COVID-19 BEST PRACTICES

COVID-19 Change Package #2
Patient Triage and Care Plan Development

OBJECTIVE: The COVID-19 Change Package #2 is intended to provide a stepwise workflow approach for triaging patients suspected of COVID-19 and to develop a care plan for those patients.

Overview of Steps:

1. Assess level of risk for COVID-19
2. Assess for the presence of COVID-19 symptoms
3. Determine which scenario best correlates with the patient's plan of care and follow steps
4. Document the plan of care and follow-up with the patient as necessary
5. Send care plan to patient's provider(s)

STEP 1: Assess Level of Risk

The patient is classified as high risk if any of the items below are present. The patient is low risk if none of the items below are present.

- Age 65+ years
- People who live in a nursing home or long-term care facility
- Chronic disease such as:
    1. Chronic lung disease or moderate to severe asthma
    2. Serious heart conditions
    3. Immunocompromised including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, prolonged use of corticosteroids
    4. People of any age with obesity (BMI ≥ 40) or certain underlying medical conditions, particularly if not well controlled, such as those with diabetes, chronic kidney disease undergoing dialysis, or liver disease

CDC Resource for complete characteristics of people who are at higher risk: Click here.

STEP 2: Assess Symptoms

Assess the patient's symptoms by patient interview or through the CDC Coronavirus Self-Checker. Symptoms may appear 2-14 days after exposure based on the incubation period of MERS-CoV viruses.

- Fever
- Cough
- Shortness of breath
- **Alarm symptoms:** Consult medical provider if these symptoms or any other severe/concerning symptoms are present.
    - Trouble breathing
    - Persistent pain or pressure in the chest
    - New confusion or inability to arouse
    - Bluish lips or face

CDC Resource for complete list of COVID-19 symptoms: Click here.

The CDC Coronavirus Self-Checker can be used by patients or pharmacy staff members to determine the appropriate level of medical care needed for a patient per the CDC recommendations.
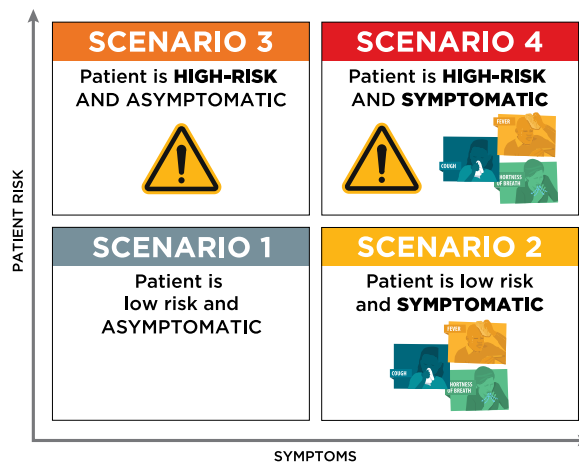
- Access the CDC Coronavirus Self-Checker by clicking **here**.
- Pharmacy staff should consider using the Self-Checker on behalf of the patient if the patient doesn't have good health literacy or is unable to access the internet.

STEP 3: Determine which Scenario Best Correlates with the Patient's Plan of Care and Follow Steps

Use details from Step 1 and Step 2 to assign the patient to a scenario category, which is based on risk level and the presence or absence of symptoms. Assess if COVID-19 testing is appropriate.

Testing location: Assist patients in finding a testing location. There are two potential ways to find a testing location:
1. Contact the local state Department of Health and Human Services (DHHS) to find local testing sites. Click here for a resource.
2. View testing sites by state and county by clicking here.

