

Night Hospitalist Rotation

COVID-related Addendum

Revised 6/25/2020

During the COVID-19 pandemic, the structure and workflow for inpatient medicine services may be adjusted according to patient care needs, particularly in anticipation of and during surge.

PATIENT FLOW

The appropriate unit for all patients requiring hospitalization will be determined by (1) the COVID test result and (2) the level of care requested by the provider.

COVID-positive patients may be assigned beds in the following units/beds based on level of care:

- **Med/Surg or Telemetry:** 2F Isolation Unit
- **Step-down:** 4BS (1-6), 4BN (1, 2, 11, 12)
- **ICU:** 5BS (1-6), 5BN (1, 2, 11, 12)

ADMITTING COVID-19 PATIENTS

- The Night Admitting Resident or Ward Team Resident will be admitting COVID-positive patients.
- It is the responsibility of the ED resident to send the COVID test. The ED resident may call out the patient for admission at any time.
- As the accepting provider, you may take sign-out on new admissions with or without the COVID test result.
 - While the COVID result is pending, you may continue reviewing the chart, writing basic orders, “eyeballing” the patient, and examining the patient using appropriate personal protective equipment (PPE) for person under investigation (PUI) for COVID-19. Do not write the “Admit to Inpatient” order while COVID test is pending.
 - Once you have the COVID result, follow appropriate patient isolation precautions when examining the patient and change the patient isolation order if needed.
- **As soon as COVID test has resulted, order/initiate “Admit to Inpatient” with the appropriate level of care**
 - **COVID-positive patients who require med/surg or telemetry level of care** should be admitted to the “2F” unit. Cardiac monitoring is available in the 2F unit. Under the location tab, make sure to click the “2F” selection.
 - **COVID-positive patients who require step-down level** of care should be admitted to the Step Down Unit, labeled (SDU) in the location tab in the admission orders.
 - **COVID high-risk PUI:** If the patient’s COVID result is negative but you have a high clinical suspicion that the patient has COVID, this patient should be treated as a COVID positive patient and triaged appropriately. In the “Admit to Inpatient” order, specify “COVID high-risk PUI” in the special instructions.
 - **COVID-negative, not a PUI:** Write the “Admit to Inpatient” order as normal.
- Update the “Patient Isolation” order following hospital policy:
 - **Enhanced precautions** for COVID-positive patients includes the “Patient Isolation” order for both CONTACT and AIRBORNE and a “Communication Order” for EYE PROTECTION.
- Prior to entering a room with a COVID positive patient or high-risk PUI, the appropriate personal protective equipment (PPE) must be worn, which includes an N95 mask, contact gown and gloves. CAPR’s are available in the charge nursing station, if desired. It is imperative that the NAR prioritize his or her own safety.
- If you have any questions or concerns, please contact the Hospitalist.