

YNNH COVID-19 DRIVE – UP TESTING PROTOCOL

Please review the information below about outpatient COVID-19 Testing.

Dear Provider:

The Yale New Haven Health System will be opening 'Outdoor COVID-19 Specimen Collection Stations' on or after Tuesday, March 17th, 2020.

ADHERE TO THE FOLLOWING PRECISELY:

- **COLLECTION CENTER IS BY APPOINTMENT ONLY**
- **NO WALK-INS WILL BE ACCEPTED**
- **ONLY SPECIMEN COLLECTION FOR COVID-19 WILL BE PERFORMED**

The procedure is as follows:

1. **Review your patient's signs and symptoms and travel history and exposure history to COVID-19.**
2. **Place your order through your EMR or fax to: (203) 688-5562**

If ordering by fax please also include a **diagnosis** and a copy of the patient's **insurance** card, driver's license or other identification with **correct demographics** (name, date of birth, **MR number** if the patient has one)

*****We have included an order form below if you are sending through fax.**

3. Once your order is placed your patient will receive a call from our central scheduling staff who will provide your patient with a date, time and location to get their sample taken.
4. If patients arrive at the collection center without a scheduled appointment, they will be advised the specimen will not be collected and that they will be contacted by our scheduling staff to obtain an appointment.
5. The final results will appear in your EMR once completed. If you do not have access, results will be sent to you by fax. All positive results will be called.

Yale New Haven Health is offering a call center for patients and the community who have questions about COVID-19. Healthcare professionals from the health system are available to answer your specific questions Monday - Friday, 7 am - 7 pm. The Yale New Haven Health COVID-19 call center can be reached at 833-ASK-YNHH (833-275-9644).

COVID-19 DRIVE-UP TESTING ORDER FORM

Physician Name:

Physician Number:

Physician Fax:

Patient Name:

Patient Date of Birth:

MR Number (if applicable):

Diagnosis:

Copy of Patient Insurance Card:

Copy of Patient Driver's License: