



### COVID-19 CLINIC WORKFLOW STRATEGIES

This document highlights key strategies for managing COVID19 in a population of children. Please follow epidemiologic updates and guidance given by the CDC ([CDC COVID19](#)), the Orange County Health Care Agency ([OCHCA](#)), and the AAP ([AAP COVID19](#)).

#### Triage Level of Care

The vast majority of COVID19 infections in children are mild. These children are best cared for at home. This is the single most important message for families.

**Triage patients over the phone** when being scheduled for an appointment if they have cold symptoms, fevers, recent travel to COVID-19 endemic areas or exposure to someone diagnosed with COVID-19 and direct them accordingly. We recommend that for anyone with possible COVID-19 to remain in their car and not enter the waiting room. Patients with cold symptoms but without a high suspicion of COVID-19 should be triaged to a special sick waiting room or a separate office if you have a multi-office practice.

**Post signs on your office doors** that anyone with cold symptoms, fevers, AND recent travel to COVID-19 endemic areas OR exposure to someone diagnosed with COVID-19 should wait in their car and call the front office for their arrival. A provider should meet them in their car.

**Utilize your phone nurses** to determine if patients calling in with respiratory symptoms can be safely managed at home. You may want to consider utilizing providers for this role if calls become overwhelming.

**Triage providers should use best clinical judgement based on age, severity of illness, and updates on COVID19 epidemiology** to decide when a child needs to be seen in person and where the best location is for that evaluation.

**If triage by phone is not adequate, consider using telehealth platforms for further assessment ([HIPAA Compliant Platform Info](#))**. This can be helpful in assessing respiratory rate and overall work of breathing.

**Inform parents that those most at risk** from COVID19 may be the child's grandparents.

## Consider structural protections for infection

**Consider separate waiting areas** and offices for multi-office practices for sick versus visits.

**Schedule well visits first in the day**, before sick visits, when possible. Consider rescheduling well visits that may not include critical vaccines or other concerns.

**Evaluate patients with possible COVID-19 in the parking lot.** Anyone with respiratory symptoms or fever who enter the office should wear a mask covering their nose and mouth. Anyone at risk for COVID-19 who enters the office should be placed in an isolated room designated for this purpose as quickly as possible. Rooms should be cleaned between patients [according to CDC guidelines](#).

## Follow Recommended Infection Control Protocols in Your Clinic

PPE protection is recommended for providers & staff caring for patients with a high suspicion of having COVID-19, which includes masks, eye protection, gowns and gloves. Due to a shortage of N95 masks, facemasks are an acceptable alternative.

Any provider who develops fever and cough is recommended to immediately stop working until fever has resolved for 24 hours. Providers who are concerned that they may have COVID-19 due to symptoms or suspected exposure to COVID-19 are encouraged to talk with their occupational health provider or OCHCA at 714-834-8180 to discuss potential COVID-19 testing.