PATIENT RISK

SCENARIO 3
Patient is **HIGH-RISK** AND ASYMPTOMATIC

SCENARIO 4
Patient is **HIGH-RISK** AND **SYMPTOMATIC**

SCENARIO 1
Patient is low risk and ASYMPTOMATIC

SCENARIO 2
Patient is low risk and **SYMPTOMATIC**

SYMPTOMS

SCENARIO 1: Low Risk, Asymptomatic

SCENARIO 1
Patient is Low Risk and ASYMPTOMATIC

Plan of Care:
1. Testing is not recommended at this time (until tests become more readily available)
2. Recommend prevention strategies
3. Provide patient education about COVID-19 and minimizing the spread of viruses

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SCENARIO 2: Low Risk, Symptomatic

SCENARIO 2
Patient is Low Risk and **SYMPTOMATIC**

Plan of Care:
1. If possible, patient should be tested
   a. If the test result is *positive*, recommend the patient quarantine to minimize contact with others
   b. If the test result is *negative*, other testing may be needed (e.g. strep, influenza A)
      i. Precautions should still be followed until patient is symptom free
      ii. Recommend that the patient quarantine to minimize contact with others
2. Enroll the patient in medication synchronization if not already to minimize trips to pharmacy
   a. Utilize the appointment-based model
      i. Medication review via phone to determine if medications are optimized
3. Provide supportive treatment strategies
   a. OTC product recommendations
   b. Provision of complimentary products when available including hand tissues, soap, hand sanitizer, alcohol-based disinfectant
4. Follow best practices for home or hand delivery to minimize transmission risk for employees
5. Provide patient education about COVID-19 and minimizing the spread of viruses
6. Ongoing monitoring and follow-up—**every 3 days** for positive COVID-19 patients and **weekly** for patients with negative COVID-19 results
   a. Refer patients to primary care provider or to seek immediate medical attention if COVID-19 symptoms are escalating
      i. Emergency warning signs per the CDC: Trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, bluish lips or face (not all inclusive)

SCENARIO 3: High Risk, Asymptomatic

Plan of Care:

1. Testing is not recommended at this time until tests become more readily available
2. Recommend prevention strategies
3. Provide patient education about minimizing spread of viruses
4. Enroll patient in medication synchronization if not already to minimize trips to pharmacy
   a. Utilize the appointment-based model
      i. Medication review via phone to determine if medications are optimized
   b. Ongoing monitoring and follow-up at each medication synchronization appointment and as needed based on clinical status
5. Provide supportive treatment strategies
   a. OTC product recommendations
   b. Provision of complimentary products when available including hand tissues, soap, hand sanitizer, alcohol-based disinfectant
6. Follow best practices for home or hand delivery to minimize transmission risk for employees
7. Provide patient education about COVID-19 and minimizing the spread of viruses
8. Ongoing monitoring and follow-up during each medication synchronization call and as needed based on clinical status
   a. Refer patients to primary care provider or to seek immediate medical attention if COVID-19 symptoms are escalating
      i. **Emergency warning signs per the CDC:** Trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, bluish lips or face (not all inclusive)

SCENARIO 4: High Risk, Symptomatic

Plan of Care:

1. If possible, patient should be tested
   a. If the test result is *positive*, recommend the patient quarantine to minimize contact with others
   b. If the test result is *negative*, other testing may be needed (e.g., strep, influenza A)
      i. Precautions should still be followed until patient is symptom free
      ii. Recommend quarantine to minimize contact with others
2. Enroll patient in medication synchronization if not already to minimize trips to pharmacy
   a. Utilize the appointment-based model
      i. Medication review via phone to determine if medications are optimized
3. Provide supportive treatment strategies
   a. OTC product recommendations
   b. Provision of complimentary products when available including hand tissues, soap, hand sanitizer, alcohol-based disinfectant
4. Follow best practices for home or hand delivery to minimize transmission risk for employees
5. Provide patient education about COVID-19 and minimizing the spread of viruses
6. Ongoing monitoring and follow-up—**every 3 days** for positive COVID-19 patients and **weekly** for patients with negative COVID-19 results
   a. Refer patients to primary care provider or to seek immediate medical attention if COVID-19 symptoms are escalating
      i. **Emergency warning signs per the CDC:** Trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, bluish lips or face (not all inclusive)

STEP 4: Document the Plan of Care and Follow-up with Patient as Necessary

Upon completion of Steps 1-3, pharmacy staff members should edit the care plan template to make it patient- and pharmacy-specific.

