

Response to Possible Coronavirus for Outpatient Settings

(policy abstract, last updated 03/27/2020)

CRITICAL UPDATES FOR: Outpatient Clinic Location Staff

- Patients with symptoms of acute respiratory infection must be masked when entering the clinic and need to remain masked
- Rooming high risk patient:
 - Following Triage, patients at high risk for COVID-19 will be escorted to an empty room and the door will be kept closed
 - **Staff** escorting the patient need to wear procedure/surgical mask
 - If no empty room is available, maintain 6 ft. clearance with other patients
- Only patients who clinically need advanced level care are to be sent to the ED/hospital (call ahead if sending high risk COVID-19 patients for hand off to ED/accepting provider/Infection Prevention)
- Testing-only, done when medically indicated
 - Prioritize based on severity/risk *Link Testing Guidance*
 - Severely ill patients who will be transferred to the ED/hospital should not be tested in an OP setting
 - Lab Facilities- Commercial Labs only if clinically necessary. (OR State Public Health will not accept OP testing)
- Use minimum PPE necessary to evaluate patient with fever/respiratory symptoms (regular facemask, gown, gloves and eye protection, e.g. goggles/face shield)
 - Respiratory specimen collection no longer considered 'aerosol generating procedure' (per OHA) and can be conducted in minimum PPE outlined above
- Cleaning of a room following evaluation or testing of patient with fever/respiratory symptoms is standard cleaning when using droplet precautions. Room does not need to be closed for any period of time pre or post clean.
- Home Care, high risk patients who do not require hospitalization should be provided the COVID-19 After Visit Summary that includes Home Care instructions
- Aerosol-generating procedures

DISCLAIMER:

- To access detailed policy, go to the Emerging Pathogens webpage on the SHS Insider.
- If policy abstract is more than 2 days past the latest updated date, refer to the Emerging Pathogens webpage on the SHS Insider to ensure no changes have been made.

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- **Avoid** aerosol-generating procedures not immediately required for patient care
- **PPE for Aerosol-generating procedures is gown, gloves, eye protection and N-95 or PAPR**
 - Only N-95/PAPR fit tested staff to perform procedure, and limit to one staff member in the room
- Close room for two hours if used for aerosol generating procedures and conduct droplet precaution clean

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