

TRANSFERRING PATIENTS FROM HOSPITAL TO SKILLED NURSING FACILITY DURING THE COVID-19 PANDEMIC

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COVID-19 POSITIVE PATIENTS	COVID-19 NEGATIVE PATIENTS & COVID UNKNOWN (ASYMPTOMATIC)
<p><u>COVID Resolved Patient</u> CDC's test-based strategy (preferred):</p> <ol style="list-style-type: none">1. Resolution of fever without the use of fever-reducing medications AND2. Improvement in respiratory symptoms (e.g., cough, shortness of breath), AND3. Negative results of at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart <p><u>Extended Time-Based Strategy or COVID Persistent Positive Test Despite Clinical Resolution:</u></p> <ol style="list-style-type: none">1. Minimum of 14 days from onset of symptoms, AND2. <u>Resolution</u> of symptoms (cough, shortness of breath, hypoxia, fever), AND3. Infectious disease consultant approves removal of transmission-based precautions, AND4. Patient is transferred to medical floor (off COVID unit), AND5. Admission approved with SNF medical director with continued plan to continue universal masking (right column 5-8) and remain on dedicated SNF unit/wing away from NF population for minimum of 14 days <p><u>Patient With Active COVID With Symptoms/Signs</u> All of the following must be present at SNF:</p> <ol style="list-style-type: none">1. Already has resident(s) with COVID-19¹, AND2. Adequate staff to care for COVID+ patient, AND3. Adequate PPE to care for COVID+ patient, AND4. Able to isolate/cohort patient and maintain droplet precautions for the duration of transmission-based precautions², AND5. Admission approved by SNF medical director <p>¹COVID naïve facilities may need to admit COVID+ patients if hospital capacity is overwhelmed.</p> <p>²Patients with cognitive impairment may not be able to remain isolated and may not be able to wear mask outside their room.</p>	<ol style="list-style-type: none">1. Patients without respiratory symptoms/signs or any other reason to suspect COVID-19 do not need to be tested for COVID-19 prior to SNF transfer2. Accepting facility may require COVID-19 testing prior to admission to SNF facility to exclude asymptomatic viral shedding. Test will be a single administrative test to facilitate discharge3. Medical director of nursing home after discussion with attending hospitalist physician may request COVID-19 testing prior to admission to exclude atypical symptoms as possible COVID-19 infection4. Patients hospitalized for non-COVID-related illnesses whose COVID-19 status is not known can be transferred to a nursing home without testing. However, to ensure they are not infected, nursing homes should place them in Transmission-Based Precautions in a separate observation area or in a single room until 14 days have elapsed since admission.5. For new admissions during first 14 days of stay:<ul style="list-style-type: none">• COVID negative¹ and patients not tested for COVID during hospitalization should be placed on dedicated units or wings of units away from long term care residents (keep populations of SNF and long-term care residents separate to reduce risk of spread to long term care residents)6. COVID negative admissions should wear a procedural mask when having care/assistance provided by a health care worker or provider for a minimum of 14 days² Should wear a procedural mask when out of their room7. All health care workers and providers should wear a procedural mask when within 6 feet of patients8. If new admission is not able to wear a procedural mask due to cognitive impairment or other reasons, health care workers and providers should consider wearing eye protection (goggles or face shield) when within 6 feet of patient9. All patients will have active screening with temperature and symptom check per facility protocol and CDC guidelines10. Any patient that becomes a PUI will be isolated and placed on droplet precautions with full use of PPE for any patient encounter including N-95 (or surgical mask if N-95 is not available), eye protection with face shield or goggles, gown, and gloves <p>¹A negative test in an asymptomatic patient does not preclude that the patient may develop symptoms and viral shedding in subsequent days</p> <p>²Source control with cloth masks may be an option for patients rather than a procedural mask if PPE limited</p>