COVID-19 Reed City Tent ED Patient Careflow – March 30, 2020, 1711
Contact: Jen Lokers

COVID patients
Keep patient masked

Masked patient is welcomed into tent while family member parks car, OR if patient is alone and well they are directed to self park and return to COVID tent

Registration completes full patient registration (does not collect payment). Tent Triage RN arrives patient and completes triage

Patient waits in a chair for next available RN/Provider team

Staff walk patient back to evaluation space, ‘room’ patient in Epic ED RAZ tent area. NT obtain vital signs and RN/Provider complete dual assessment.

Does your patient need a higher level of care or additional testing?

Provider & RN follow COVID tent clinical evaluation guideline to complete patient’s visit.

BOX 1 Inclusion and Exclusion Criteria for COVID Tent

Inclusion Criteria for COVID tent
- Well-appearing patient requesting COVID testing
- Well appearing & unexplained fever and cough
- Well appearing and lower respiratory symptoms (Cough/Dyspnea)

Exclusion Criteria for COVID tent
- Visibly uncomfortable
- CP with risk for ACS or PE
- Coagulopathy
- Transplant/Immunocompromised
- Dialysis
- Active Cancer
- Sickle cell
- A child that is less than 1 yr old

Patient arrives at ED Drive Entrance:
ED Drive RN assesses patient for COVID tent or ED entrance. *Use ED Drive RN algorithm

RN masks and sorts patients according to well appearing COVID complaints vs. sick COVID or other ED complaints. *See box 1 for COVID inclusion and exclusion criteria

Non COVID complaints or COVID complaints that do not meet tent inclusion criteria

Enter ED through ED Triage. ED care as usual.

Tent/ Triage RN will call ED CN for room assignment in COVID cohort area and give RN-RN report. ED NT will transport patient through ambulance entrance doors to assigned room. ED care as usual.

Is your patient well appearing?

Yes

Patient evaluation space is wiped down

Discharge the patient home with AVS

RN, NT and Provider may keep PPE in place with only glove changes between patients. When entering the ‘clean area’ PPE must be doffed.

**PPE must be conserved when possible.

No

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