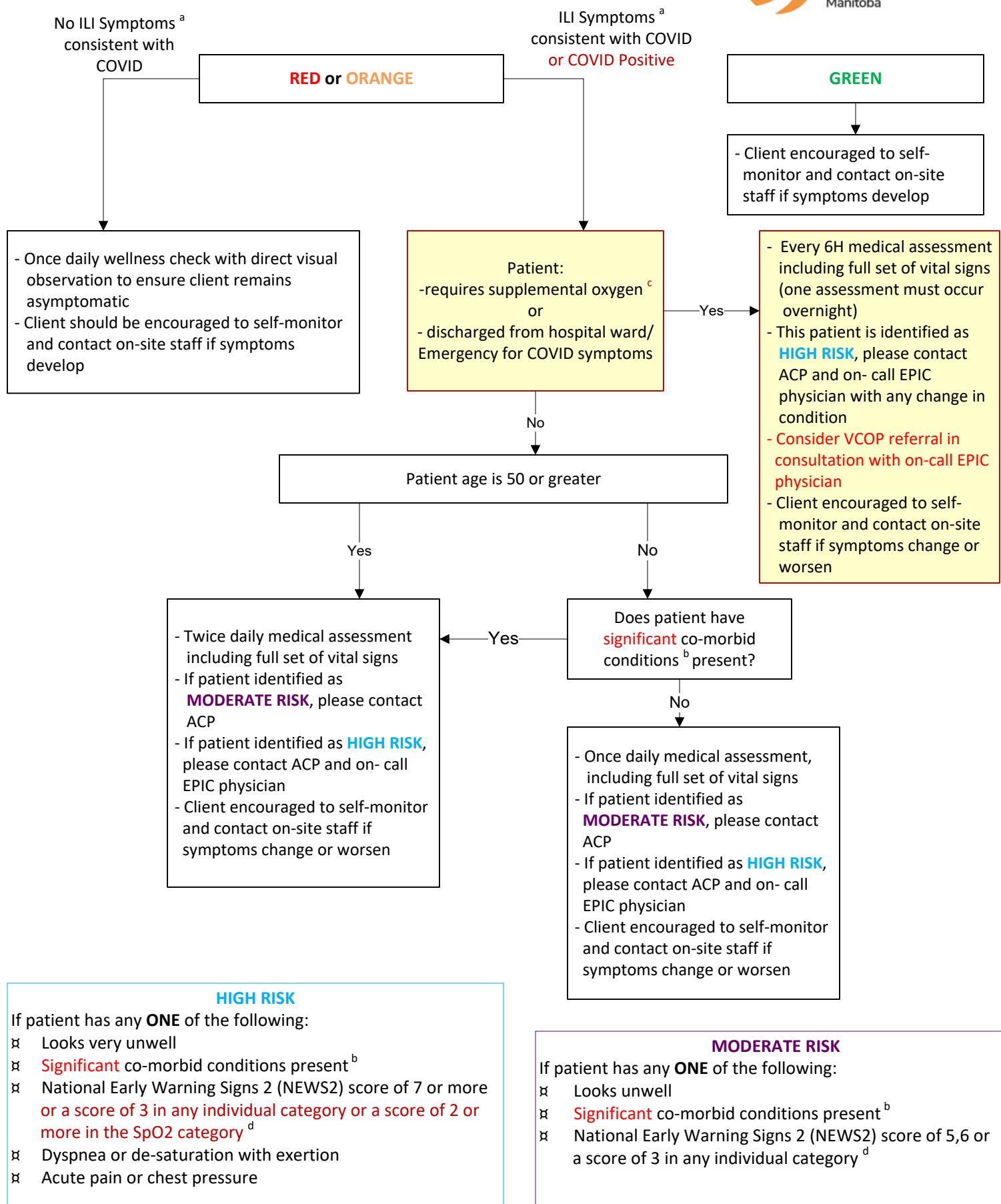


Shared Health Emergency Response Services

Alternate Accommodation Daily Medical Screening Algorithm



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RED

Clients located in the RED ZONE are identified as:

