



## PROTOCOL FOR COVID-19 OUTPATIENT TESTING

### I. PURPOSE

To facilitate the COVID-19 testing process for patients who are 1) screened virtually by an IU Health Physicians Primary Care nurse and 2) currently established patients under the care of an IU Health Physicians Primary Care provider.

### II. SCOPE

- A. Personnel** IU Health Physicians Primary Care nurses who are performing virtual COVID-19 screenings of established IU Health Physicians Primary Care patients.
- B. Patient** Patients who 1) have a positive COVID-19 screening, 2) meet the IU Health COVID-19 outpatient testing guidelines, and 3) are established patients of an IU Health Physicians Primary Care Provider.

### III. EXCEPTIONS

- Patients who do not have a positive COVID-19 screening (asymptomatic) and/or do not meet the IU Health COVID-19 testing guidelines for outpatients.
- Patients who do not have an established relationship with an IUHP Primary Care Physician.

### IV. DEFINITIONS

**COVID-19 Screen:** Triage assessment completed by licensed personnel (RN, LPN, provider) to determine whether patient has symptoms and risk factors consistent with COVID-19 and to provide appropriate disposition.

#### **COVID-19 Indications for Outpatient Testing**

- **Patients in congregant living situations**
  - Suggested Guidance: If positive, would notify patient's residence regarding risk to other patients.
  - Resources: CDC- Long-term Care facilities, Nursing homes
- **Patients from a high risk group** (*>65 yo, chronic lung disease, moderate to severe asthma, serious heart conditions, immunocompromised including cancer treatment, BMI  $\geq 40$ , uncontrolled diabetes, uncontrolled kidney failure, uncontrolled liver disease, pregnancy*)
  - Suggested Guidance: Provider education regarding potential worsening around Day 8, Symptom education on when to go to the ER, a mask to wear to the ER
  - Resources: CDC- What to do if you are sick
- **Patients living with someone who is high risk**
  - Suggested Guidance: Set up alternative mechanisms for care if available, provide masks (or suggestion to cover face with an alternative)
  - Resources: CDC- Caring for Someone
- **Dialysis patients**
  - Suggested Guidance: Notification of dialysis center regarding positivity for cohorting or alternative site selection
  - Resources: CDC- Dialysis Facilities
- **Patients unable to self-quarantine**
  - Suggested Guidance: Provide masks for patient (or instructions to cover face with alternative)
- **Patients whose jobs require clearance prior to return to work**
  - Suggested Guidance: If positive, wait to return to work until no longer infectious as defined by CDC non-test strategy
  - Resources: CDC- Return to Work Criteria for Healthcare workers
- **Patients with upcoming admission to hospital, SAR, LTAC, or congregant living**
  - Suggested Guidance: Notify hospital, SAR, LTAC or congregant living facility and plan for appropriate isolation while in house
- **Patients individually approved by Infection Prevention**

**V. PROTOCOL**

- A.** Complete COVID-19 Screen using the Cerner 'COVID-19 Screen' powerform, 'COVID-19 AMB Screening and Disposition' auto-text or other screening tool that meets IUH Infection Prevention screening guidelines.
- B.** If patient screens positive for COVID-19 symptoms, evaluate patient's indications for outpatient testing.
- C.** If patient is confirmed as meeting one or more of the indications for outpatient testing, confirm patient's IUHP provider by confirming the PCP listed in the Cerner Banner Bar and/or by confirming PCP in Clinical Notes.
- D.** Place the Cerner COVID-19 order as follows:
  - Search for and select the 'COVID-19' order.
  - In the 'Ordering Physician' window, complete the following:
    - Search for and select the patient's IUHP established PCP as the ordering provider
    - Select the 'Order Communication' type = 'Protocol Sign Req'd'
  - In the 'Order Details' window, complete the following:
    - Select 'Specimen Type' = 'Nasopharyngeal'
    - Select 'Nurse Collect' = 'No'
    - Select 'Patient Type' = 'Outpatient'
    - Select 'Order for Future Visit' = Yes
  - Add diagnosis = "Suspected COVID-19 virus infection"
  - Sign the order
- E.** Call the COVID-19 Scheduling line at 317-963-0242 to speak to the centralized Hub RN/MA who will schedule the appointment and provide the address for the remote testing location.
- F.** Inform the patient of the date and time of the appointment as well as the address for the IUH remote testing location.
- G.** Complete encounter documentation per standard documentation process.
- H.** The COVID-19 result will route to the provider's "Results to Endorse" folder in Message Center.
- I.** The PCP or nursing delegate will contact the patient with results and provide care guidance.

**VI. AUTHORIZATION SIGNATURE(S)**

<i>Greg Kiray, MD (eSig)</i>	<i>4/13/20</i>
<b>Gregory Kiray</b>	<b>Date</b>
<b>Chief Medical Officer and Medical Director, Quality</b>	
<i>Kevin Gebke, MD (eSig)</i>	<i>4/13/20</i>
<b>Kevin Gebke</b>	<b>Date</b>
<b>Chair, Primary Care and Community Medicine</b>	
<i>Missy Hockaday, MSN, ACNP-BC, TCRN (eSig)</i>	<i>4/13/20</i>
<b>Melissa Hockaday</b>	<b>Date</b>
<b>Chief Nursing Officer</b>	

**VII. EFFECTIVE DATES**

<p style="text-align: center;"><b>PROTOCOL EFFECTIVE FROM    4/13/20 to 4/12/21</b></p> <p style="text-align: center;">Date                      Date</p> <p style="text-align: center;"><i>(Effective period must not exceed ONE YEAR)</i></p>
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