

Triage Questions

1. Do you have any of the following symptoms?

- Fever and new and/or sudden sore throat, cough, shortness of breath or other lower respiratory symptoms?

2. Do you have any of the following exposure risks?

- Close contact with someone who has proven (lab tested) COVID-19 or suspected (in quarantine or has a test pending)
- Travel to a country/international where COVID-19 is endemic (All of Europe, S. Korea, China, Italy, Iran-*this is subject to change*)
- Exposure in a community or facility where there is ongoing widespread transmission (nursing home, dorm, day care center, school, other institution or community setting)

If answer is yes to 1 (only) or 1 and any of the exposures in 2 please proceed to testing guidance below.

If answer is no to 1 and yes to 2 please provide home care guidance and recommendations for social distancing practices, voluntary quarantine and good hygiene with options for telehealth should questions arise (see additional page).

Testing Guidance

Clinical Features	Exposure Risk Factors	Flu/RSV (rapid viral testing) & Strep Testing (if available)	COVID-19 Testing
No to question 1 (no symptoms)	Present or Not Present (No or Yes to question 2)	No	No
Yes to question 1 (respiratory symptoms)	Not Present (No to question 2)	Consider testing for rapid influenza and RSV If sore throat present consider rapid strep test	No
Yes to question 1	Yes to question 2	Test for rapid influenza and RSV If sore throat present consider rapid strep test	No if Flu/RSV/Strep (+) OR (-) and individual is otherwise well
Yes to question 1	Yes, to question 2 <ul style="list-style-type: none"> In addition requiring EMS or other triage to the Emergency Department or Hospital based on current condition 	Test for rapid influenza and RSV If sore throat present consider rapid strep test	Yes