

## Ambulatory Clinic Algorithms

Continue to follow universal masking & physical distancing practices

### A. In-Person Patient with **Expected** ILI symptoms/COVID+ Workflow

#### 1. Pre-Visit Telephone Screening (optional)

- In-person visits and patients with COVID flags can be screened 48hrs prior to visit for the following symptoms within the **past 14 days**:
  - new or worsening cough, fever >100.0F, chills or shortness of breath
  - loss of taste or smell
  - sore throat
  - new headache, neck ache or muscle pain not related to physical activity
  - more than one episode of vomiting or diarrhea
  - new onset nasal congestion and/or runny nose
- If the clinical teams approved the in-person visit for a patient with ILI/COVID the following should be reviewed with the patient at the time of the screening:
  - Instruct patient to wear a mask prior to arriving to NM
  - Reinforce universal masking requirements and screening process upon arrival to an NM facility
  - Encourage E-Check in
  - Review the Patient Messaging Tool to minimize waiting time in clinic area (add link)
  - Clinic notifies security of patient appoint to bypass screening (site dependent)
- MD/APP should review the [Ambulatory Clinical Clearance Algorithm](#) to determine if COVID Status can be cleared; If patient cannot be cleared, continue to follow this workflow
- If a COVID Flag is missing this must be documented in the travel screen to trigger the flag (see [Diagnosed with COVID-19 Outside of NM](#)).



#### 2. CHECK-IN: Patient service representative actively screens all patients at check-in.

- “For your safety, we are screening all patients. Have you had any of the following symptoms within the past 14 days:
  - new or worsening cough, fever >100.0F, chills or shortness of breath
  - loss of taste or smell
  - sore throat
  - new headache, neck ache or muscle pain not related to physical activity
  - more than one episode of vomiting or diarrhea
  - new onset nasal congestion and/or runny nose
- Have you been diagnosed with COVID-19 within the past 14 days?
- Have you had a COVID test done outside of Northwestern in the last 14 days?
- Have you been in close contact with someone who has a confirmed diagnosis of COVID-19?
- Does the patient’s chart have a “COVID FLAG” (positive or rule-out)?



### 3. Clinic staff ISOLATE patient

- **Clinical staff dons PPE** ([PPE grid](#)) (mask)
- Upon patient arrival, escort the patient to an exam room
- Instruct patient to keep mask on and door closed at all times
- Place a [“Contact, droplet and Eye Protection”](#) PPE sign on the exam room door



### 4. Medical Assistant rooms the patient

- **Clinical staff dons usual COVID PPE** ([PPE grid](#)) (mask, gown, goggles, gloves)
- MA performs routine rooming procedures
- **Oral temperature** can be safely taken with while wearing Usual COVID PPE



