

Pre-Triage/Triage Screening Criteria for ED/UCC/EMS/Obstetrical nurses, clerks, midwives, physicians

This document is intended to identify COVID-19 symptoms. The initial pre-screening at triage will screen for ILI and GI symptoms. Expanded symptoms do not require isolation/Contact and Droplet precautions. The expanded screening may be performed by the primary care nurse.

A. Triage nurse instructions:

Screen all patients for **ANY** of the following symptoms **within the last 7 days**:

COVID-19 Core Respiratory Symptoms (new or worse):

- Cough
- Fever/chills/rigors:
 - Adults >37.8°C (reported or documented)
 - Pediatrics ≥38.0°C (reported or documented)
- Shortness of breath, increased O2 requirements, difficulty breathing
- Sore throat/painful swallowing
- Runny nose/nasal congestion

COVID-19 Gastrointestinal (GI) Symptoms (new or worse):

- Vomiting **must have had 2 or more episodes of**
- Diarrhea **vomiting and/or diarrhea**

Seasonal ILI Symptoms (see below), plus one of the following:

- Immunocompromised, critical respiratory failure, or outbreak investigation
 - Adults: New or changed cough **AND** fever (38.0°C or higher) **AND** any of the following: sore throat, joint pain, muscle ache, extreme exhaustion/weakness
 - Pediatrics: cough **OR** sneezing **OR** runny nose

Screen all patients for **ANY** of the following Risk Factors

- COVID-19 test; positive COVID-19 within the last 14 days or currently pending
- Had close contact* with a confirmed or probable case of COVID-19 within 14 days before illness onset
- Had close contact* with a person with acute respiratory illness who has travelled anywhere outside of Canada in the 14 days before their illness
- Travelled anywhere outside of Canada within the last 14 days
- Had laboratory exposure to biological material known to contain COVID-19 virus within the last 14 days

- Associated with any healthcare unit/facility, congregate living, or other (e.g. workplace or social gathering) COVID-19 outbreak/cluster
- Direction has been given for the patient to remain on Contact & Droplet Precautions

*A close contact is someone who:

- Provided care for the individual, including healthcare workers, family members or other caregivers, or who had other similar close physical contact with the person without consistent and appropriate use of personal protective equipment (PPE),

OR

- Lived with or otherwise had close prolonged contact which may be cumulative, i.e., multiple interactions for a total of 15 min or more and within two metres with a case without consistent and appropriate use of PPE and not isolating,

OR

- Had direct contact with infectious body fluids of a someone who has tested positive for COVID-19 (e.g., *shared cigarettes, glasses/bottles, eating utensils*) or was coughed or sneezed on while not wearing recommended PPE.

If positive for any of the above symptoms and/or risk factors these must be documented within the patient care record. Immediately have the patient perform hand hygiene and put on procedure mask and implement Contact & Droplet Precautions. For pediatric patients who cannot tolerate a mask, cover them with a blanket or have them cuddle with care provider to minimize exposure to others.

- Follow Point of Care Risk Assessment and Routine Practices and Respiratory (ILI) Algorithm <https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-acute-care-pcra.pdf>

If Yes to ANY of the symptoms and/or risk factors:

- **Staff involved in patient assessment and transport should immediately initiate Contact and Droplet precautions.**
- If available, place patient in a single room with hard walls, a door and dedicated toilet or commode and implement Contact and Droplet precautions as soon as possible.
 - If patient requires an Aerosol Generating Medical Procedure (AGMP), place patient in negative pressure isolation room if available (not required)
 - If no single room with hard walls and a door is available, contact IPC and/or follow site specific processes.

If questions regarding patient isolation contact IPC. Follow site practice regarding notification of person in charge.

Physician instructions

- For patients whom pre-triage/triage have screened as positive for COVID-19 symptoms/risk factors, don Contact & Droplet PPE (i.e., procedure/surgical mask, eye/face protection, gown, gloves) before assessing patient;
- Complete patient history (including confirming travel and exposure history) and physical exam;
- Consider COVID-19 testing if the patient has new or worse, and unexplained symptoms from the Expanded Symptoms list:
 - Headache
 - Myalgia (muscle pain)/arthralgia (joint pain)
 - Fatigue/extreme exhaustion
 - Nausea/sudden loss of appetite
 - Altered mental status
 - Loss of/change to sense of smell (anosmia)/taste (dysgeusia)
 - Conjunctivitis/red eye/chemosis (conjunctival edema)
 - Any additional symptoms at clinician's discretion (e.g. skin manifestations such as "COVID toes")
- **If there is a plausible, alternate (non-COVID-19) clinical diagnosis AND patient does not have any risk factors as determined by the MRHP, COVID-19 testing is not required.**
- **Patients who meet the expanded symptom criteria and who do not have other risk factors do not require Contact and Droplet precautions.**
- All patients being admitted to hospital with symptoms consistent with COVID-19 should be tested

All symptoms/risks will be communicated to the receiving unit on admission

A nasopharyngeal or throat swab, collected under strict Contact and Droplet precautions and transported in viral transport medium, should be submitted. For questions on test appropriateness and information on TDG B shipping requirements, call the ProvLab Virologist on-call (VOC) in Edmonton (780-407-8822) or Calgary (403-333-4942).

- COVID-19 testing requests can be made through your site's clinical information system or by submitting respiratory specimens with the Serology and Molecular Testing Requisition (<https://www.albertahealthservices.ca/frm-20676.pdf>) and writing "COVID-19" in the bottom box (Specify Other Serology and Molecular Tests).
- Presenting symptoms, date of symptom onset and travel history, including country of travel and return date, **MUST be included.**
- Advise all patients and close contacts to follow public health directions to self-isolate.

Self-isolation recommendations are available here: www.alberta.ca/isolation.aspx