

## Respiratory/COVID-19 Symptom Monitoring

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

In an effort to limit transmission of COVID-19 in our ambulatory spaces, SCCA is asking patients with active respiratory symptoms to call the COVID-19 Hotline (206-606-2880) before coming into the clinic. In addition, SCCA is also pre-screening patients by calling them pre-appointment to ensure patients with symptoms are identified prior to their arrival.

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

- We recommend that these individuals call their clinical teams to review their symptoms, and come to clinic for COVID-19 testing, if instructed by team.

#### **For all other patients with mild respiratory illness:**

Patients with mild respiratory symptoms may have COVID-19, may have another respiratory virus, or they could be experiencing symptoms due to non-infectious causes (e.g. chemotherapy toxicity).

- We encourage these patients to remain at home until their symptoms improve, and to contact their care team to discuss expediency of appointments and whether they need to be seen in clinic (essential) or can be moved to telehealth (non-essential).
- These patients need to be followed by their care teams with symptom monitoring by telephone call OR considered for testing according to the SCCA's testing algorithm.
- 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 with respiratory symptoms and unknown COVID-19 status or a patient known to have COVID-19 to ensure they are prepared to receive a patient in appropriate precautions (e.g. droplet/contact isolation).**

- 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:

- Patients will be notified of their negative result by email or mail.
- Instruct the patient that if they develop worsening symptoms to let the CNC know or call the COVID-19 hotline at (206) 606-2880. This line is answered Monday-Friday from 8 am to 5 pm. If the patient has a medical emergency and needs to call 911, instruct them to put on a mask if possible before emergency medical services arrive.

#### Patients with a **Positive** COVID-19 Result:

- Once the patient has been informed of their positive result, symptom monitoring calls should occur weekly (7 and 14 days from the positive result date) to monitor symptoms:
- Instruct the patient that a nurse will call them at day 7 and 14 to check on their symptoms.
- Instruct the patient that if they develop worsening symptoms to let the CNC know or call the COVID-19 hotline at (206) 606-2880. This line is answered Monday- Friday from 8 am to 5 pm.
  - 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, weekly calls can be discontinued after 14 days, and appointments should be reviewed with care team to determine **when** appointment should be rescheduled.
- Additionally, for patients who test POSITIVE for COVID-19, home isolation should be continued until **ALL** the following criteria are met:
  1. **If patient is able to be retested** to determine if they are still contagious, they can leave home after these three things have happened:
    - no longer have a fever (without the use medicine that reduces fevers) AND
    - other symptoms have improved (for example, when your cough or shortness of breath have improved) AND
    - received two negative tests in a row, 24 hours apart.

2. **If patient is not able to be retested** to determine if they are still contagious, they can leave home after these three things have happened:
- have had no fever for at least 72 hours (that is three full days of no fever without the use medicine that reduces fevers)  
AND
  - other symptoms have improved (for example, when your cough or shortness of breath have improved)  
AND
  - at least 7 days have passed since your symptoms first appeared

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

Disease and Clinical Presentation	Precautions	Criteria to discontinue precautions
COVID-19 Positive: Symptomatic	Droplet precautions	<ul style="list-style-type: none"> <li>• At least 14 days since positive test</li> <li>• 72 hours after resolution of fever (without the use of fever-reducing medication)</li> <li>• Complete resolution of respiratory symptoms</li> <li>• Two negative COVID-19 tests collected <math>\geq 24</math> hours apart<sup>^</sup></li> </ul> <p><i>*repeat testing should ONLY be performed when patients meet the first three criteria</i></p>
COVID-19 Positive: Asymptomatic - never experienced onset of symptoms (i.e. pre-procedure screening)	Droplet precautions	<ul style="list-style-type: none"> <li>• At least 14 days since date of positive test result</li> <li>• Two negative COVID-19 tests collected <math>\geq 24</math> hours apart<sup>^</sup></li> </ul>
COVID-19 Negative: Respiratory symptoms – unknown cause (possible infectious cause)	Droplet precautions	<ul style="list-style-type: none"> <li>• Asymptomatic for three consecutive days (refer to <a href="#">Standard and Transmission- Based Precautions Policy</a>)</li> </ul>
COVID-19 Negative: Respiratory symptoms – known non-infectious cause (medication side-effect, known side-effect of disease process)	Standard precautions	<ul style="list-style-type: none"> <li>• n/a</li> </ul>

**Transmission-Based Precautions Summary**

\*Effective April 27, 2020, the extended mask use policy requires staff, patients and visitors to wear masks while on premises.

## 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, loss of smell or taste, new onset diarrhea, and in some case nausea and vomiting.

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 individuals call their clinical teams to review their symptoms, and to come to clinic, if instructed.

For all other patients with mild respiratory symptoms:

- These patients need to be followed by their care teams or considered for testing according to the SCCA's testing algorithm.
- We encourage these patients to remain at home until their symptoms improve, and to contact their care team to discuss expediency of appointments and whether they need to be seen in clinic (essential) or can be moved to telehealth (non-essential).

### 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.