

COVID-19 IDPH Interim Guidance: Accepting Transfers from Acute Care Settings to LTCF (8/5/2020 Subject to change)

Criteria for accepting transfers from acute care settings to LTCF:	Medically stable	Patient Monitoring (minimum) ✓ Every 8 hours: Temp, Pulse, HR and pulse oximetry. ✓ B/P once a day	Transmission-based Precautions	Qualifier	Afebrile for 24 hours without fever reducing meds	Qualifier	Improving symptoms	COVID-19 Test	Patient Placement: Single room is ideal. Cohort like- illnesses.	
<p><i>NOTE: Meeting criteria for discontinuation of Transmission-Based Precautions is not a prerequisite for discharge. Testing may be helpful but is not required prior to being discharged from acute care settings.</i></p> <p>A test-based strategy is no longer recommended (except as noted below) because, in the majority of cases, it results in prolonged isolation of patients who continue to shed detectable SARS-CoV-2 RNA but are no longer infectious.</p>									Dedicated COVID wing or hall	Observational/transitional area or Regular floor
New admissions or returning residents WHERE THE COVID-19 STATUS IS UNKNOWN										
COVID19 STATUS IS UNKNOWN (this could be a new admission, a returning resident who has been hospitalized or someone being transferred from another facility)	X	X	Transmission-Based Precautions for 14 days since last exposure (which is date of admission)	AND	X	AND	X	Not required to be admitted. May help for placement	Residents with one negative test on admission must still be placed on an observation unit. Monitor for 14 days after admission and provide care using all recommended COVID-19 PPE. (CDC)	Single room on transitional area. If asymptomatic after 14 days, can go to regular floor.
Residents returning from medical appointments, dialysis, or other short-term outings										
A risk assessment should be completed upon return, assessing possible COVID-19 exposures while away from the facility. This decision will determine if isolation for 14 days using TBP is warranted.										
New and returning residents WHO TESTED POSITIVE FOR COVID-19 WITH SYMPTOMS										
Symptom-based Mild to Moderate illness who are not severely immunocompromised	X	X	Transmission-Based Precautions may be discontinued when at least 10 days have passed since symptoms first appeared.	AND	X	AND	X		Keep on COVID unit until TBP is discontinued.	After TBP discontinued, may move to regular floor.
Symptom-based Severe to Critical illness or who are severely immunocompromised	X	X	Transmission-Based Precautions may be discontinued when at least 20 days have passed since symptoms first appeared.	AND	X	AND	X		Keep on COVID unit until TBP is discontinued	After TBP discontinued may move to regular floor

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New and returning residents WHO TESTED POSITIVE FOR COVID19 but were ASYMPTOMATIC										
Residents who are NOT severely immunocompromised	X	X	Transmission-Based Precautions may be discontinued when at least 10 days have passed since the date of their first positive viral diagnostic test.	<u>AND</u>	X	<u>AND</u>	X		Keep on COVID unit until TBP is discontinued.	After TBP discontinued may move to regular floor
Residents who ARE severely immunocompromised			Transmission-Based Precautions may be discontinued when at least 20 days have passed since their first positive diagnostic test	<u>AND</u>	X	<u>AND</u>	X		Keep on COVID unit until TBP is discontinued.	After TBP discontinued may move to regular floor
<p>NOTE: The Test-based strategy is NO LONGER RECOMMENDED EXCEPT with consultation with local infectious disease experts.</p>			Testing could be considered to discontinue TBP earlier than 20 days ONLY after consultation with local infectious disease expert	<u>AND</u>	X	<u>AND</u>	X	2 negative tests collected > 24 hours apart	Keep on COVID unit until TBP is discontinued.	After TBP discontinued may move to regular floor.
New or returning residents who were <u>SUSPECTED</u> to have COVID-19 (Symptomatic)										
If Never tested use Symptom-based criteria	X	X	Continue TBP until 10 days have passed since symptoms first appeared.	<u>AND</u>	X	<u>AND</u>	X		Observational or transitional area	After TBP discontinued may move to regular floor
If tested, use following criteria	X	X	Continue TBP until have at least 1 negative test or 2 negative tests if high level of suspicion for COVID	<u>AND</u>	X	<u>AND</u>	X	1 negative test or 2 negative tests if high level of suspicion		

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New or returning residents where Transmission-Based Precautions have been discontinued										
Based upon their history of SARS-CoV-2 infection and completion of TBP	X	X	No further restrictions are required	AND	X	AND	X			May be placed on the regular floor

Mild Illness: Individuals who have any of the various signs and symptoms of COVID-19 (e.g., fever, cough, sore throat, malaise, headache, muscle pain) without shortness of breath, dyspnea, or abnormal chest imaging.

Moderate Illness: Individuals who have evidence of lower respiratory disease by clinical assessment or imaging, and a saturation of oxygen (SpO2) ≥94% on room air at sea level.

Severe Illness: Individuals who have respiratory frequency >30 breaths per minute, SpO2 <94% on room air at sea level (or, for patients with chronic hypoxemia, a decrease from baseline of >3%), ratio of arterial partial pressure of oxygen to fraction of inspired oxygen (PaO2/FiO2) <300 mmHg, or lung infiltrates >50%.

Critical Illness: Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction.