INTERIM GUIDANCE PRIOR TO FLU SEASON IN RI - 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

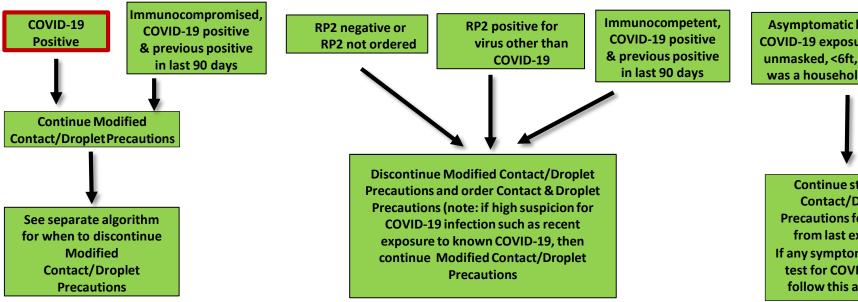
Patient should be masked, if unable to do so ask to cover their mouth with facial tissue, hands cleaned with Purell If outpatient setting, see outpatient algorithm on intranet

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



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 or other human respiratory viruses w/o COVID-19 co-infection, should remain on isolation precautions until 7 days after symptom onset or until 24 hours after fever and respiratory symptoms have resolved, whichever is longer. For discontinuing 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), then contact infection control dept to discuss discontinuation of isolation precautions.