

**SAMPLE: COVID-19 ED TENT TESTING PROCEDURE**  
*(Modify as appropriate for your site. Role responsibilities may have to be consolidated depending on the number of available personnel.)*

**A. Staffing:**

- 1 provider
- 1 RN/tech working inside the tent
- 1 RN/Tech- Runner (ALL specimens collected MUST be walked down to lab)
- 1 RN – Flow lead (managing the flow of pts. going into the tent, assisting with registration, etc.)
- 1 Clerk – registering patients

**B. Process:**

- The patient will be given a mask and directed to the Tent Flow Leader.
- The patient will arrive to the ED and be screened using the most up-to-date screening criteria per CDC, provided testing materials are available.
- The patient will be directed to tent if the clinical ED screener believes the patient needs to be evaluated for COVID-19.
- Tent will consist of chairs placed at least of six feet apart.
- The patient will be discharged home after appropriate and, unless sick, minimal care.

**C. Personnel / Responsibilities:**

➤ **CHECK-IN (Clerk):**

- Patient identified and registered at the podium
- Patient given mask
- Directed to canopy by staff; if there is a wait for evaluation, will be asked to wait in car and will be called when time for evaluation.

➤ **FLOW LEAD (RN):**

- Apply arm band to patient and verify correct information.
- Hand patient labels, health department paper packet (provider fills out) and bag with swabs for them to take into the tent with them. **ABSOLUTELY NO VISITORS INSIDE THE TENT** unless they are an adult (ONE only) with a child.
- Assist with patient flow – getting patients in and out
- Give patient standard COVID-19 discharge papers upon leaving the tent
- If patient comes to the tent and cannot be sent directly in (if the tent is full):
  - Take down their name and phone number.
  - Instruct them to wait in their car until they are called.
  - Notify registration with the patient’s name and phone number so they can be registered.

- When a spot becomes available, call the patient on the phone number they provided and instruct them to come to the tent.

➤ **RN/TECH INSIDE THE TENT:**

- Don PPE outside of the tent in designated area.
- Once in the tent, you do NOT need to change PPE between patients EXCEPT for gloves between each patient or if PPE becomes soiled.
- Hand hygiene is the MOST important preventative – you MUST perform hand hygiene using the hand sanitizer provided inside the tent (allow to dry) and put on NEW gloves BETWEEN EACH PATIENT.
- ALL equipment and chairs need to be thoroughly wiped down BETWEEN EACH PATIENT.
- Obtain a full set of vital signs
- Collect and label swabs

➤ **PROVIDER INSIDE THE TENT:**

- Patient enters tent and is evaluated with vital signs and Medical Screening Exam (MSE)
  - Screening for high-risk features (e.g. hypoxia, retractions)
  - Travel history
  - Exposure history
  - Comorbidities (e.g. restrictive lung disease)
- After evaluating patient, place orders as necessary to include specimens for collection
- Complete brief medical documentation and consider utilizing a standard Coronavirus Template

➤ **RUNNER (Tech/RN):**

- Walking specimens to the lab (limited times per shift to conserve PPE)
- Assisting with what is needed

**D. Specimens to be Collected:**

- *Insert current local testing guidelines here*
- *Insert local collection and labeling procedure here*
- *Insert local lab delivery and transportation considerations here*

**E. Discharge from Tent:**

- Provided patient is stable without hypoxia or severe respiratory distress, they will be discharged home with current instructions on quarantine and return precautions.

- Once the patient is discharged by the provider, they will exit the tent wearing a mask and be given standard COVID-19 discharge instructions by the flow leader.
- Patient exits via opposite end of tent from entrance
- When exiting the tent, the patient will remove mask and place in the appropriate biohazard receptacle if they have been coughing or it is grossly contaminated.
- When patients exit, they should immediately use an alcohol-based hand sanitizer or soap and water station to wash their hands.

