Approach for COVID-19 positive patients at skilled nursing facilities, long-term care facilities and other similar institutions
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CoVID-19 positive patient

One or more signs of severe disease:
- Short of breath
- Chest pain
- Dizzy or lightheaded
- Severe vomiting or diarrhea

Is aggressive inpatient treatment consistent with goals of care

Patient should go to the hospital via ambulance
- If hospital evaluation is needed, contact ATC at xxx-xxx-xxxx to assess need for Emergency Department Evaluation or Direct Admission
- Facility to notify ATC of COVID positive status
- Ensure patient is masked and in room with door closed ASAP

If SNF COVID unit is unavailable or at capacity consider transfer to SMH via ambulance if consistent with resident’s goals of care.
Facility to notify ATC of patient arrival and COVID positive status

Facility has capacity to safely cohort COVID positive patient?

Transfer to SNF COVID unit

Remain at facility in modified droplet precautions

Remain in isolation for at least 14 days
AND
At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications
AND
improvement in respiratory symptoms (e.g., cough, shortness of breath)
AND
2 negative NP swabs obtained at least 24 hours apart*

Release from isolation

Reassess in 72 hours

Precautions:
- Place all positive residents and residents requiring screening for COVID in modified droplet isolation precautions
- Resident-to-resident interaction should be restricted
- Use of facemasks for all healthcare personnel caring for COVID + patients or PUI for COVID
- If available consider testing of all residents and cohorting positive patients in designated units within the facility or a separate COVID specific facility

*SNF staff orders end of isolation COVID-19 PCR

* Last modified on 4/9/20 Workflow may be modified in the future as the COVID pandemic evolves