CORONAVIRUS (SARS-CoV-2)

NIGHT NURSE MEDICAL DIRECTIVE : ADVISORY EFFECTIVE 2/4/2020 (UPDATED 3/10/20)

CORONAVIRUS SCREENING PROTOCOL - NIGHT NURSE TRIAGE RNS

- Health authorities are closely watching an outbreak of respiratory illness caused by a new virus that originated in China.
- Governments are stepping up surveillance of airline passengers from central and mainland China and other countries, and taking other steps to try to control the outbreak, such as mitigation.

As information is acquired, the affected areas geography has changed. Affected areas are defined as geographic regions where sustained community transmission has been identified. Relevant affected areas will be defined as a country with at least a CDC Level 2 Travel Health Notice. Current information is available in CDC's COVID-19 Travel Health Notices https://

www.cdc.gov/coronavirus/2019-ncov/travelers

- RNs will screen all callers for respiratory and URI symptoms of COVID-19 concern and follow this protocol for symptomatic and asymptomatic persons, to identify persons at risk. (persons under investigation-PUI)
- RN Triager will Contact the patient's State Department of Health to report any persons at risk, or of concern, following this protocol.

(Bookmark link below of **US DPH Directory** on your PC)

https://www.cdc.gov/publichealthgateway/ healthdirectories/healthdepartments.html Night Nurses will ask ALL callers about travel to any country with travel advisories, in the 14 days before symptom onset. (NIGHT NURSES WILL SCREEN EVERY CALLER)

CORONAVIRUS SCREENING QUESTIONS-NIGHT NURSE RNS ARE REQUIRED TO ASK EVERY CALLER:

"Have you (the patient) OR any close contact had any recent foreign travel outside the US, with return (by ship or air) in the last 14 days?"

If **YES**: Ask **WHERE** did the patient or close contact travel from?

IF traveled to Mainland China, Hong Kong, South Korea, Italy, Japan or Iran, these countries present a higher risk for COVID-19 in returning travelers.

(Subject to CDC updates.Travel advisories are in effect for countries listed above, as of 2/28/20).

RN Triager: IF YES: <u>This is a person at risk</u> <u>under investigation concern for COVID-19</u>.

Screen for fever and/or respiratory and URI symptoms and follow this protocol's guidelines for Symptomatic **OR** Asymptomatic patients.



<u>If NO</u>: No Travel --<u>and</u>---No Close Contacts Travel to these listed countries: Coronavirus screen is considered negative.

Triager: Go to another triage protocol (ie, colds, cough, influenza, fever, etc.)

- RN Triager document: "Negative COVID19 Screen"
- Document this on the triage encounter report in the Medical/Surgical History field.

SYMPTOMATIC PATIENTS with TRAVEL or CLOSE CONTACT EXPOSURE within 14 days of Travel (Positive Corona Screen):

SYMPTOMATIC PATIENTS-REQUIRING URGENT EVALUATION

(SEVERE SYMPTOMS: FEVER, COUGH, or SOB)

Obtain patient's location and call back number.

<u>STEP 1:</u> RN-CALL 911 NOW TO ARRANGE EMS TRANSPORT —IF PATIENT MEETS CDC CRITERIA:

Call city's EMS crew for transport to HOSPITAL.

• RN-NOTIFY BOTH EMS AND HOSPITAL WITH ER EXPECT:

"Respiratory symptoms and travel from China/ affected country (or) Respiratory symptoms and exposure to close contact that traveled from China/Affected Country. Concern for Coronavirus."

 Fever and acute respiratory illness: Signs and symptoms of lower respiratory illness (e.g. cough, shortness of breath) AND travel from China/Affected Country in last 2 weeks before symptom onset.

- Fever OR symptoms of lower respiratory illness (e.g., cough, shortness of breath) and travel from China/Affected Country in last 2 weeks.
- Fever OR symptoms of lower respiratory illness (e.g., cough, shortness of breath) and in the last 14 days before symptom onset, had close contact with a laboratoryconfirmed COVID-19 patient or traveler.
- If meets any CDC criteria—Refer patient to Hospital via EMS transport.
- <u>INSTRUCT PATIENT</u> to stay where they are, and NOT to leave that location until they receive a callback or transport arrives, and to be ready to answer calls.
- <u>DOCUMENTATION</u> If any of the criteria are flagged (respiratory illness AND travel from China/Affected Country and/or respiratory illness and close contact traveled from China/Affected Country, or exposure to confirmed COV-19 patient or traveler) please document:

"Respiratory symptoms AND travel from China/ Affected Country, concern for Coronavirus OR Respiratory symptoms AND exposure-Close contact travel from China/Affected Country, Coronavirus concern, OR close-contact to confirmed COV-19 patient or traveler."

RN STEP 2: State Board of Health Notification

- RN-Contact the patient's State Board of Health to report any patients meeting criteria for persons at risk, or person under investigation (PUI) whether patient is symptomatic or asymptomatic.
- <u>Care Advice</u>: Instruct patient to selfisolate, and be prepared to do so for 14 days.



 Stay isolated at home with all household members until you are contacted by the health department with advice. No visitors, but food can be handed across an entryway.