The main goal with plan of care is to have a mechanism to document on paper and follow-up with patients as necessary.

- Secondary goal, when possible, is to document a care plan within an eCare Plan platform by utilizing the Medication Related Problem and Intervention Options

  - In the intervention notes of the eCare Plan documentation, you can include relevant information for the COVID-19 encounter. An example includes, but not limited to, copying and pasting the free test (A COVID-19 risk assessment was performed by the pharmacist...) and editing with some of the check box materials from the information above.

- **Note:** No Intervention SNOMED code is associated with "recommendation of testing," but is listed for the purpose of your paper documentation

Click **here** to download
and access the
COVID-19 Care Plan Template

How-To Utilize the COVID-19 Care Plan

1. Print copies of the care plan to keep at workstations within the pharmacy
   - You may also edit the COVID-19 Care Plan within a Word document and make it patient- and pharmacy-specific before printing
2. Complete the care plan for each patient who receives a COVID-19 related encounter
   Workflow Consideration: Have 2 stacks of printed care plans:

   STACK 1: Initiating Care Plan
   a. Patients identified when presenting to the pharmacy at the drive-through or pharmacy pick-up
   b. Patients who are receiving medication synchronization calls by your pharmacy staff can be triaged to receive risk and symptom assessments based on patient factors (e.g., each patient over 65 years old who takes a respiratory condition related medication)

   STACK 2: Follow up
   - Patients who have received a care plan and now need a follow-up phone call (Within the stack, arrange the care plans by Follow-up Date, which is listed in the COVID-19 Care Plan)

3. Fax completed care plan to provider **(See Step 5:** Send Care Plan to Patient's Provider(s)**)**

4. Document the completed eCare Plan within your platform, when possible

STEP 5: Send Care Plan to Patient's Provider(s)

Send the completed care plan to the patient's appropriate healthcare providers [PCP, specialists (e.g., pulmonologist]

- ■ Consider calling the prescriber's office to inform them of the pharmacy's COVID-19 service and fax the care plan immediately afterward
- ■ By sending the patient's care plan, this will help with care coordination and follow-up

Example COVID-19 Care Plan (Based on Scenario 4)

COVID-19 Care Plan	
Patient Name: **Shirley Smith**_____ DOB: 01 / 25 / 1950	Today's Date: _4/6/2020_____ Follow-up Date (if needed): _4/9/2020_____ Additional Follow-up Dates: _____

Risk Level (Check One; Explain High Risk)

☐ Low

☒ High: Patient is 70 years old with COPD and

Hypertension_____

Symptom Assessment (Check Appropriate Boxes)

Asymptomatic   **Symptomatic**
☐ No symptoms   ☒ Fever _100.6 F___
                               ☒ Dry Cough
                               ☒ Shortness of Breath/Wheezing
                               ☐ Additional: _____

COVID Test:

☐ Recommended
☐ Provided at the Pharmacy
☒ Referred to **East 161st Urgent Care**_____
☐ Not recommended at this time

COVID-19 Results:

☐ Positive
☐ Negative
☒ Pending

Enhanced Services Initiated/Provided:

☐ Medication synchronization
☐ Medication reconciliation
☐ Personalized Medication Delivery
☐ Immunization Administered:
_____
☐ Other: _____

OTC/Complementary products provided:

☐ Hand sanitizer
☐ Acetaminophen
☐ Tissues
☐ Thermometer
☐ Other OTC: _____
☐ PPE provided or how to obtain PPE:

_____

A COVID-19 risk assessment was performed by the pharmacist. The patient was instructed to quarantine. Patient education was provided on how to prevent transmission of the virus, such as hand washing, isolation, and coughing into the bend of the elbow or a tissue. The patient was educated on available resources from the CDC.

Additional Notes: None

Medication Related Problem	Intervention
☒ Deficient knowledge of disease process	☒ Development of care plan ☒ Discuss with patient (patient education) ☒ Recommendation of testing