### 5. Clinical staff (MD/APP) assess the patient

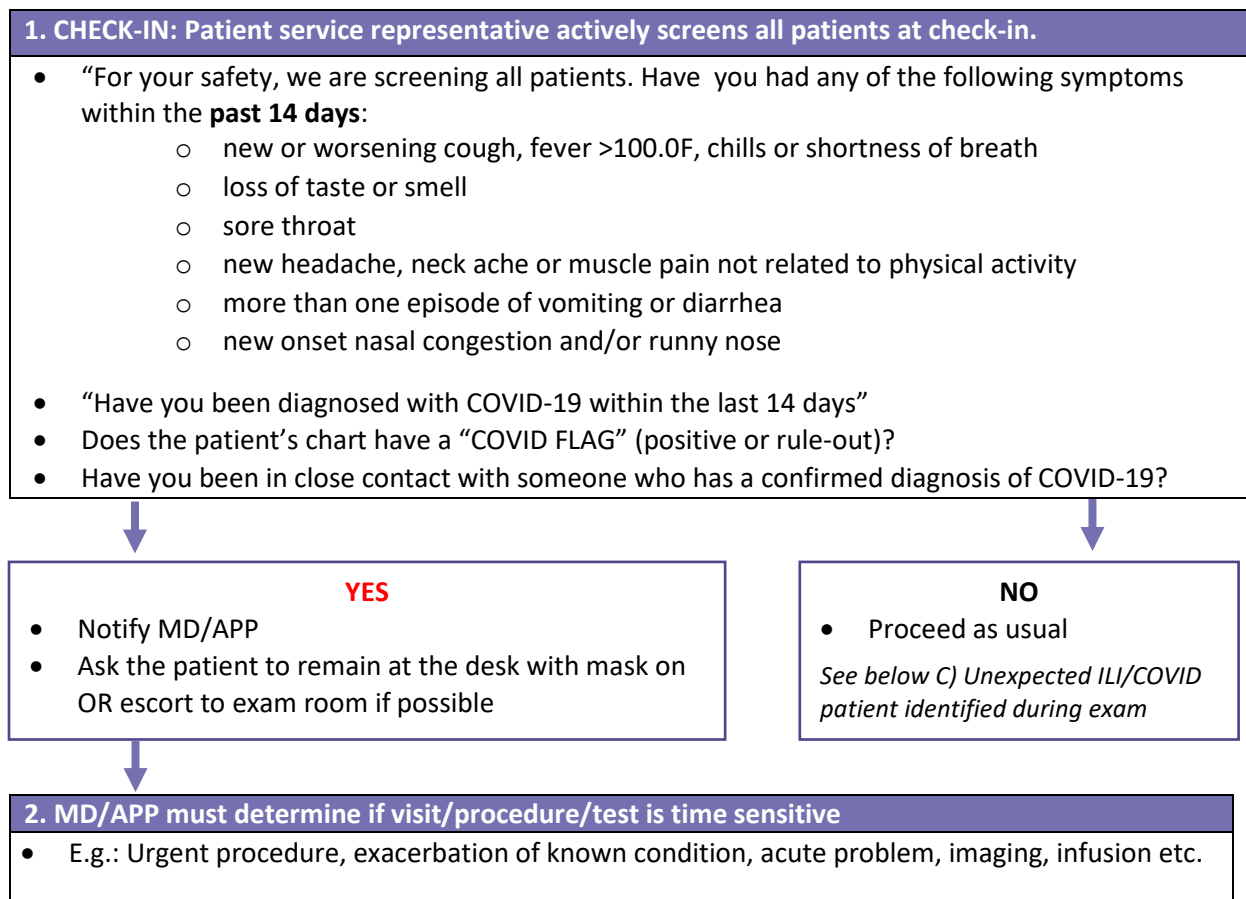
**Clinical staff dons Usual COVID PPE** ([PPE grid](#)) (mask, gown, gloves, goggles or face shield)

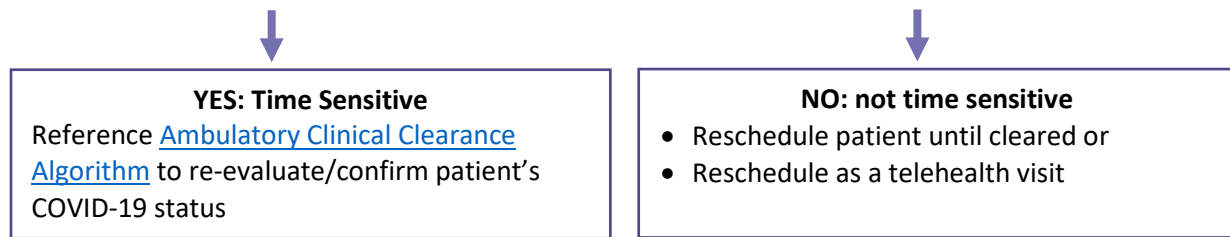
- MD/APP should review the [Ambulatory Clinical Clearance Algorithm](#) to determine if COVID Status can be cleared; if patient cannot be cleared, continue to follow this workflow
- Use disposable equipment when available (e.g. stethoscope, other)
- Obtaining a temperature: oral temperature** can be safely taken with while wearing Usual COVID PPE
- Recommend procedures (e.g. phlebotomy) be performed locally in the clinics with a closed door as much as possible
  - If unable to perform phlebotomy in office, perform a warm handoff to the lab team
- If a COVID Flag is missing this must be documented in the travel screen to trigger the flag (see [Diagnosed with COVID-19 Outside of NM](#)).
- See COVID dot phrases for documentation: [COVID dot phrases](#)
- Reference the [Ambulatory Reactivation Playbook](#) for information on:
  - Performing AGPs
  - COVID Testing criteria & Ordering
  - COVID results management
  - Patient Monitoring Program
  - COVID Flag
  - Virology Hours and Locations
  - Other resources