Patient: Wear a mask. Wearing a mask may keep a person who is coughing and infected from readily spreading infection to others, but masks probably won't reliantly help people in close contact who are not yet infected in the household, from acquiring infection. Household contacts may wear masks at their option. Staying >6 feet away from close contacts may be helpful.

- Report any new symptom, respiratory symptoms and/or fever to patient's PCP.
 Most people who acquire the illness will not require hospitalization or treatment.
 The aim of self isolation is to keep the community protected, while patient gets better on their own.
- Advise Caller: RN will contact the State
 Board of Health and PCP will receive a
 report of the patient's triage encounter
 and patient instruction given. DPH will
 provide follow up with patient, and
 determine quarantine time.
- Instruct patient to call doctor's office with an update for any worsening or new symptoms.
- RN: Notify DPH NOW and document on report.

RN STEP 3: RN Notify PCP Office and /or MD On Call After-Hours with instructions to On-Call MD: to alert the PCP and Office.

IF Symptoms Develop While Patient is Quarantined

- If any new symptom(s) develop in next 14 days of self-isolation, patient may need to be seen and examined at either PCP office or hospital, at the PCP's discretion.
- Both PCP office and/or hospital will need to be alerted to situation in advance, to provide protection for other patients and health care staff.
- Instruct Patient: Do not directly go to hospital or PCP office, without first providing notification.
- Instruct Patient to report any new symptoms to PCP and/or DPH for patient care advice and instructions.

TRIAGER: If any new symptoms develop **CONSULT ON CALL MD** for MD patient care instruction and disposition recommendation.

TRIAGER-Call EMS for the patient, to arrange transport now IF the patient is in severe respiratory distress:

- <u>Triager-Notify EMS</u> of Coronavirus Concern.
- <u>Triager-Notify ER</u> of Patient Expect Concern-Coronavirus.

If NO severe respiratory distress:

- Nurse consults MD On-Call for disposition recommendation.
- If evaluation is recommended by MD, advise patient to wear a mask.
- If no mask is available, instruct patient to wait in car in parking lot outside the ER (or office), and a HCP will bring a mask out to the patient.



If MD recommends urgent patient evaluation:

- Notify ER of Patient Expect Concern-Coronavirus- <u>OR</u>
- Triager, ask MD if triager is needed to call office to notify of patient expect concern-Coronavirus, or MD will notify.
- RN Notify PCP Office and /or MD On Call After-Hours with instructions to On-Call MD: to alert the PCP and Office.

RECOMMEND SELF-ISOLATION AND REVIEW BY STATE BOARD OF HEALTH

- Patient has <u>NO symptoms or MILD</u>
 <u>symptoms AND Exposure:</u> Close contact to
 a person at risk, who traveled from China/
 Affected Country in last 2 weeks, whether
 the close contact was symptomatic **OR** asymptomatic.
- Patient has <u>NO symptoms or MILD</u> <u>symptoms AND Exposure</u>: Close contact to a laboratory confirmed COVID-19 (novel Coronavirus) patient.

SYMPTOMATIC PATIENTS: NO Fever-NO SOB-Mild Respiratory Illness

Limit clinical evaluation as medically appropriate for **AFEBRILE** patients with **MILD** respiratory illness. **(NO FEVER and NO SOB)** within 14 Days Travel or Close Contact Exposure: No hospitalization needed.

TRIAGER: Obtain patient address. Notify State Department of Public Health.

- Advise patient to stay at home. Follow selfisolation instructions per Dept of Public Health.
- Instruct patient IF symptoms worsen, take your temperature and call your PCP and the State Dept of Public Health. If illness

progresses and an extensive medical evaluation is needed, direct the patient to a hospital for ER evaluation (via EMS transport) where AII (airborne infection isolation) and PPE (personal protective equipment) can be implemented. These patients are reported to the State's DPH.

TRIAGER: Refer patient to ER via EMS. Alert EMS and ER: COVID-19 coronavirus suspected and to take precautions. Symptomatic patients, need to wear a mask.

COVID-19 Testing is made based on patient's travel risk factors, and any exposure to a sick individual in other countries, presenting signs and symptoms, and testing capacity. Testing kits will be sent from CDC in the coming weeks to state Public Health Departments, to implement testing.

ASYMPTOMATIC PATIENTS with TRAVEL or CLOSE CONTACT EXPOSURE within 14 days of Travel (Positive Corona Screen)

 Asymptomatic Travelers from CHINA: STILL INSTRUCT TO STAY AT HOME and avoid public settings. <u>SELF MONITOR</u> for symptoms for 14 days from last day of travel from China.

Advise: IF FEVER or upper respiratory infection symptoms (cough) develop within 14 days: Contact your PCP and Dept Public Health.

2. Asymptomatic Travelers from Countries

OTHER THAN CHINA with Travel Advisories
(See the listing of countries with advisories
due to community transmission):

Instruct: Self Isolation for 14 days. Instruct patient to self-monitor for FEVER or Cough/
Respiratory Symptoms. If fever or URI symptoms occur: Stay at home. Immediately Limit Contact with Others. Contact your PCP and the State Dept Public Health. Call with any questions.



