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## Preliminary / Initial Screening Reference Tool

### Ask ALL patients and visitors these two questions:

For patient and visitor safety, doctors' offices are performing a standard screening. I just need to ask you a couple of questions:

1. Are you experiencing fever **or** symptoms of cough and or difficulty breathing (e.g., lower respiratory illness)?
2. In the last 14 days, have you traveled to an [area with widespread ongoing transmission](#) (China, Iran, most European countries, United Kingdom and Ireland, and South Korea as of 3/17/20) **OR** been in close contact<sup>2</sup> with a person with a confirmed COVID-19 infection?

### **Phone contact:**

If "YES" to only one question – escalate to designated nurse for triage and referral for symptom management and/or rescheduling of appointments as appropriate.

If "Yes" to both questions – escalate to designated nurse for clinical triage of symptoms AND consult with local or state health departments to determine whether patients meet criteria for Persons Under Investigation (PUI).

### **In-person contact:**

If "YES" to **question 1 only** ("No" to question 2) – ask patient to perform hand hygiene and put on a mask. Isolate in exam room and place precautions sign on door. Escalate to designated nurse for clinical triage symptoms and determine if appropriate to reschedule. Clinical staff consider consultation with local state or health departments if clinically appropriate (e.g. other respiratory illness ruled out).

If "Yes" to **question 2 only** ("No" to question 1) – ask patient to perform hand hygiene and put on a mask. Escalate to provider or designee to determine if appointment may need to be rescheduled.

If "Yes" to **both question 1 & 2** – ask patient to perform hand hygiene and don mask. Isolate in exam room and place precautions sign on door. Escalate to designated nurse for clinical triage of symptoms and consult with local or state health departments to determine whether patients meet criteria for a Persons Under Investigation (PUI). Initiate protocols to disinfect areas of patient contact and identifying individuals who may have been in contact.

Type of Patient Interaction	Screening Question Answers	Ask patient to don mask and perform hand hygiene	Isolate in exam room and place precautions sign on door	Escalate to nurse designated to triage	Consult with provider to consider rescheduling	Notify local or state health department to determine if patient meets criteria for PUI
<b>Telephone</b>	“Yes” to only one			Yes	Yes	*
	“Yes” to Both			Yes	Yes	Yes
<b>In- Person</b>	Yes to question #1 only (no to #2)	Yes	Yes	Yes	*	*
	Yes to question #2 only (no to #1)	Yes			Yes	
	Yes to BOTH questions	Yes	Yes	Yes	Yes	Yes

\*designated staff to determine if clinically appropriate

1 Widespread ongoing transmission with and without restriction on entry to the United States, as of March 17, 2020 this list includes China, Iran, most European countries, United Kingdom, and South Korea  
Go to <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html> for up to date information

2 Close contact is defined as being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time OR having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)