INITIAL SCREENING

GENERAL
Assessment via telephone
Where possible, undertake initial screening and assessment over the phone or by video. Video is preferred as it provides additional visual cues about the person’s clinical appearance and may prevent the need for an in-person visit. (PP)

Target this to the affected person if possible, rather than their care or a family member. (PP/BMJ)

Assessment in person
If a person with symptoms suggestive of COVID-19 presents to a clinic without a prior telephone assessment undertaken, the initial screening outside the clinic or in an area away from other people. (PP/BMJ)

SYMPTOMS AND SIGNS
Ask about the following:
• date of onset of symptoms
• key symptoms from a list of breathless, dry cough, muscle aches, headache, sore throat, runny nose, diarrhoea and nausea

EPIDEMIOLOGY
For people in the community
• Electrocardiogram

For hospitalised patients

Be aware of differential diagnoses
Assess the degree of breathlessness by asking the person to describe:
• their presenting problem in their own words, whilst assessing the ease and comfort of their speech.

Other clinical factors

For hospitalised patients

Suspect COVID-19 where no other clinical focus of infection or alternate explanation of the patient’s illness is evident. (PP/BMJ)

ASSAY FOR SUSPECTED COVID-19

Other Clinical Factors

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EPIDEMIOLOGY
For people in the community
• Comorbidities: cardiovascular disease, including hypertension, lung disease, including COPD, asthma, or bronchiectasis, diabetes, chronic kidney disease, metabolic syndrome, obesity, cancer, diabetes, chronic obstructive pulmonary disease, chronic lung disease.

For hospitalised patients

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