

UMMHC COVID-19 SURVEILLANCE TESTING FOR INPATIENTS

This is a temporary practice and will change as recommended

“To maximize the safety of our caregivers and patients UMMHC will test all patients for COVID-19”

Population	Asymptomatic Patients Who Are Being Admitted
PPE During Testing	*Level A (Fit Tested N95 or PAPR, face-shield or goggles, blue plastic gown, gloves)
Test Location	Patient test will be performed in the ED or on the floor if not admitted through the ED
Bed Assignment	In ED, patient will be in a room but does not require strict airborne isolation precautions. Patients will NOT be held in the ED while awaiting test results. If patient test result is positive, contact BEDS to facilitate transfer to an appropriate room
EMR Order	COVID-19 PCR for Surveillance of Asymptomatic Patient
EMR Infection Flag	Infection: COVID-19 Surveillance until test results (flag will fall off automatically if negative)
Precautions	**PPE: Standard precautions (including surgical mask) with goggles/face shield. If test is negative follow Standard Precautions (just surgical mask)
EMR Precautions Flag	Isolation: COVID-19 Surveillance Precautions - must be manually removed by provider once test results

Scenario- Asymptomatic Patients Who Are Being Admitted

Patient presents to the ED with an unstable ankle fracture. Patient is afebrile and does not exhibit any symptoms of COVID-19. The patient will be swabbed in the ED prior to being admitted to a floor bed. Patient will be assigned a bed prior to test results.

Rationale: A small number of patients do not exhibit any symptoms and may be positive for COVID-19

Population	Symptomatic Patients Being Admitted
PPE During Testing	*Level A (Fit Tested N95 or PAPR, face-shield or goggles, blue plastic gown, gloves)
Test Location	Patient test will be performed in the ED or on the floor if not admitted through the ED
Bed Assignment	Will be admitted to appropriate inpatient room (negative pressure if available)
EMR Order	Rapid COVID-19 NAT (ED Only) OR COVID-19 PCR, NP/OP Swab
EMR Infection Flag	Infection: COVID-19 - Suspected infection until test results
Precautions	Strict Airborne/Contact/Negative Pressure Room until Testing Algorithm is complete. Refer to the “Management of Hospitalized Persons Under Investigation for COVID-19” PPE: *Level B N-95, goggles or face-shield, gloves and gown Patient to wear mask and stay in room as much as possible
EMR Precautions Flag	Isolation: Contact, Strict-Airborne/Negative Pressure Room

Scenario- Symptomatic Patients Being Admitted

Patient presents to the ED with complaints of persistent fever, malaise and cough. COVID-19 PCR, NP/OP Swab order will be placed and patient will be swabbed in the ED. Patient will be on Strict Airborne/Contact/Negative Pressure precautions and may be admitted to an appropriate room (negative pressure room). Test results will determine future precautions and room assignment.

UMMHC COVID-19 SURVEILLANCE TESTING FOR INPATIENTS

Population	Testing of Admitted Patients with <i>New</i> Concern for COVID-19
PPE During Testing	*Level A (Fit Tested N95 or PAPR, face-shield/goggles, blue plastic gown, gloves) If in semi-private room remove roommate if possible. If not able to remove, mask roommate and pull curtain while performing swab
Test Location	Performed on the inpatient floor
Bed Assignment	Roommate will be transferred to a private room; PUI will be transferred to first available negative pressure room.
EMR Order	COVID-19 PCR, NP/OP Swab
EMR Infection Flag	Infection: COVID-19 - Suspected infection until test results
Precautions	Strict Airborne/Contact/Negative Pressure Room until Test Results are Available PPE: *Level B N-95, goggles or face-shield, gloves and gown
EMR Precautions Flag	Isolation: Contact, Strict-Airborne/Negative Pressure Room

Scenario- Testing of Admitted Patients with New Concern for COVID-19

Patient presented with abdominal pain to the ED and the original Surveillance COVID-19 swab was negative. It has been 4 days since being admitted and the patient has become febrile and has developed a cough. The provider will order COVID-19 PCR, NP/OP Swab. Strict Airborne/Contact/Negative Pressure Room Precautions will be put in place. If in a semi-private room, the roommate will be transferred to a private room as soon as possible.

