

RESPIRATORY VIRUS SCREENING ALGORITHM

Update in blue

Instruct patient/resident/client to clean hands with alcohol-based hand rub. Conduct a <u>PCRA</u> and ask if they have a new onset or worsening of any of the following symptoms:		
SIGNS AND SYMPTOMS CRITERIA	*Signs and symptoms of respiratory virus infection may include, but are not limited to:	
	□ Fever/chills	□ Headache
	□ Fatigue/malaise	☐ Shortness of breath/ breathing difficulty
	□ Loss of taste or smell	□ Vomiting or diarrhea for more than 24 hours
	□ Cough	□ Loss of appetite (or poor feeding in an infant)
	□ Stuffy/runny nose	□ Skin rash of unknown cause
	□ Conjunctivitis	□ Myalgia
	□ Sore throat/hoarse voice	□ Arthralgia
	*SYMPTOMS SHOULD BE NEW OR WORSENING. If patient/resident/client has pre-existing medical conditions (e.g., allergies, COPD) consider symptomatic if symptoms are new or worse than baseline.	
	Unconscious, delirious, unable, or unwilling to answer questions, proceed with the "YES" option.	
	If it is unclear or unknown whether the individual has new or worsening symptoms, proceed with the "YES" option.	

YES to ANY of the above

Implement Droplet and Contact Precautions with Airborne Precautions for aerosol generating medical procedures (AGMP)

If not able to isolate immediately, provide patient/resident/client with medical mask and move into a designated segregated waiting area

- **Emergency Departments**: Identify isolation requirements in EDIS ISO type column
- Other areas document applicable isolation requirements in the health record
- <u>Test if symptomatic</u>*. Clearly indicate symptoms for the patient/resident/client on the requisition
- If recovered from COVID-19 infection within the last 120 days and symptomatic, investigate according to clinical presentation (e.g., testing for influenza or other respiratory viruses for acute respiratory syndrome)
- If COVID-19 ruled out:
 - Respiratory illness cases: continue Droplet & Contact Precautions until symptoms resolve or until causative organism identified, then follow SDO Additional Precautions policy/operational directive
 - GI illness cases: continue Contact Precautions until 48-72 hours following symptom resolution or until causative organism identified, then follow SDO Additional Precautions policy/operational directive

NO to ALL of the above

Routine Practices

- Additional precautions as indicated (e.g., MRSA+)
- Emergency Departments: Identify applicable isolation requirements in EDIS ISO type column
- Other areas: document applicable isolation requirements in the health record

*Testing does NOT have to occur if symptomatic AND not being admitted AND not eligible for treatment

Complete a Point of Care Risk Assessment before every patient/resident/client interaction to determine risk of being exposed to a potential hazard

Instructions:

- To be used by healthcare professionals in **Emergency Departments and Outpatient** areas to screen patients and clients on initial presentation for Respiratory Virus screening
- To be used by healthcare professionals in **Acute Care and Long-Term Care Inpatient/resident** areas for direct admissions on initial presentation to the unit for Respiratory Virus screening