

Screening Tool Intervention Guide

Questions	What to do if symptoms are present
<p>1. Within 14 days of travel to anywhere w/known community transmission of COVID-19 OR contact with confirmed COVID-19 case?</p> <p>2. Fever? [actual or subjective]</p> <p>3. Cough?</p> <p>4. Shortness of breath?</p>	<p>If YES to question 1 AND either 2, 3, or 4 (i.e., developed symptoms after travel to a location with community transmission or contact w/a known COVID-19 case):</p> <ul style="list-style-type: none"> • Give the patient a mask and instruct that it must always be worn inside. • Place the patient in a temporary isolation cot near ventilation exhaust at the front or back of the tent. • Call provider to discuss possible testing ASAP <p>If YES to questions 2, 3, or 4 only:</p> <ul style="list-style-type: none"> • Review rest of tool and schedule an appointment for client to be seen by a provider ASAP: <p>@ their primary health provider, nearest FQHC, or Urgent Care (refer to health providers/FQHC prior to sending to Urgent Care or ED)</p>

[If yes to #3 above, ask 5-7]

<p>5. Have a cough for more than two weeks?</p> <p>6. Have severe coughing spasms?</p> <p>7. Has the person ever been told they have tuberculosis by a medical professional?</p>	<p>If YES to questions 5 or 6:</p> <ul style="list-style-type: none"> • Give the patient a mask and instruct that it must be worn inside at all times. • Place the patient in a cot near ventilation exhaust at the front or back of the tent. • If too ill to stay in shelter, send to Urgent Care / Emergency Department. <p>If YES to ANY of questions 5-7, refer to TB Clinic:</p> <ul style="list-style-type: none"> • Monday – Friday 9 – 4 PM, please immediately call the County Tuberculosis Clinic at 619-692-5565 and be available to help ask/answer questions that a trained person will ask client. • Weekend or after-hours, call San Diego County Tuberculosis Clinic on the following weekday (Mon-Fri) morning.
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[ask 8-10 for all]

<p>8. Rash or itchy skin?</p>	<p>If YES,</p> <ul style="list-style-type: none"> • Instruct client to shower and wash and dry all clothing and bedding on HOT. • Provide patient with sealable plastic bag to store belongings that cannot be laundered. Instruct them to keep it sealed for 2 weeks. • Help client schedule an appointment to be seen by a provider. <p>@ their primary health provider, nearest FQHC, or Urgent Care (refer to health providers/FQHC prior to sending to Urgent Care or ED)</p>
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<p>9. Does the person feel sick today?</p>	<p>Either coordinate a same-day or walk-in visit with their health provider, nearest FQHC, or send client to Urgent Care / Emergency Room based on symptoms</p> <p>@ their primary health provider, nearest FQHC, or Urgent Care (refer to health providers/FQHC prior to sending to Urgent Care or ED)</p>
<p>10. Does the person want to see a doctor?</p>	

[Ask 11 for females only]

<p>11. For Women only: Is she pregnant?</p>	<p>If YES or MAYBE, please schedule an appointment for client to be seen by provider:</p> <p>@ their primary health provider, nearest FQHC, or Urgent Care (refer to health providers/FQHC prior to sending to Urgent Care or ED)</p>
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