6. Exam Room Cleaning and Disinfecting (Refer to Ambulatory Reactivation Playbook )			
AGP Performed	NO AGP Performed	AGP performed	
COVID status	All patients regardless of COVID status	COVID Negative	COVID+, Rule-Out COVID or unknown
Cleaning and Disinfecting	<ul style="list-style-type: none"> <li>• Use hospital-approved products, focus on high-touch areas</li> <li>• gloves and mask</li> <li>• Room immediately available for use</li> </ul>	<ul style="list-style-type: none"> <li>• Use hospital-approved products, focus on high-touch areas</li> <li>• gloves and mask</li> <li>• Room immediately available for use</li> </ul>	<ul style="list-style-type: none"> <li>• Keep door closed for 70mins (standard room) or 35mins (negative pressure room)</li> <li>• Proceed with routine cleaning</li> <li>• Gloves and mask</li> </ul>

## B. In-Person Unexpected ILI Symptoms/COVID+ Patient Identified at Check-In Workflow





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**3. Clinical staff ISOLATE the patient.**  
Clinical staff dons the appropriate Ambulatory PPE ([PPE grid](#)). (Mask; add goggles if patient is unable to mask)

- Escort the patient to an exam room
- Instruct patient to keep mask on and door closed at all times
- Place a "[Contact, droplet and Eye Protection](#)" PPE sign on the exam room door

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**4. Medical Assistant rooms the patient (this step is at the discretion of the MD/Practice)**

- Clinical staff dons usual COVID PPE ([PPE grid](#)) (mask, gown, goggles, gloves)
- MA performs routine rooming procedures
- Oral temperature can be safely taken with while wearing Usual COVID PPE

**5. Clinical staff (MD/APP) assess the patient.**

- Clinical staff dons Usual COVID PPE** ([PPE grid](#)) (mask, gown, gloves, goggles or face shield)
- h. Use disposable equipment when available
  - i. Reinforce proper masking techniques and the need for the patient to keep mask on at all times
  - j. **Temperature:** Oral temperatures can safely be obtained because staff is wearing appropriate PPE
  - k. Recommend all procedures (e.g. phlebotomy) be performed locally in the clinics with a closed door as much as possible
    - i. If unable to perform phlebotomy in office, perform a warm handoff to the lab team
  - l. Assess if patient can be cleared of COVID Flag by referring to the [Ambulatory Clinical Clearance Algorithm](#)
  - m. If patient was diagnosed as COVID+ outside of NM and needs to have a COVID Flag, this must be documented in the travel screen to trigger the flag (see [Diagnosed with COVID-19 Outside of NM](#)).
  - n. See COVID dot phrases for documentation: [COVID dot phrases](#)
  - o. Reference the [Ambulatory Reactivation Playbook](#) for information on:
    - i. COVID Testing criteria & Ordering
    - ii. COVID results management
    - iii. Patient Monitoring Program
    - iv. COVID Flags
    - v. Virology Hours and Locations
    - vi. What is an Aerosol Generating Procedure (AGP)
    - vii. How to safely perform an Aerosol Generating Procedure (AGP)
    - viii. Ambulatory PPE Signage
    - ix. Other resources
  - p. Almost all procedures can safely be done in ambulatory clinics as long as the NM PPE Guidelines are followed ([NM PPE grid](#))



6. Exam Room Cleaning and Disinfecting (Refer to Ambulatory Reactivation Playbook )			
AGP Performed	NO Aerosol Generating Procedure Performed	YES Aerosol Generating Procedure performed	
COVID status	All patients regardless of COVID status	COVID Negative	COVID+, Rule-Out COVID or unknown
Cleaning and Disinfecting	<ul style="list-style-type: none"> <li>Use hospital-approved products, focus on high-touch areas</li> <li>gloves and mask</li> <li>Room immediately available for use</li> </ul>	<ul style="list-style-type: none"> <li>Use hospital-approved products, focus on high-touch areas</li> <li>gloves and mask</li> <li>Room immediately available for use</li> </ul>	<ul style="list-style-type: none"> <li>Keep door closed for 70mins (standard room) or 35mins (negative pressure room)</li> <li>Proceed with routine cleaning</li> <li>Gloves and mask</li> </ul>

## C. In-Person **Unexpected**

### ILI/COVID Patient Identified during Rooming or Clinical Exam

- If a patient does not have ILI symptoms or a COVID diagnosis and/or COVID flag:
  - Follow universal masking recommendations, add goggles if patient is unable to mask
  - Perform usual rooming procedures, clinical evaluation and all other procedures
- **If at any point during the patient's visit they reveal ILI/COVID symptoms:**
  - reinforce importance of patient keeping their mask on at all times
  - staff should excuse themselves, exit the exam room, wash hands, and notify the clinical team
  - Place a [“Contact, droplet and Eye Protection”](#) PPE sign on the exam room door
  - Prior to re-entering the room, don Usual COVID PPE ([NM PPE grid](#))