EXTRA NOTES-PRECAUTIONS:

Mitigation strategies for controlling spread and limiting impact of community transmission. Reinforce everyday strategies:

- Stay at home and avoid public places when sick (i.e., social distancing)
- Cover mouth and nose when coughing and sneezing
- Wash hands frequently
- Avoid being within 6 feet (close contact) of a person who is sick.
- Avoid sharing drinks, smoking/vaping devices, or other utensils or objects that may transmit saliva.
- Disinfect frequently touched surfaces.

Coronavirus Symptoms:

Early common symptoms include a runny nose, headache, cough, sore throat, a general feeling of being unwell, and fever. As the disease progresses shortness of breath, chills and body aches are associated with more dangerous stages of coronavirus infection, according to the U.S. Centers for Disease Control and Prevention. In serious cases, these latter symptoms can reflect pneumonia, and its complications.

• **NOTE:** Some people with Coronavirus infection may have no symptoms.

BACKGROUND

- Common human coronaviruses, usually cause mild to moderate upper-respiratory tract illnesses, like the common cold. Most people get infected with these viruses at some point in their lives. These illnesses usually only last for a short amount of time.
- Human coronaviruses can sometimes cause lower-respiratory tract illnesses,

such as pneumonia or bronchitis. This is more common in people with cardiopulmonary disease, weakened immune systems, infants, and older adults.

SARS-CoV-2 (Severe acute respiratory syndrome Coronavirus 2) is identified as a novel virus of the coronaviridae: Scientists have identified it as a new coronavirus. The name comes from the Latin word for crowns or halos, which coronaviruses resemble under a microscope.

The coronavirus family has many types that affect people. Some cause the common cold while others originating in bats, camels, civet cats, and other animals have evolved into more severe illnesses such as SARS — severe acute respiratory syndrome — or MERS — Middle East respiratory syndrome.

- The Wuhan pneumonia outbreak is linked to novel coronavirus in China that has caused hundreds of deaths there and tens of thousands infections (mostly in China), some severe, as well as exported cases and deaths in other countries.
- Coronaviruses are thought to spread through coughing or sneezing, or contacting infectious secretions. Chinese health officials say they believe the illness first spread from animals to people. They now say it can spread between people.
 Scientists now believe it can spread from person to person in close contact, through the respiratory route.



The CDC has outlined recommendations for healthcare providers in the United States.

 Clinicians are required to obtain a travel history for all patients presenting with a febrile illness. Particularly, in this current environment as a triage service, <u>Night</u> <u>Nurses will obtain a travel and exposure</u> history for ALL callers.

All patients who meet any of the following criteria should be evaluated as a person at risk, under investigation:

- Fever and symptoms of lower respiratory illness (e.g., cough, shortness of breath) and in the last 14 days before symptom onset had a history of travel from China OR Close contact with a person with a history of travel from China in the last 14 days, whether that person is asymptomatic, or was under investigation for COVID-19 while that person was ill.
- Fever and symptoms of lower respiratory illness (e.g., cough, shortness of breath) and in the last 14 days before symptom onset had a history of travel from *affected regions with community transmission OR with a person with a history of travel from affected regions in the last 14 days, whether that person is asymptomatic, or was under investigation for COVID-19 while that person was ill.
 *Affected Regions as of 2/28/20: Hong Kong, South Korea, Italy, Japan or Iran
- Fever or symptoms of lower respiratory illness (e.g., cough, shortness of breath) and in the last 14 days before symptom onset, had close contact with a laboratoryconfirmed COVID-19 patient or traveler.

Negative Coronavirus Screen

Asymptomatic AND:

last 14 days

- No Travel to China/Affected Country in last 14 days
- No close contact with traveler from China/Affected Country in last 14 days
- No close contact with COVID-diagnosed patient or traveller
- —There is no greater COVID risk
- —Negative Coronavirus Screen. Reassure concerns.
- Respiratory Symptoms and/or fever AND:
 No Travel to China/Affected Country in
 - No close contact with traveler from China/Affected Country in last 14 days
 - No close contact with COVID-diagnosed patient or traveller
 - —There is no greater COVID risk
 - —Negative Coronavirus Screen. Reassure concerns.
- TRIAGER: Go to Other Protocol (e.g, colds, influenza, fever, cough, etc).
- If sick with URI virus but not at risk for COVID, be respectful and stay home from school and work to avoid infecting other students and/or co-workers, and wash your hands frequently.

CDC Info Line-Extended hours for 2019 SARS-CoV-2 questions only:

800-232-4636

Mon-Fri. 8am-11:00pm ET, Sat-Sun. 9:00am-5:00pm ET

MA Dept. of Public Health 617-983-6800





Night Nurse assumes no liability for this protocol. Review the protocol with your medical directors and adapt it as needed for your practice. We also welcome your feedback as we work together as a community to stay ahead of this rapidly moving virus.

Provided by Night Nurse Triage. Founded in 1999, Night Nurse provides reliable triage services for healthcare providers and institutions across the country. www.nightnursetriage.com

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Updated March 10, 2020-MDPH Consult/TRegan/MDern

