

This checklist is meant as a guide for discharging COVID-19+/PUI patients in a safe and timely manner, and can be useful in providing discussion points for IDR.

Checklist Step	Guidelines	Owner
Evaluate if the patient is medically stable to be discharged		Clinical care team
2) Will the patient require in-home isolation? ☐ YES → proceed to Step #3 ☐ NO → jump to Step #6	 CDC: Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and, Improvement in respiratory symptoms (e.g., cough, shortness of breath); and, At least 10 days have passed since symptoms first appeared. 	Clinical care team
3) Where is the patient discharging to? □ Single family home or apartment building → proceed to Step #4 □ Home with home health → proceed to Step #4 □ Home with outpatient dialysis → proceed to Step #4 □ Undomiciled or in need of alternate housing → jump to Step #5 □ Facility (SNF, LTACH, IRF, etc.) ○ Confirm patient's insurance coverage → jump to Step #5	CDC: Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for COVID-19 Identify outpatient dialysis placement if still on precautions For patients in need of alternate housing for self-isolation, consult your Social Work or Case Management department for available options Visit the PAC webpage on NMI, or contact PACperform@NM.org, to confirm which facilities are/aren't accepting COVID patient discharges	Social Work/ Case Mgmt
 4) Is the single family home or apartment suitable for home care? □ YES to <u>all</u> conditions → proceed to Step #5 □ NO to <u>any</u> conditions → go back to Step #3 	 The patient is stable enough to receive care at home. Appropriate caregivers are available at home. There is a separate bedroom and bathroom where the patient can recover without sharing immediate space with others. Resources for access to food and other necessities are available. The patient and other household members are capable of adhering to precautions recommended as part of home care or isolation. There are not any household members who may be at increased risk of complications from COVID-19 infection (e.g., people >65 years old, young children, pregnant women, people who are immunocompromised or who have chronic heart, lung, or kidney conditions). 	Social Work/ Case Mgmt



5) How is the patient being transported to their discharge location? Personal vehicle driven by patient or member of patient's household Public transportation, rideshare/taxi, rental car, other method	CDC: Interim Guidance for Emergency Medical Services for COVID-19 Consult your Social Work or Case Management department to determine alternate options	Social Work/ Case Mgmt
6) Can a follow up appointment with the PCP (in person or telemedicine) be scheduled before discharge? Enter a referral to Internal Medicine as early as possible before discharge Schedule follow up within 3-7 days from discharge if high readmission risk, or 14 days from discharge for all other patients	The PRS team receives this referral and will: 1. Help schedule an appointment with their NM PCP 2. Remind the patient to follow up with their outside PCP 3. Help them establish an NM PCP if needed 4. Provide options for follow up care if the patient is uninsured	Clinical care team
7) Customize and print patient's AVS Add CDC patient information documents to the AVS (see tipsheets) Share Facts about COVID-19 What You Need to Know about COVID-19 Steps to Help Prevent the Spread of COVID-19 if You are Sick Add a Covid discharge specific instructions dot phrase to the AVS	NMI: Inpatient AVS COVID-19 Documents Tipsheet NMI: ED and Outpatient AVS COVID-19 Documents Tipsheet Dot phrases:	Clinical care team
8) Discuss expectations of when to end self-isolation with patient □ Discharge patient with one (1) facemask	CDC: Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings The symptom-based, time-based, and test-based strategies may result in different timeframes for discontinuation of isolation post-recovery. For all scenarios outlined, the decision to discontinue isolation should be made in the context of local circumstances.	Clinical care team