

# **Admission Flowchart for Adult Patients**

# - Medicine

# **Patient Categorisation during COVID-19 Pandemic**

Green	Red				
1 – Lowest risk	2 – Low risk	3 – Moderate risk	4 - Confirmed		
No features of any other risk category	Patients where clinical concern exists, but where suspicion is low.  This includes patients without respiratory symptoms in when they have been in contact with a person with possible COVID-19 in the last 14 days	Patients meeting case definition where clinical presentation felt suspicious, but alternative diagnosis exists	Clinical diagnosis (characteristic presentation or x-ray findings) or positive swab		

Review/update of Risk Categorisation to be undertaken as part of each Clinical Review Any patients with loose stools – please ensure samples taken and patients isolated until results returned

Recording of Risk Categorisation to be recorded and updated as required on EPTS on the Infection Alert Icon

ALL WARD LEVEL AND INTER-WARD PATIENT MOVES MUST BE DISCUSSED AND AGREED WITH THE BED MANAGEMENT TEAM PRIOR TO BEING MADE.

# **Assessment Pathway: Management of Category 1-4 patients**

Patient attends ED and is assigned a COVID-19 risk category (1-4)

**Category 1 patients to AMUB** 

### Category 2 onward management

Patients are admitted to category 2 bays on suspected covid cohort wa

On receipt of swabs

#### **NEGATIVE SWABS**

- Patient is clinically re-assessed or use of Category in the notes if updated on same day as result
- If remains as Cat 2 then admitted to a GREEN ward and managed as normal admission (see green ward management)

#### **POSITIVE SWABS**

- Positive patient is moved Cat 4/ confirmed COVID ward if they have not moved there already based on clinical diagnosis
- Rest of bay remains Cat 2 cohort bay

Cat 2 bay open to other Cat 2 admissions - see page 4 for capacity management and escalation

#### Category 3 onward management

PATIENTS ARE ADMITTED TO **CATEGORY 3 BAYS ON SUSPECTED COVID COHORT WARDS** 

Category 2-4 to AMUA

rooms Cat 4s – 4 in a bay

Cat2 - side rooms first, then 2 in a

bay Cat 3s - 2 in a bay first, then side

On receipt of swabs

#### **NEGATIVE SWABS**

- Patient is clinically re-assessed
- Management of bay and patient remains YELLOW due to clinical suspicion and false negative rate

#### **POSITIVE SWABS**

- Positive patient is moved Cat 4/ confirmed COVID ward if they have not moved there already based on clinical diagnosis
- Rest of bay remains Cat 3 cohort bay

Cat 3 bay open to other Cat 3 admissions - see page 4 for capacity management and

Category 4 onward management

> **PATIENTS ARE ADMITTED TO CATEGORY 4 BAYS/WARDS**

**IRRESPECTIVE OF SWAB RESULTS PATIENTS WILL** REMAIN TO BE MANAGED **TOGETHER** 

Follow ending isolation pathway on page 6 when patient is ready

Cat 4 bays open to other Cat 4 admissions

### **AMUB MANAGEMENT**

- Patient assessed and admitted to **GREEN** Ward as normal
- If patient is assessed as suspected COVID after admission to AMUB. then assign COVID-19 risk category (2-4) and move patient WITHIN 1 **HOUR** to Suspected COVID Cohort ward (or AMUA if no COVID Cohort ward capacity available). Close bed for cleaning and then re-open to admissions.

### Management of new symptomatic patients on Green Wards

Patient develops symptoms in category 1

GREEN area

Assign category (2-4) to patient and swab following clinical assessment

**Suspected patient Category 2** 

**Category 2 Patient remains in bay** 

Designate bay as BLUE and close to new admissions

Index patient only swabbed and sample sent as to Preston for testing (Sample marked as BLUE).

On receipt of swab result

#### **NEGATIVE SWABS**

Bay is re-designated GREEN and reopened

#### **POSITIVE SWABS**

- Positive patient is moved Cat 4 / confirmed COVID ward if they have not moved there already based on clinical diagnosis
- Rest of bay remains YELLOW and reopened to other exposed Category 2 patients (not symptomatic Category 2 patients).

**Suspected patient Category 3** 

Category 3 Patient moved to Category 3 Bay on suspected COVID Cohort Ward

Remaining patients are recorded on EPTS as being potentially exposed and remain in situ.

Designate the bay as YELLOW
Bay remains open to new YELLOW
admissions i.e. Symptomatic Category 2
patients or patients exposed to Category 3
or 4 patients

On receipt of swabs

#### **NEGATIVE SWABS**

Management of bay and index patient remains YELLOW due to clinical suspicion and false negative rate

#### **POSITIVE SWABS**

- Positive patient is moved Cat 4/ confirmed COVID ward if they have not moved there already based on clinical diagnosis
- Rest of bay remains YELLOW bay

**Suspected patient Category 4** 

Category 4 Patient is transferred to COVID cohort ward

Irrespective of swab result,
remainder of bay is designated as
YELLOW and reopened for YELLOW
admissions
i.e. Symptomatic Category 2 patients
or patients exposed to Category 3 or
4 patients

# **Capacity Management & Escalation**

# **Business as usual principles:**

- Patient COVID-19 risk categories are to be reviewed and updated after every clinical contact on EPTS including details of swab result
- At the point a clinical diagnosis of COVID-19 is made and a patient is upgraded to Category 4, patients will be moved to fully utilised bays
- Number of patients in a bay will be dependant on escalation level (1-3) guidance

	Capacity Management Category 1	Capacity Management Category 2	Capacity Management Category 3	Capacity Management Category 4
Escalation Level 1	Management of patients in the green category remains the same – standard use of bays	Option 1 - side rooms Option – 2 in a bay	Option 1 – 2 in a bay Option 2 – side room	Cat 4s in bays of 4
Escalation Level 2	Management of patients in the green category remains the same – standard use of bays	Option 1 - side rooms Option – 2 in a bay	Once Cat 4s are all in bays of 4 - cat 3s cohort 4 in a bay – exhaust base wards before AMU	Cat 4s in bays of 4
Escalation Level 3	Management of patients in the green category remains the same – standard use of bays	Once Cat 3 and 4s are all in bays of 4 - cat 2s cohort 4 in a bay – exhaust base wards before AMU	Once Cat 4s are all in bays of 4 - cat 3s cohort 4 in a bay – exhaust base wards before AMU	Cat 4s in bays of 4

