Lifespan Algorithm to Assess Adult Patients with symptoms suggestive of respiratory viral infection (cough, or fever, or sore throat, or shortness of breath). Note: other symptoms may be associated with loss of or reduced smell and/or taste or GI symptoms (nausea, vomiting, diarrhea)

Patient should put on mask, if unable to do so ask to cover their mouth with facial tissue, then clean hands with Purell

If outpatient setting, see outpatient algorithm on intranet

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

For any patient requiring aerosol-generating procedure - place in negative-pressure room (if available), use a CAPR (if available), use N95 and face shield if CAPR unavailable; if negative-pressure room unavailable, portable HEPA filter priority is for confirmed COVID19 patient for aerosol-generating procedure

Priority for testing (in rank order):
- ICU/Critical care patient
- Non-ICU hospitalized patient with increasing oxygen requirements OR high risk: age 65 years or older, lung disease (including asthma and COPD), cardiovascular disease (including HTN), diabetes, cancer/immunosuppression, pregnant
- Healthcare worker and especially those with direct patient care responsibilities and/or who may require hospitalization

Process: NOT orderable by provider. Lab orderable test only by Microbiology Lab. Required: DOH lab form, RPP order, specimens must be registered, and hand delivered to the lab in labeled COVID collection biohazard bag priority

COVID19 & RPP testing

<table>
<thead>
<tr>
<th>RPP negative, COVID-19 results negative</th>
<th>RPP positive, COVID-19 results negative</th>
<th>COVID-19 results positive</th>
<th>RPP positive, COVID-19 results pending</th>
<th>RPP negative, COVID-19 results pending</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discontinue Modified Contact &amp; Droplet Precautions unless unequivocal evidence of another medical reason to explain patient’s condition *; Order Contact &amp; Droplet Precautions</td>
<td>Known contact with confirmed COVID-19 patient in last 14 days</td>
<td>COVID-19 not ordered or not on differential</td>
<td>Continue Modified Contact &amp; Droplet Precautions</td>
<td>Continue Modified Contact &amp; Droplet Precautions until discontinued by Infection Control</td>
</tr>
</tbody>
</table>

*For IPD: Patients with symptoms suggestive of respiratory viral infection who require hospitalization 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 influenza or for SARS Co-V2 (ie, COVID-19). Patients with influenza or other human respiratory viruses detected on positive RPP should remain on isolation precautions until 7 days after onset of symptoms 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 detected on positive RPP 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), obtain an RPP (or rapid influenza testing if had influenza), if negative, remove from isolation, if positive, contact infection control dept to discuss discontinuation of isolation precautions.