Lifespan Algorithm to Assess ED/Inpatients with symptoms suggestive of respiratory viral infection: cough, fever, sore throat, shortness of breath

Note: COVID-19 can present w/other symptoms: loss of or reduced smell and/or taste, or GI symptoms-nausea, vomiting, diarrhea

Patient should be masked, if unable to do so ask to cover their mouth with facial tissue, hands cleaned with Purell
If outpatient setting, see outpatient algorithm on intranet

Initiate Modified Contact & Droplet Precautions (mask, eye protection, gown & gloves) *and* give mask to patient to wear when anyone enters their room

If likely to be *discharged*: consider testing for influenza and consider COVID test if: a) no prior COVID + test; b) immunocompetent and >90 days since previously + COVID-19 test; or c) immunocompromised even if <90 days since last + COVID-19 test
If being *admitted*, order Respiratory Pathogen Panel 2 (RP2; includes COVID-19; does not include pertussis)
For any patient requiring an aerosol-generating procedure (AGP): Place in negative-pressure room if available, if not available, use a portable HEPA filter (priority for patients with confirmed COVID-19 receiving an AGP); wear gown, gloves and use a CAPR or N95 and eye protection

COVID-19 Positive

Immunocompromised, COVID-19 positive & previous positive in last 90 days

Continue Modified Contact/Droplet Precautions

See separate algorithm for when to discontinue Modified Contact/Droplet Precautions

RP2 negative or RP2 not ordered

RP2 positive for virus other than COVID-19

Immunocompetent, COVID-19 positive & previous positive in last 90 days

Discontinue Modified Contact/Droplet Precautions and order Contact & Droplet Precautions

Asymptomatic but recent COVID-19 exposure last 14 d unmasked, <6ft, >15min or was a household member

Continue standard Contact/Droplet Precautions for 14 days from last exposure
If any symptoms develop test for COVID-19 and follow this algorithm

Patients admitted with symptoms of respiratory viral infection and who have *positive* testing for influenza or SARS Co-V2 (ie, COVID-19) should be in a private room; if cohorting necessary, cohort with a patient who has positive testing for the same virus. Patients with confirmed influenza (w/o COVID-19 co-infection) remain on isolation precautions until 7 d after symptom onset or 24 hrs after fever & respiratory symptoms resolved, whichever is longer. For other *human* respiratory viruses (w/o COVID-19 co-infection) remain on isolation precautions until fever & respiratory symptoms resolved. Contact infection control dept to discuss discontinuation of isolation precautions in patients with influenza or *human* respiratory viruses (w/o COVID-19) co-infection in whom it is difficult to determine if symptoms due to viral infection have resolved (e.g., concomitant reactive airway disease or who remain intubated).