

COVID19 Phone Call Triage Work Flow

Updated 9/18/2020

Adult patients

Populate phone note with the following script:

- ✓ Do you have a new cough? (yes or no), when did it start, associated symptoms?
- ✓ In the last three days, have you had a fever? How high, when did it start?
- ✓ Other symptoms: body aches? sore throat? Is this the primary or worst of all their symptoms?
Runny nose, Nausea, vomiting, or diarrhea?
- ✓ Gather relevant chronic diseases and list in phone note
 - Do you have a history of COPD/emphysema, Asthma, other chronic respiratory illness, organ transplant, diabetic, ESRD, heart failure, currently undergoing cancer treatment, on immunocompromising drugs (specifically steroids, chemotherapy, or drugs to treat rheumatologic disease)
 - Are you pregnant?
- ✓ Have you been exposed to someone who has tested positive for COVID19?

Triage protocol:

- If symptoms are mild, no relevant exposure history, and no underlying chronic disease/immunosuppressed state:
 - Advise on supportive care and advise to stay home until at least 48 hours symptom free
 - Hold phone note to RN who will do a follow up call in 24 hours to assess symptom progression
- If symptoms are mild and patient has EITHER a relevant exposure history or one of the above listed chronic diseases or immunosuppressed states:
 - Forward phone note to provider on site for further triage and consideration of scheduling for influenza+/-COVID19 testing
 - Provider will determine what type of appointment or evaluation is appropriate
- If symptoms severe (respiratory distress, change in mental status, etc.):
 - Direct patient to call 911 for the ambulance
 - Call the emergency room to notify them that a PUI is coming in by ambulance
- If patient is asymptomatic and calling about a work note
 - Advise the patient that we are following CDC and NYS DOH guidelines around continuing to work.
 - If able to work at home, do it
 - Don't go to work if you are sick (we are not providing work notes for patients and would direct them or their employers to CDC guidance for those with chronic conditions)
 - The CDC advises those over 60 and with chronic health conditions to stay home and practice social distancing

Pediatric Patients

Child under 2 months:

- If febrile direct the family to the emergency room
- If afebrile but having cough, shortness of breath, wheezing or any other acute symptoms then triage as you usually would (offer a same day OV if possible, or send note to responsible provider if further questions)
- If afebrile but meets criteria, please follow the guidance within the pediatric protocol book.

Child under 2 years:

- If fever and mild respiratory symptoms - stay home, hold note to nurse for 24-hour follow up call
- If fever and moderate respiratory symptoms requiring further in person evaluation – schedule same day
- If any severe respiratory symptoms – direct to ER
- If fever without respiratory symptoms – triage as usual and send phone note to responsible provider to determine if appointment should be made

Children ages 2-18:

- Does your child you have a new cough, when did it start? Shortness of breath? Hard/labored or fast breathing?
- Able to take PO intake of liquids? How much? UOP status?
- Has your child had a fever? How high? What day did it start?
- Other symptoms: body aches? Sore throat? Is this the primary or worst of all their symptoms? runny nose, nausea, vomiting, or diarrhea? headaches?
- Gather relevant chronic diseases and list in phone note
 - Does the patient have a history of Asthma, other chronic respiratory illness (ex: CF, bronchopulmonary dysplasia), congenital heart disease, organ transplant, ESRD, diabetes, immunocompromising drugs (specifically chronic steroids, chemotherapy, or drugs to treat rheumatologic disease)
- Has your child been exposed to someone who has tested positive for COVID19?

Triage protocol

- If symptoms are mild, no relevant exposure history, and no underlying chronic disease/immunosuppressed state:
 - Advise on supportive care and advise to stay home until at least 48 hours symptom free
 - Hold phone note to RN who will do a follow up call in 24 hours to assess symptom progression
- If symptoms are mild and patient has EITHER a relevant exposure history or one of the above listed chronic diseases or immunosuppressed states:
 - Forward phone note to provider on site for further triage and consideration of scheduling for influenza+/-COVID19 testing
 - Provider will determine what type of appointment or evaluation is appropriate
- If symptoms severe (respiratory distress, change in mental status, etc.):
 - Direct patient to call 911 for the ambulance
 - Call the emergency room to notify them that a PUI is coming in by ambulance

- If parent is calling about a work note:
 - Advise the patient that we are following CDC and NYS DOH guidelines around continuing to work
 - If able to work at home, do it
 - Don't go to work if you are sick (we are not providing work notes for patients and would direct them or their employers to CDC guidance for those with chronic conditions)

After hours phone calls

- No need for after hours providers to make decisions about testing
- Assess patients' symptoms, if appropriate send to ER, otherwise advise to stay home and advise on supportive cares, hold phone note to COVID19 desktop (regardless of where the patient is at) but indicate in the document title the patients' primary site and the nurse will follow up with the patient on the next business day to discuss if testing and or a visit is needed (ex: on call COVID question MR patient)
- Triage nurses from all sites will check the covid desktop in the morning and try to address their own patients