Symptom Monitoring Guidance

Guidance to Care Teams - Home Telephone Monitoring of Patients with Mild Respiratory Symptoms

In an effort to limit potential exposure of our patients to COVID-19, SCCA is asking patients with active respiratory symptoms to call the RN COVID-19 Hotline before coming into the clinic.

For those patients with mild respiratory symptoms who are staying at SCCA or Pete Gross House:

- We recommend that these individuals come into the clinic to be tested. Some patients may also be referred to drive-up testing.

For all other patients with mild respiratory illness:

Patients with mild respiratory symptoms may have infections due to COVID-19, or due to other respiratory viruses that are currently circulating in the community. They also may be experiencing symptoms due to non-infectious causes.

- We encourage that these patients remain at home until their symptoms improve, and to contact their care team to reschedule nonessential appointments.
- Additionally, these patients need to be followed by their care teams with daily symptom monitoring by telephone call, and considered for testing according to the testing algorithm.
- The duration of symptom monitoring depends on the patient’s COVID-19 test results. Please follow the guidelines below for follow-up:

Patients with a Negative COVID-19 Result:

- Call the patient daily to check on their symptoms for up to 7 days after their negative test result. If symptoms have significantly improved or resolved, any appointments can be rescheduled.

- If the patient’s symptoms have resolved before 7 days, symptom monitoring may be discontinued and the patient’s appointments rescheduled.

If their symptoms worsen, they should be referred for repeat testing (through drive-up testing or in clinic for BMT/IMTX and patients staying at Pete Gross or SCCA House) or assessed for a higher level of care**
For COVID-19 Tested Patients with A Positive Result:

- Call the patient daily to check on symptoms; if symptoms become severe (e.g. acute shortness of breath) or significantly worsen, assessment is needed for a higher level of care. Specifically, such patients may need to be referred to the Emergency Room for further evaluation and inpatient admission. Please advise patient to wear a mask and contact the ER so that they can plan and isolate the patient accordingly. If symptoms significantly improve or resolve, daily calls can be discontinued and appointments can be rescheduled.

- Additionally, for patients who test positive, home isolation should be continued until all of the following criteria are met:

  1. Resolution of fever without the use of fever-reducing medications
  2. Resolution of respiratory symptoms
  3. At least 7 days from symptom onset
  4. A single negative COVID-19 test - repeat testing should ONLY be performed when patients meet the first three criteria

  **Note:** if symptoms persist at ≥ 14 days, repeat testing should be performed; for these patients 2 negative tests collected ≥ 24 hours apart are required prior to discontinuation of home isolation

- Refer to the process maps titled:
  - Positive Results - Symptom Monitoring
  - Negative Result - Symptom Monitoring
  - No Test Performed - Symptom Monitoring

- Document symptom monitoring in the COVID-19 Assessment PowerForm in ORCA.

** If the patient develops shortness of breath, or if there is concern at any time for worsening of respiratory symptoms, the patient should be referred to the clinic for further evaluation or the Emergency Department in acute situations. **Always call the ED prior to sending a patient there** to ensure they are prepared to receive a patient in contact/droplet precautions.
Frequently Asked Questions

What are clinical symptoms of COVID-19?

The most commonly reported symptoms include fever, cough, and shortness of breath. Other symptoms include fatigue, myalgias, chills, sore throat, headache, nasal or sinus congestion and in some cases nausea, vomiting, and diarrhea. Recently, there have been also been reports of anosmia (loss of smell) and dysgeusia (altered sense of taste).

In some cases, there have been reports of worsening symptoms that occur during the second week of illness. There are limited data at this time about clinical symptoms of COVID-19 among patients with cancer and whether symptoms may differ when compared to other patient populations.

What should I do if my patient has a fever?

Please follow your current care team protocol for evaluation and management of fever. It is critical to ensure that patients with fever and other signs of acute illness are appropriately managed according to existing protocols (e.g. neutropenic fever).

My patient does not have fever or shortness of breath but has mild respiratory symptoms. Should I advise the patient to come into clinic to get tested?

- For patients who are staying at SCCA or Pete Gross House, we recommend that these patients come into the clinic to be tested. Some patients may also be referred to drive-up testing.

For all other patients with mild respiratory symptoms:
- We suggest that they stay at home and reschedule nonessential appointments.
- If you believe your patient meets testing criteria or if you are concerned that your patient has worsening symptoms, discuss with triage APP to determine whether patient should be referred for drive through testing.
- We recommend that these patients be followed closely by their care teams with daily symptom monitoring by telephone call.
- Duration of symptom monitoring depends on the patient’s COVID-19 test results.
• Refer to:
  o Positive Results - Management of Test Results and Symptom Monitoring
  o Negative Result - Management of Test Results and Symptom Monitoring
  o No Test Performed - Management of Test Results and Symptom Monitoring

• Symptom monitoring should be documented in the COVID-19 Assessment PowerForm in ORCA.

• If the patient develops fever, shortness of breath, or if there is concern at any time for worsening of respiratory symptoms, the patient should be referred to the clinic for further evaluation or the Emergency Department in acute situations.

**How frequently should testing for COVID-19 be performed in a patient with negative test results and ongoing respiratory symptoms?**

In patients with ongoing mild respiratory symptoms and there remains a concern for a respiratory viral infection, the test should not be repeated more frequently than 7 days from date of the negative test. If there is any change or worsening of symptoms, repeat testing may be considered at an earlier date.

**What should I do if my patient has an inconclusive test result?**

In some cases, an inconclusive test result may reflect a low level viral load. We recommend that patients with an inconclusive test result have a repeat test performed and that patients be managed as a positive result until results of repeat testing have returned. Repeat testing can be arranged via drive-through testing.