## **F. Special Notes:**

- Provider will be in full PPE when inside tent to include:
  - N95 Respirator Mask or PAPR
  - Face shield
  - Gown and gloves
- Between each patient, change gloves and sanitize hands. Note: remainder of PPE may remain on unless it becomes grossly contaminated with patient bodily fluids.
- If PPE needs to be changed, exit the canopy to doff contaminated PPE, sanitize hands, and don new PPE before reentering canopy. Use two-person doffing for PAPRs.
- Give patient preprinted discharge instructions with return precautions and home quarantine.
- There will be a supply cart located outside of the tent with additional supplies.
- PLEASE DO NOT take any additional supplies into the tent that are not needed at that time.
- Every day from 3a-7a the tent will be closed for cleaning by Environmental Services. Any extra supplies that are in the tent will be thrown away.

### Footnotes:

- 1) Home healthcare personnel should refer to Interim Infection Prevention and Control Recommendations for Patients with Known or Patients Under Investigation for Coronavirus Disease 2019 (COVID-19) in a Healthcare Setting.
- 2) Close contact is defined as—
  - a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case
  - or –
  - b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).

*Addendums: Instructions to consider from CDC Interim Guidance retrieved from CDC website April 16, 2020 @ 12:32 Central Time*

*Disclaimer: This content is intended as a resource for clinicians caring for critically-ill COVID-19 patients, based on available evidence and recommendations of governing bodies. The recommendations do not replace clinical judgment or the need for individualized patient care plans. While we attempt to keep this information up-to-date, the literature on COVID-19 is rapidly evolving, and we suggest that practitioners search for the most up-to-date literature on any specific topic. These guidelines will also rapidly evolve as they are implemented into clinical practice and we receive feedback from practitioners. Additionally, local factors should be taken into account if utilized. [Document created March 13, 2020]*

# 10 things you can do to manage your COVID-19 symptoms at home

## If you have possible or confirmed COVID-19:

1. **Stay home** from work and school. And stay away from other public places. If you must go out, avoid using any kind of public transportation, ridesharing, or taxis.



2. **Monitor your symptoms** carefully. If your symptoms get worse, call your healthcare provider immediately.



3. **Get rest and stay hydrated.**



4. If you have a medical appointment, **call the healthcare provider** ahead of time and tell them that you have or may have COVID-19.



5. For medical emergencies, call 911 and **notify the dispatch personnel** that you have or may have COVID-19.



6. **Cover your cough and sneezes.**



7. **Wash your hands often** with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.



8. As much as possible, **stay** in a specific room and **away from other people** in your home. Also, you should use a separate bathroom, if available. If you need to be around other people in or outside of the home, wear a facemask.



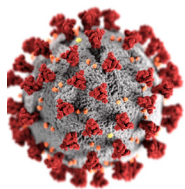
9. **Avoid sharing personal items** with other people in your household, like dishes, towels, and bedding.



10. **Clean all surfaces** that are touched often, like counters, tabletops, and doorknobs. Use household cleaning sprays or wipes according to the label instructions.



# What you should know about COVID-19 to protect yourself and others



## Know about COVID-19

- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.



## Know how COVID-19 is spread

- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.



## Protect yourself and others from COVID-19

- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.



## Practice social distancing

- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.
- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.



## Prevent the spread of COVID-19 if you are sick

- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.



## Know your risk for severe illness

- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.



# What You Can do if You are at Higher Risk of Severe Illness from COVID-19

## Are You at Higher Risk for Severe Illness?



Based on what we know now, those at high-risk for severe illness from COVID-19 are:

- People aged 65 years and older
- People who live in a nursing home or long-term care facility

People of all ages with underlying medical conditions, particularly if not well controlled, including:

- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised
  - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.
- People with severe obesity (body mass index [BMI] of 40 or higher)
- People with diabetes
- People with chronic kidney disease undergoing dialysis
- People with liver disease

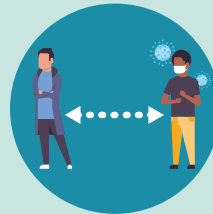
## Here's What You Can do to Help Protect Yourself



**Stay home** if possible.



**Wash your hands** often.



**Avoid close contact** (6 feet, which is about two arm lengths) with people who are sick.



**Clean and disinfect** frequently touched surfaces.



**Avoid all cruise travel** and non-essential air travel.

Call your healthcare professional if you are sick.

For more information on steps you can take to protect yourself, see CDC's [How to Protect Yourself](#).



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)