Telephone Triage Patient with COVID Symptoms

Category 3

Mild

- Stay at home
- Self care
- 111-Online if health needs

Category 2

Moderate

- Need assessment (phone/video)
- Or "Hot Site" review for examination

Hot Site: 07899 097 302

Category 1

Severe -

Needing admission:

- Clearly very unwell
- RR >25
- HR >131
- Sats <92%
- Call 999 and advise them suspected COVID

Category 2A

Telephone assessment

- Completing full sentences
- No SOB
- No chest pain
- Able to get out of hed
- Able to do usual activities
- ROTH Score* >8s (*may underestimate severity)

Face-to face assessment (adults):

- RR 14-20
- HR 50-100
- Sats≥96%

Category 2B

Telephone assessment

- Completing full sentences
- Some SOB (new)
- No chest pain
- Able to do some activities but with some difficulty: Lethargic
- ROTH Score* 6-8s (*may underestimate severity)

Face-to face assessment (adults):

- RR 21-22
- HR 100-110
- Sats 94-96%

Category 2C

Telephone assessment

- Completing full sentences
- SOB on exertion (new)
- Mild chest tightness
- Able to do some activities but with some difficulty; lethargic
- ROTH Score* 6-8s (*may underestimate severity)

Face-to face assessment (adults):

- RR 23-24
- HR 110-130
- Sats 92-93%

Category 2C

Category 2A

Management:

- Rest and make safe
- Oral fluids
- Paracetamol
- SAFETY-NETTING and consider AKI

Category 2B

Management:

- Rest and make safe
- Oral fluids
- Paracetamol

Consider antibiotics to treat/prevent secondary bacterial pneumonia:

- Doxycycline 200mg stat, 100mg od, 5 days in total

<u>OR</u>

- Amoxicillin 500mg tds, 5 days in total

If known Asthma/COPD do not use nebulisers unless no choice in severe exacerbations. (Increase SABA / similar)

Only use oral steroids if sure not COVID

SAFETY-NETTING and consider AKI

Management:

- Rest and make safe
- Oral fluids
- Paracetamol

Consider antibiotics to treat/prevent secondary bacterial pneumonia:

- Doxycycline 200mg stat, 100mg od, 5 days in total
- Amoxicillin 500mg tds, 5 days in total

If frail, significant chronic disease or immunocompromised [and not a candidate for palliative care] referral to medical team on-call

SAFETY-NETTING: review in 24-48h (or earlier if unwell), and consider AKI

Total Triage system

Non-COVID Symptoms

Aim to manage all patients by telephone or video consultation, and using SMS services

Essential (Non-COVID) activity:

- Childhood immunisations
- Urgent blood tests (e.g. azathioprine/methotrexate/ lithium, etc.)
- Urgent treatments (e.g. injected treatments, dressings, suture removals, etc.)

Smears are currently regarded as essential activity - prioritise those with previous inconclusive or abnormal smear, and those that re overdue

Aim to convert warfarin to DOAC, B12 to oral, etc.

Baby checks to coincide with first immunisations at 8 weeks

Everything else:

- Acute Care Team to triage everything else*
- *Practice nurses will have a sub-list of regular dressings

PPE TO BE WORN FOR **ALL FACE-TO-FACE CONTACTS**

DEFAULT POSITION IS FOR ALL CONTACTS TO **BE NON-FACE-TO-FACE**

HVS and Community Nurses may be available to see NON-COVID cases if they are housebound and appropriate.

Duty: 07985 319782

If patients need to come to surgery, tell them to telephone us from the car park (or press the doorbell and wait outside).