

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

**COVID-19
Positive**

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

**RP2 negative or
RP2 not ordered**

**RP2 positive for
virus other than
COVID-19**

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

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

**Continue Modified
Contact/Droplet Precautions**

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

**Discontinue Modified Contact/Droplet
Precautions and order Contact & Droplet
Precautions (note: if high suspicion for
COVID-19 infection such as recent
exposure to known COVID-19, then
continue Modified Contact/Droplet
Precautions**

**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.