

Coronavirus Disease 2019 (COVID-19) Physician Check List: Evaluating Patients Who May Have COVID-19 (the illness caused by SARS-CoV-2)

The purpose of this checklist is to provide step-by-step guidance for evaluating patients who may have COVID-19, with the goal of preventing the spread of infection and expediting an investigation with the Los Angeles County Department of Public Health (LAC DPH) and testing through the Public Health Laboratory (PHL).

**Medical providers needing assistance with diagnosis and infection control can call:
LAC DPH Acute Communicable Disease Control (ACDC)**

(213) 240-7941 (8:00am – 5:00pm Monday to Friday) (213) 974-1234 (After Hours Emergency Operator)

Step 1. Identify patients who may have a febrile respiratory illness.

- 1a. Place visible signage requesting visitors with a fever and recent international travel to immediately notify a healthcare staff (COVID-19 [travel alert poster](#) in 9 languages on ACDC COVID-19 website).
- 1b. Screen patients at triage for signs or symptoms of febrile respiratory illness and if present, the patient should wear a surgical mask and be placed in a private room with the door closed or separated from others by at least 6 feet.
- 1c. Ensure all healthcare workers interacting with the patient don a surgical mask.

Step 2. Does the patient meet the LAC DPH COVID-19 Evaluation Criteria below?^{1,2}


Clinical Features	&	Epidemiologic Risk
Fever or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	AND	Any person, including health care workers, who has had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset
Fever and signs/symptoms of a community-acquired lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization	AND	A history of travel from affected geographic areas (see below) within 14 days of symptom onset
Fever with severe acute community acquired lower respiratory illness (e.g., pneumonia, ARDS) requiring ICU care without alternative explanatory diagnosis. (Must have negative rapid, influenza/ RSV tests; and a negative molecular respiratory panel if this testing is available at the facility)	AND	No source of exposure has been identified

Affected Geographic Areas* with Widespread or Sustained Community Transmission: China, Iran, Italy, Japan, and South Korea *Last updated February 28, 2020*

*Affected areas are defined as geographic regions where sustained community transmission has been identified. Relevant affected areas will be defined as a country with at least a CDC Level 2 Travel Health Notice. See all [COVID-19 Travel Health Notices](#).

¹. Refer to the [CDC Guidance for Health Professionals](#) for definitions of fever, hospitalization, close contact, and laboratory-confirmed: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>

². The LAC DPH COVID-19 evaluation criteria differ from the CDC’s and are intended to prioritize SARS-CoV2 testing in a setting of limited local testing capacity. Providers should keep in mind that these evaluation criteria were developed to identify patients at the highest risk for COVID-19.

IF NO then **STOP**  here. Continue evaluation for alternative diagnosis as clinically indicated.

- Patients with milder presentations who do not meet the current COVID-19 evaluation criteria should be instructed to follow [home care instructions](#) including, stay at home until at least 24 hours after the resolution of febrile illness without the use of fever-reducing medicines and to phone their provider if symptoms worsen.

IF YES and patient meets PUI criteria, ensure that patient is in a private room with door closed (ideally negative pressure airborne isolation-room).

Step 3. Implement the additional following infection control procedures for healthcare workers:

- 3a. Standard precautions
- 3b. Contact precautions (gloves, gown)
- 3c. Eye protection
- 3d. Airborne precautions (e.g., N95 mask or PAPR)

Step 4. Immediately contact and report patient to the LAC DPH ACDC:

- 4a. Call LAC DPH and an on-call physician will advise on the next steps.
(213) 240-7941 from 8:00am-5:00pm Monday to Friday and (213) 974-1234 (After Hours Emergency Operator)
- 4b. **DO NOT collect or send specimens to the Public Health Lab (PHL) until the case is discussed and testing is approved by DPH.**

Step 5. Collect specimens for laboratory diagnosis by the Public Health Lab.

Collect one upper respiratory specimen from the patient and one lower respiratory specimen (for patients with productive cough) as soon as possible regardless of symptom onset, as follows:

- 5a. **Upper Respiratory**
 - **Nasopharyngeal swab AND oropharyngeal swab (NP/OP swab)** Use a synthetic fiber swab with plastic shaft. Do not use calcium alginate swabs or swabs with wooden shafts. Place swab in a sterile tube with 2-3 ml of viral transport media Do NOT combine NP/OP swab specimens; keep swabs in separate viral transport media collection tubes.
 - **Nasopharyngeal wash/aspirate or nasal aspirate:** 2-3 mL in a sterile, leak-proof, screw-cap sputum collection cup or sterile dry container.
- 5b. **Lower Respiratory (for patients with productive cough)**
 - **Bronchoalveolar lavage or tracheal aspirate:** 2-3 mL in a sterile, leak-proof, screw-cap sputum collection cup or sterile dry container.
 - **Sputum:** Have the patient rinse the mouth with water and then expectorate deep cough sputum directly into a sterile, leak-proof, screw-cap sputum collection cup or sterile dry container.

NOTE:

- It is imperative that NP and OP swabs are placed in viral transport media, such as ones used to collect specimen NP swabs for influenza testing (see figure to the right). Each swab must be placed into a separate vial
- Improper collection, such as placing swabs in bacterial culture media, will void the specimen and delay testing.



TRANSPORT INFORMATION

- Refrigerate specimens at 2-8°C and transport on cold pack.
- Complete a PHL H-3021 Test Requisition form for *each specimen*. Please use the prefilled LAC DPH test request forms for COVID-19 testing available on the [DPH COVID-19 website](#). Note there are two different forms:
 - Form to be used for NP swabs that request testing for SARS-CoV-2 (formerly known as novel coronavirus-2019) and Biofire panel
 - Form to be used for all other specimens that request testing for SARS-CoV-2
- Test request forms **MUST** include full patient name, date of birth, hospital medical record number, sex, date/time collected, specimen source, and the hospital where the specimen was collected.
- Upon approval by LAC DPH, the PHL will assist with courier pick up. Specimens that arrive at PHL without prior DPH approval may experience significant delays in testing. **If specimens cannot be collected at the clinic, do not refer the patient to another facility to obtain specimens (i.e., commercial lab, other medical clinic). Notify Public Health.**

□ Step 6. Continue medical evaluation and empiric treatment for other causes of respiratory infection or pneumonia as clinically indicated.

All patients with suspected COVID-19 should also be assessed for common causes of respiratory infection and pneumonia as clinically indicated.

□ Step 7. Do not discharge patient without prior approval from LAC DPH.

Continue patient isolation and infection control procedures as above.