

Gaston Family Health Services COVID19 In Person Screening

Please ask every patient this question as you are checking them in.

In order to protect you and all of our patients, I am going to ask you a series of questions.

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|---|-----|----|
| 1. In the last 21 days, have you traveled? | Yes | No |
| 2. Do you have any of the following symptoms? | | |
| Cough | Yes | No |
| Shortness of breath | Yes | No |
| Fever | Yes | No |
| 3. In the last 21 days, have you been in contact (within 6 feet) with anyone that you know that has been diagnosed with COVID-19 (Coronavirus)? | | |
| | Yes | No |

STAFF Instructions

A patient or the person with them has a positive screen IF they answered YES to both questions 1&2 OR 2&3 OR ALL of the above. (If the screen is negative, please proceed with check-in as usual).

If the patient has a positive screen (based on criteria above), please do the following:

1. Provide the patient a mask.
2. If others are with the patient, explain that for their health and safety we ask that they go to their vehicle to wait. If they traveled via public transportation and/or do not have a vehicle to wait in, they should be given a mask and should remain with patient.
3. Staff should immediately contact the medical assistant to notify them of patient having a positive screen.
4. Medical Assistant place patient (and anyone with them) in the isolation room immediately wearing proper PPE.
5. Medical Assistant and Provider should be the only staff in contact with the patient, wearing proper PPE when entering room.
6. Medical Assistant/Provider should contact Local Health Department with patient identifiers and screening information to determine if COVID-19 is approved by state. If test is denied, proceed with testing through LabCorp based off clinical guidance provided by Medical Director.