

PUI Admission Process (Negative COVID test with high clinical suspicion)

Situation: A current process for admitting a COVID tested negative patient as a PUI exists given the current pandemic climate.

Background: Historically, admitting a PUI after a negative resulted test has required an Infectious Disease Consult for further testing. Given the nature of the pandemic, new knowledge of the progression of the disease, and the taxing on the system of specialty providers (ID in this case), it is necessary to create a new process for caring for patients that have tested negative on a PCR, but still have high clinical suspicion for COVID-19.

Assessment: There is no need for an automatic ID consult on this patient population. Steps have taken place to be able to house PUIs if needed. No PUIs will be cohorted in rooms. A positive test may not result for 48 hours (or more in some cases) after symptom onset. An Epic icon and process exists in identifying these patients in Epic.

Recommendation:

1. Patient presents to the ED and a rapid PCR COVID test is performed prior to admission.
 - a. COVID PCR test results in a negative result, but a clinical suspicion of COVID-19 remains.
2. ED provider discusses patient case with admitting provider.
3. If one or both of the providers are in agreement, the patient is admitted to the COVID unit in a private room as a PUI.
 - a. Admitting provider used COVID admission order set to ensure appropriate diagnostics and treatments are ordered.
4. A re-test of a rapid PCR COVID test is performed 24 hours after the negative PCR result.
 - a. Patient result – Positive
 - i. Keep in COVID unit as active COVID patient
 - b. Patient result – Negative
 - i. If no concerns from attending provider, then can be placed in non-COVID unit.
 - ii. If clinical suspicion for COVID-19 still present, consider re-testing in 24 more hours and consult ID.
5. Repeat step 4 as necessary.