Indiana State Department of Health

Hospital to Post-Acute Care Transfer COVID-19 Assessment

INSTRUCTIONS: All hospitalized patients should be assessed for COVID-19 prior to transfer to post-acute care. This tool should be used to document an individual's medical status related to COVID-19 and to facilitate communication between the hospital, emergency medical services, and the post-acute care organization. This document must be signed-off by the physician or advanced practice provider who completes the clinical assessment. **CHECK THE BOX FOR EACH OF THE CRITERIA APPROPRIATE TO THE PATIENT'S STATUS.**

Patient Name:	**Transferring Facility:**
	Post-Acute Care Receiving Organization:

Is COVID-19 Testing Clinically Warranted?

☐ **YES,** Patient tested for COVID-19

☐ **NO**, test was **NOT INDICATED** per CDC testing criteria category. **MAY TRANSFER. (Category 1)**

Indication for Testing:

List primary COVID-19 symptoms for this patient: _____

☐ **Positive Test**
Date/Time: _____

Results Pending
(Category 3) Patients will **not** be transferred to an LTCF until test results are confirmed. **Start over when test confirmed.**

☐ **Negative Test** Date/Time: _____
(Category 2) If testing is not in accordance with CDC test-based strategy for discontinuation of precautions, then precautions should continue after transfer per CDC non-test based strategy noted below.

☐ **Results Pending Transfers ONLY as directed by ISDH during declared surge**

→ Transfer to a facility with adequate PPE and isolation status **when precautions are required**.

MAY TRANSFER without precautions when non-test based strategy met

Does patient meet criteria outlined in *CDC Interim Guidance for Discontinuation of Transmission-Based Precautions and Disposition of Hospitalized Patients with COVID-19?*

☐ **(Category 4)** ***YES***

☐ **(Category 5)** ***NO***

MAY TRANSFER

Transfer to a **COVID (+)** facility or a facility with adequate PPE and isolation status

Precautions should continue after transfer per CDC Interim Guidance: (non-test based strategy):

- 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**
- At least 7 days have passed since symptoms first appeared.
- When Transmission-Based Precautions have been discontinued, but the patient has persistent symptoms from COVID-19 (e.g., persistent cough), they should be placed in a single room, be restricted to their room, and wear a face mask during care activities until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer.

Date Symptoms Started: _____

Clinical Assessment Completed by (staff name, date/time):
Accepted for Transfer by (LTCF staff name, date/time):

Last Update: _____

Copy to Hospital, LTCF, EMS