

## Baylor College of Medicine Procedure for Coronavirus Patients

According to the CDC, local health departments, in consultation with clinicians, should determine whether a patient is a PUI for COVID-19. The CDC clinical criteria for COVID-19 PUIs have been developed based on available information about this novel virus, as well as what is known about Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). These criteria are subject to change as additional information becomes available.

### Criteria to Guide Evaluation of PUI for COVID-19

*Revisions were made by the CDC on March 4, 2020, to reflect the following: Criteria for evaluation of Persons Under Investigation (PUI) were expanded to a wider group of symptomatic patients.*

As availability of diagnostic testing for COVID-19 increases, clinicians will be able to access laboratory tests for diagnosing COVID-19 through clinical laboratories performing tests authorized by FDA under an Emergency Use Authorization (EUA). Clinicians will also be able to access laboratory testing through public health laboratories in their jurisdictions.

This expands testing to a wider group of symptomatic patients. Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Decisions on which patients receive testing should be based on the local epidemiology of COVID-19, as well as the clinical course of illness. Most patients with confirmed COVID-19 have developed fever<sup>1</sup> and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing). Clinicians are strongly encouraged to test for other causes of respiratory illness, including infections such as influenza.

Epidemiologic factors that may help guide decisions on whether to test include: any persons, including healthcare workers<sup>2</sup>, who have had close contact<sup>3</sup> with a laboratory-confirmed<sup>4</sup> COVID-19 patient within 14 days of symptom onset, or a history of travel from affected geographic areas<sup>5</sup> (see below) within 14 days of symptom onset.

### Travel Health Notices

*Last updated March 18, 2020.*

#### Level 3 Travel Health Notice: Widespread ongoing transmission *with* restrictions on entry to the United States

CDC recommends that travelers avoid all nonessential travel to the following destinations. Most foreign nationals who have been in one of these countries during the previous 14 days will not be allowed to enter the United States.

- [China](#)
- [Iran](#)
- [Most European Countries](#)
- [United Kingdom and Ireland](#)

#### Level 3 Travel Health Notice: Widespread ongoing transmission *without* restrictions on entry to the United States

CDC recommends that travelers avoid all nonessential travel to the following destinations:

- [Malaysia](#)
- [South Korea](#)

#### Level 2 Travel Health Notice: Ongoing community transmission

CDC recommends that older adults and people of any age with serious chronic medical conditions should consider postponing nonessential travel to most global destinations:

- [Global Outbreak Notice](#)

The criteria are intended to serve as guidance for evaluation. In consultation with public health departments, patients should be evaluated on a case-by-case basis to determine the need for testing. [Testing may be considered for deceased persons who would otherwise meet the PUI criteria.](#)

## FOLLOW THESE STEPS for patients who meet the CDC criteria for possible infection:

- Place a surgical mask on the patient.
- Conduct the evaluation in a private room with the door closed until the patient can be moved to a secure designated room.
- Wear appropriate personal protective equipment (PPE)
  - Use Airborne and Contact Isolation precautions as outlined in the Baylor Medicine [Infection Control and Prevention Plan \(26.3.19\)](#). PPE and precaution signs and information are located in the Infectious Disease Emergency Response drawer found in each clinic's medical emergency response cart.
- Assess clinical status
- If fever present (measured vs. subjective)
- Is there respiratory illness present? (cough, shortness of breath)
- Notify **Baylor Infection Control/Infectious Disease Service (713-798-2900)**. **Press Option 2** and ask for the on-call ID Doctor to be paged for a potential Coronavirus case.
- For patients in any of our Affiliate hospitals, follow the isolation policies specific to each organization

For more information on this outbreak, visit the [CDC website](#).

## Footnotes

- <sup>1</sup> Fever may be subjective or confirmed
- <sup>2</sup> For healthcare personnel, testing may be considered if there has been exposure to a person with suspected COVID-19 without laboratory confirmation. Because of their often extensive and close contact with vulnerable patients in healthcare settings, even mild signs and symptoms (e.g., sore throat) of COVID-19 should be evaluated among potentially exposed healthcare personnel. Additional information is available in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 \(COVID-19\)](#).
- <sup>3</sup> Close contact is defined as—
  - a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case
  - or –
  - b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are met.

Additional information is available in CDC's updated [Interim Infection Prevention and Control Recommendations for Patients with Confirmed COVID-19 or Persons Under Investigation for COVID-19 in Healthcare Settings](#).

Data to inform the definition of close contact are limited. Considerations when assessing close contact include the duration of exposure (e.g., longer exposure time likely increases exposure risk) and the clinical symptoms of the person with COVID-19 (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to healthcare personnel exposed in healthcare settings as described in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with COVID-19](#).
- <sup>4</sup> Documentation of laboratory-confirmation of COVID-19 may not be possible for travelers or persons caring for COVID-19 patients in other countries.
- <sup>5</sup> Affected areas are defined as geographic regions where sustained community transmission has been identified. Relevant affected areas will be defined as a country with at least a CDC Level 2 Travel Health Notice. See all [COVID-19 Travel Health Notices](#).