UMMHC COVID-19 SURVEILLANCE TESTING FOR INPATIENTS

Population	Asymptomatic Patients with In-hospital Exposure to COVID-19
PPE During Testing	*Level A (Fit Tested N95 or PAPR, face-shield/goggles, blue plastic gown, gloves)
Test Location	Performed on the inpatient floor, private room if possible
Bed Assignment	If in a semi-private room with another patient who tests positive for COVID-19, then patient will be moved to a private room until discharge or minimum 14 days observation for symptoms <u>Patient will be tested approximately 5-7 days after initial exposure</u> If patient test result is positive, then contact BEDS to facilitate transfer to a negative pressure room
EMR Order	Private Room for COVID-19 exposure (no symptoms) AND COVID-19 PCR for Surveillance of Asymptomatic Patient
EMR Infection Flag	Infection: COVID-19 exposure (no symptoms) - expires in 14 days Infection: COVID-19 Surveillance - starts once testing is ordered until test results
Precautions	**PPE: Standard precautions (including surgical mask) with goggles/face shield. If test is negative follow Standard Precautions (just surgical mask)
EMR Precautions Flag	Isolation: COVID-19 Surveillance Precautions - must be manually removed by provider once test results Isolation: Private room for COVID-19 exposure (no symptoms) - must be manually removed by provider at 14 days if still in hospital

Scenario- Asymptomatic Patients with In-hospital Exposure to COVID-19

Patient in bed A develops symptoms of COVID-19; patient gets swabbed and transferred to negative pressure room. For the patient in Bed B, the provider will order "Private Room for COVID-19 Exposure (no symptoms)" AND "COVID-19 PCR for Surveillance of Asymptomatic Patient" order timed 5-7 days after initial exposure to the patient in Bed A. This will flag the patient as needing a private room due to exposure to COVID positive patient and require surveillance precautions until discharge, a minimum of 14 days of observation for symptoms.

Population	Patients Requiring COVID-19 Testing Prior to Discharge
PPE During Testing	*Level A (Perfect fit N95 or PAPR, face-shield/goggles, blue plastic gown, gloves)
Test Location	Performed on the inpatient floor
Bed Assignment	Patient can remain in their room Please also refer to "UMMMHC Guide for Discharge of the COVID Positive Patient" If patient test result is positive, contact BEDS to facilitate transfer to an appropriate room
EMR Order	COVID-19 PCR for Surveillance of Asymptomatic Patient
EMR Infection Flag	Infection: COVID-19 Surveillance until test results
Precautions	**PPE: Standard precautions (including surgical mask) with goggles/face shield. If test is negative follow Standard Precautions (just surgical mask)

Scenario- Patients Requiring COVID-19 Testing Prior to Discharge

Patient presented to the ED with a fractured left ankle and original Surveillance COVID-19 swab resulted as negative. The patient was consulted by physical therapy and recommended inpatient physical therapy. The accepting facility requires a negative COVID-19 result prior to transfer. COVID-19 PCR for Surveillance of Asymptomatic Patient will be ordered.

UMMHC COVID-19 SURVEILLANCE TESTING FOR INPATIENTS

*Mask Level guide

Level	Mask definition
Level A	N 95 mask that was supervised fit checked or fit tested
Level B	N 95 supervised fit checked mask, deemed best fit as there may be small air leaks
Level C	Surgical Mask

** Clinical circumstances may require additional PPE, especially for undifferentiated patients in the ED who are still being evaluated and not yet tested. Any concerns about excessive PPE use should be escalated to departmental leadership.

What to do if a patient refuses surveillance testing

If a patient refuses surveillance testing:

1. Clinical team should emphasize the value of surveillance testing with the patient.
2. If patient continues to refuse surveillance testing, clinical team escalates this to Command Center
3. Command Center team will ensure no other choices are possible (e.g. oropharyngeal sampling)
4. If no solution for surveillance testing is available then patient will be treated as a PUI with COVID PPE during their hospitalization