

INTERIM OUTPATIENT CLINIC AND OUTPATIENT FACILITIES RECOMMENDATIONS

- 1) Signage- Have a sign at your front door directing patients with a fever or respiratory symptoms to immediately put on a surgical mask. Direct them to immediately let a healthcare team member know of **ANY** travel history in the last 14 days.
- 2) Have surgical masks and hand sanitizer immediately available upon arrival.
- 3) Train staff on necessary steps and questions.
- 4) Mask staff and maintain at least 6 feet distance from the patient when evaluating and managing patients with suspected COVID-19.
- 5) Screen patients with fever and/or respiratory symptoms for travel history.
 - a. Have the front desk personnel review the patients travel history
 - b. Determine if the patient meets the recent criteria for a person under investigation (PUI. Have updated guidance printed and readily available to staff at https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html

YES meets PUI criteria

Direct patient to be evaluated at an emergency department. Assist the patient or instruct the patient in calling ahead to notify the emergency department they are coming.

NO patient does not meet PUI criteria

Practice standard precautions for caring for patients with respiratory viral illness.

- Have the patient wear a mask.
- Educate on hand hygiene and cough etiquette
- Clean and disinfect surfaces

Patients with fever and/or respiratory symptoms and NO concerning travel or exposure history DO NOT need to be seen in the emergency department (unless medically necessary.) This would overwhelm the emergency departments and inpatient health care symptoms.

This is interim guidance and recommendations will likely change if COVID-19 has sustained community spread.