) away from anyone who is coughing.
   - Wash hands often with soap and water.
   - Alcohol-based hand cleaners are also effective.
   - Avoid touching the eyes, nose or mouth. Germs on the hands can spread this way.
   - Do not share eating utensils (e.g., spoon, fork).
5. **How to Protect Others - When You are Sick with COVID-19:**
   - **Stay Home:** Stay home from school or work if you are sick. Do Not go to religious services, child care centers, shopping, or other public places. Do Not use public transportation (e.g., bus, taxis, ride-sharing); Do Not allow any visitors to your home. Leave the house only if you need to seek urgent medical care.
   - **Cover the Cough:** Cough and sneeze into your shirt sleeve or inner elbow. Don't cough into your hand or the air. If available, cough into a tissue and throw it into a trash can.
   - **Wash Hands Often:** Wash hands often with soap and water. After coughing or sneezing are important times.
   - **Wear a Mask:** Wear a face mask when around others. Always wear a face mask (if available) if you have to leave your home (such as going to a medical facility).
   - **Call First if Medical Care Needed:** Call ahead to get approval and careful directions.

6. **Keep Your Mind Positive:**
   - **Live in the Present:** Live in the present, not the future. The future is where your needless worries live.
   - **Think Positive:** Use a mantra to reduce your fears, such as "I am strong". Stay positive.
   - **Get Outdoors:** Take daily walks. Go to a park if you have one. Being in nature is good for your immune system.
   - **Stay in Touch with Your Friends and Family:** Use regular phone calls and video chats to stay in touch with those you love. Schedule virtual video dinners with friends and family!

7. **Keep Your Body Strong:**
   - **Get your body ready to fight the COVID-19 virus.**
   - **Get enough sleep.**
   - **Stay physically active.** Walk or exercise every day. Take the stairs.
   - **Stay well hydrated.**
   - **Eat healthy meals.** Avoid overeating to deal with your fears.
   - **Avoid the over-use of anti-fever medicines.** Fever helps fight infections and ramps up your immune system.

8. **Call Back If:**
   - You have more questions.

---

**FIRST AID**

N/A

**BACKGROUND INFORMATION**

**Key Points**

- An outbreak of this infection began in Wuhan, Hubei Province, China in December 2019.
- The first patient in the United States occurred on January 21, 2020. During March 2020 cases were identified in all states.
- Four patients were confirmed in Canada on January 31, 2020.
- The Centers for Disease Control and Prevention (CDC) is considered the source of truth for this guideline. This continues to be a rapidly changing situation and guidance from the CDC is being updated daily. See https://www.cdc.gov/coronavirus/2019-nCoV/index.html.

Office Hours Telephone Triage Protocols | Adult | 2020

Coronavirus (COVID-19) - Exposure
Symptoms
The COVID-19 coronavirus causes a lower respiratory tract illness. Common symptoms are:

- Cough
- Fever
- Shortness of breath

Less common symptoms may include:

- Body aches
- Chills
- Diarrhea
- Fatigue
- Headache
- Runny nose
- Sore throat

Some people may have minimal symptoms or be asymptomatic.

Cause
It is caused by a novel (new) coronavirus (COVID-19).

Risk Factors
Risk factors for getting sick with COVID-19 are:

- Close contact with a person who tested positive for COVID-19 AND contact occurred while they were ill.
Living in or travel from a city or area where there is major community spread of COVID-19. This carries a lower risk compared to close contact if one follows social distancing recommendations. Community spread is now occurring in most of the US, especially in cities.

International travel.

How it is Spread (Transmission)

COVID-19 is spread from person to person.

- **Respiratory Droplet from Coughing:** The virus spreads from respiratory droplets that are produced when a person coughs or sneezes. The infected droplets can then be inhaled by a nearby person or land on the surface of their eyes. Surfaces: Most infected people also have respiratory secretions on their hands. These secretions get transferred to healthy people on doorknobs, faucet handles, etc. The virus then gets transferred to healthy people when they touch their face or rub their eyes.

Incubation Period

The incubation period averages 5 days (range 2 to 14 days) after coming in contact with the secretions of a person who has COVID-19.

Diagnosis and Reporting

A person under investigation (PUI) is a person with symptoms who a healthcare provider suspects of having COVID-19.


Healthcare providers who identify a PUI should notify both the infection control personnel for their healthcare facility and the local or state health department.

Complications

Complications include pneumonia, hypoxia, ARDS, respiratory failure, and death.

People with the following medical problems or conditions appear to be at higher risk of complications.

- 65 years and older
- Diabetes, especially if the person has diabetes complications already
- Heart disease, such as heart failure, heart attack
- Lung disease, such as COPD, cystic fibrosis, or moderate to severe asthma
- Weak immune system such as HIV, chemotherapy, organ transplant, or chronic steroids

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Deleted: Lung disease (e.g., COPD, emphysema, cystic fibrosis, bronchopulmonary dysplasia)
Deleted: Neuromuscular or neurologic disease (e.g., stroke, Parkinson's disease, muscular dystrophy, cerebral palsy, epilepsy)
Deleted: Sickle cell disease
Deleted: Technology-dependent lung disease (e.g., oxygen required, tracheostomy, ventilator)
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It is unknown whether pregnant women have a greater risk from getting sick with COVID-19.

The adult death rate is approximately 1% to 3%. The death rate is lower in children and younger adults. It is higher in older adults.

Treatment

There is no vaccine or anti-viral medication for COVID-19. Treatment is supportive. Oxygen and IV fluids are used for hospitalized patients.

None of the drugs mentioned recently in the news (such as chloroquine) have any proven efficacy in treating or preventing this viral disease. More research is needed in this area.

Travel

⦁ Avoid all non-essential travel.

⦁ If you must travel, go to CDC website for updates on travel advisories: https://www.cdc.gov/coronavirus/2019-ncov/travelers.

Ibuprofen and other NSAID Use for COVID-19

Many callers have expressed concerns that ibuprofen (or other NSAID) use to treat COVID-19 symptoms may worsen the disease. These concerns originated from a few physicians' comments and have since spread over social media.

To date, there is no scientific evidence (clinical trials or studies) that show that using ibuprofen negatively impacts outcome in COVID-19 patients. We will continue to review any new literature as it is published. The CDC, WHO, AAP and our Infectious Disease expert reviewers continue to approve the use of ibuprofen for COVID-19.

For these reasons, Schmitt-Thompson Clinical Content (STCC) guidelines continue to recommend ibuprofen as an acceptable way to treat high fevers and pain.

⦁ Remind callers that fevers may be beneficial, help fight the infection, and speed recovery.

⦁ Low-grade fevers should not be treated.

If callers remain concerned, they can use acetaminophen for symptoms that warrant treatment.

Caution: For suspected COVID-19 patients on oral steroids, such as prednisone, the triager should involve the HCP for a decision about whether the drug can be continued.

Other Coronaviruses in Humans

Common coronaviruses can cause colds and upper respiratory symptoms. These can be identified in currently available commercial respiratory testing panels (human coronaviruses HKU1, OC43, 229E, and OC43). These coronaviruses are completely different than the novel coronavirus addressed in this guideline.

Two other coronaviruses that previously have caused serious outbreaks are:

⦁ MERS-CoV: Middle East Respiratory Syndrome (MERS)

⦁ SARS-CoV: Severe Acute Respiratory Syndrome (SARS)

Internet Resources


REFERENCES


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