

Health PEI

Inpatient Screening Tool for Suspected or Confirmed Covid-19

Updated April 18, 2023

Patient Label

Screening Questions & Precautions Required

To be completed by the Most Responsible Healthcare Provider in collaboration with the Health Care Team. *The highlighted Yes or No boxes are the questions which have been updated and changed.*

	<i>If the answer is "Yes" to any of the below questions , continue precautions until the longest isolation period is completed.</i>
1. <input type="checkbox"/> Yes or <input type="checkbox"/> No	Has the patient had COVID in the past 60 days and has recovered? COVID illness is defined as: <ul style="list-style-type: none">• A positive test (at home test, ID Now or PCR) or• Symptoms of COVID with close contact to a person with a positive COVID test No Isolation Required
2. <input type="checkbox"/> Yes or <input type="checkbox"/> No	Is the patient currently COVID-19 positive? If YES: Droplet-contact precautions. If AGMP, use Airborne-contact. Accommodation: Private Room. Can be cohorted with other known positives. Consult infection control for options Isolate until deemed recovered by the healthcare team. Duration of isolation: See In patient Isolation table
3. <input type="checkbox"/> Yes or <input type="checkbox"/> No	Is the patient a close contact of a person currently positive with COVID-19? If Yes: Droplet-contact precautions. If AGMP, use Airborne/Contact precautions. Accommodation: Private Room. Observe patient for symptoms of COVID-19 Duration of precautions: 96 hours from the date the patient was potentially exposed. If patient remains asymptomatic, precautions may be discontinued. Monitor for symptoms and re-isolate and test if symptoms develop.
4. <input type="checkbox"/> Yes or <input type="checkbox"/> No	Is the patient symptomatic with COVID-19 symptoms (without an alternative explanation), <u>has not</u> had COVID in the last 60 days and has a pending COVID-19 swab? If Yes: Droplet-Contact precautions. If AGMP, use Airborne-contact precautions. Precautions may be discontinued if COVID swab negative and patient deemed no longer infectious by Most Responsible Physician (MRP). Accommodation: Private Room
5. <input type="checkbox"/> Yes or <input type="checkbox"/> No	Is the patient symptomatic with COVID-19 symptoms (without an alternative explanation) and <u>has had</u> COVID in the last 60 days ? If Yes: Droplet-Contact precautions. If AGMP, use Airborne-contact precautions. Precautions may be discontinued when symptoms resolved and deemed recovered by the healthcare team. Accommodation: Private Room.
6. <input type="checkbox"/> Yes or <input type="checkbox"/> No	Is the patient going to be transferred to another facility and covid-19 screening swabs have been requested prior to transfer? No precautions required