- Confirmed to be COVID 19 positive

ORANGE

Clients in the ORANGE ZONE are identified as:

- Symptomatic close contact – TEST: negative
- Symptomatic not a close contact – TEST: negative
- Symptomatic individual regardless of contact status – TEST: pending or not tested or deemed Recovered by Public Health
- Asymptomatic close contact

GREEN

Clients located in the GREEN ZONE are identified as:

- Asymptomatic non-close contacts

a. Influenza Like Illness (ILI) consistent with COVID-19 includes new onset of :

ONE of:

- fever > 38° C or subjective fever/chills
- cough
- sore throat/hoarse voice
- shortness of breath (all non-traumatic etiologies)/breathing difficulties
- hypoxemia/hypoxia (all non-traumatic etiologies)
- loss of taste or smell
- vomiting or diarrhea for more than 24 hours

TWO or MORE of:

- runny nose
- muscle aches
- fatigue
- conjunctivitis
- headache
- skin rash of unknown cause
- nausea or loss of appetite

b. Significant co-morbid conditions that increase the risk of severe illness from COVID include:

- Immunocompromised patients (eg. Cancer, HIV patients, transplant patients or patients with a history of substance misuse or IV drug use)
- Chronic pulmonary disease (eg. Asthma, COPD, pulmonary fibrosis)
- Chronic heart disease (eg. Congestive heart failure, cardiomyopathy, valvular disease)
- Neurodegenerative disorders (eg. Multiple Sclerosis, Parkinson's Disease, ALS)
- Chronic renal failure and/or dialysis
- Autoimmune disorders (eg. Lupus, rheumatoid arthritis)

Controlled hypertension, hyperlipidemia, or diabetes and smoking would not be considered significant co-morbid conditions.

c. When patient condition has deteriorated and warrants the addition of supplemental oxygen, a consult with the on-call EPIC physician must occur.

Footnote d.

Chart 1: The NEWS scoring system

Physiological parameter	Score						
	3	2	1	0	1	2	3
Respiration rate (per minute)	≤8		9–11	12–20		21–24	≥25
SpO ₂ Scale 1 (%)	≤91	92–93	94–95	≥96			
SpO ₂ Scale 2 (%)	≤83	84–85	86–87	88–92 ≥93 on air	93–94 on oxygen	95–96 on oxygen	≥97 on oxygen
Air or oxygen?		Oxygen		Air			
Systolic blood pressure (mmHg)	≤90	91–100	101–110	111–219			≥220
Pulse (per minute)	≤40		41–50	51–90	91–110	111–130	≥131
Consciousness				Alert			CVPU
Temperature (°C)	≤35.0		35.1–36.0	36.1–38.0	38.1–39.0	≥39.1	

Reproduced from: Royal College of Physicians. *National Early Warning Score (NEWS) 2: Standardising the assessment of acute-illness severity in the NHS*. Updated report of a working party. London: RCP, 2017.


Notes regarding Application of NEWS 2:

1. The SpO₂ scoring Scale 2 is for patients with a prescribed oxygen saturation requirement of 88–92% (eg in patients with hypercapnic respiratory failure). This should only be used in patients confirmed to have hypercapnic respiratory failure on blood gas analysis on either a prior, or their current, hospital admission. The decision to use the SpO₂ scoring Scale 2 should be made by a competent clinical decision maker and should be recorded in the patient’s clinical notes. In all other circumstances, the regular NEWS SpO₂ scoring Scale 1 should be used.

2. Regarding the patient’s level of consciousness – a patient may be alert, but acutely disoriented or confused (C). The lack of any response (eye opening, vocalization, movement) to voice (V) or painful (P) stimulus indicates that the patient is unconscious (U). If a patient’s baseline cognition is unknown, assume disorientation or confusion is acute.



 Chief Medical Officer



 Associate Medical Director