

## Appendix

### COVID Ambulatory Planning Clinical Procedures for the UNC-Chapel Hill Respiratory Diagnostic Center (RDC) at the Ambulatory Care Center (ACC) when Drive-In Screening in Operation

#### Purpose:

The Respiratory Diagnostic Center (hub) is a venue where those with symptoms of an acute respiratory symptoms of cough or shortness of breath can be assessed for communicable respiratory infections including but not limited to COVID-19. The hub will provide triage and basic diagnostic services. Patients of all ages who are directed by HealthLink or internal clinics or providers to the hub based on established criteria. Below are the procedures that are to be followed at the hub including *patient flow, staffing, use of personal protective equipment (PPE), and minimal required materials and supplies.*

These procedures are based on conditions in which there are limitations that preclude use of the indoor space, and are subject to modification as new data become available, recommendations are revised, and resource availability changes. Drive-in screening will occur in the hub parking areas to increase screening capacity and conserve PPE.

#### Procedures:

The hub is intended to provide for highly-efficient screening of patients with symptoms of acute cough or shortness of breath for communicable respiratory infections, especially influenza and COVID-19. The primary goal is to efficiently screen individuals based on clinical presentation and history and test for respiratory pathogens, if indicated. Evaluations will be conducted by trained staff.

The hub will follow strict infection control procedures and patient flow pathways that are designed to prevent opportunities for transmission of respiratory pathogens from patient to patient and patient to healthcare staff. A distance of at least 6 feet will be maintained between patients and between staff not in personal protective equipment (PPE). Staff will wear appropriate PPE and will be trained in its proper use. Monitoring of adherence to infection control procedures will be instituted.

#### ***Patient Flow (see diagrams)***

Patients driving to the RDC will quickly pass through four stations prior to entering the swabbing area. These stations form a physical algorithm so that only those who are appropriate for swabbing and are registered enter the swabbing area. The RDC patient flow is designed to accommodate ~200+ patients per 8-hour day.

<i>Arrival to Facility</i>	<ul style="list-style-type: none"> <li>➤ Station 1: Patients arriving to the ACC parking lot will be met by a Greeter (non-clinical) wearing a surgical mask who will ask the patient is purpose of their visit to determine if presenting for an ACC clinic visit or to be seen at the RDC.             <ul style="list-style-type: none"> <li>• Those with ACC business will be sent to the back entrance of the ACC.</li> <li>• Those wishing to be evaluated at the RDC will be directed to the next station.</li> </ul> </li> </ul>
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	<ul style="list-style-type: none"> <li>➤ Station 2: Two Greeters (CMA or MA) wearing surgical masks will ask the patient if in the past 14 days they have had fever (subjective or objective), cough, OR shortness of breath (reflecting main elements of the NC state and UNCH COVID19 testing criteria).             <ul style="list-style-type: none"> <li>• Those without any of these symptoms will be directed to the lot exit and informed that at present COVID19 testing is reserved for those with one or more of these symptoms.</li> <li>• Those answering in the affirmative will be sent to the next station.</li> </ul> </li> <li>➤ Station 3: Greeters (CMA) wearing surgical masks and gloves, will ask the patient if they have an appointment to be seen (appointments are made via HealthLink line or clinics). Identity will be verified and checked on a computer station with EPIC list of appointments. All patients are provided with tissues, a paper plate to use as a writing surface, a pen to keep, registration labels for forms, the RDC Intake Form, the state PUI form to sign, state issues isolation instructions, the state home visitor log, and an informational sheet on when to expect test results and who to call with concerns or questions.             <ul style="list-style-type: none"> <li>• Those without an appointment will also receive a white card with the phone number of administrators inside the RDC who can rapidly register them and instructed to park in a central lot to complete this registration. The administrator will then instruct the patient to place the card on their dashboard so that the traffic attendant can see it – signaling they are now registered.</li> <li>• Those with an appointment will receive a brightly colored placard with the acronym “RDC” to be displayed in the windshield to signal to the traffic attendant that they had pre-registered.</li> </ul> </li> <li>➤ The patient is directed to a traffic attendant wearing a surgical mask who will direct them to the Check-In area at the RDC swabbing area.</li> </ul>
<i>Check-In</i>	<ul style="list-style-type: none"> <li>➤ CMAs wearing surgical masks, eye protection, gown, and gloves at portable workstations will again verify identity and check the patient in EPIC and release the labs. They will give pre-printed lab specimen labels in a specimen baggie to the patient and instruct them to drive to the swab area.</li> <li>➤ A traffic attendant will guide the patient to an open swabbing bay.</li> </ul>
<i>Swabbing</i>	<ul style="list-style-type: none"> <li>➤ At the swabbing bay two staff (CMA, RN, LPN, FNP, or MD) in N95 respirator or PAPR, eye protection, gown, and gloves will:             <ul style="list-style-type: none"> <li>• Ask the driver to place car in park and shut engine</li> <li>• Ask who is the patient(s) and collect the Intake Form, signed state form, baggie and labels. If forms not yet completed, complete at the bay.</li> <li>• The Intake Form will be reviewed to determine if criteria for swabbing met.                 <ul style="list-style-type: none"> <li>• If criteria met:</li> </ul> </li> </ul> </li> </ul>

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	<ul style="list-style-type: none"> <li>○ One staff will label forms and viral transport media tube while the other explains the nasopharyngeal (NP) swab procedure.</li> <li>○ Staff performs the specimen(s) collection using approved technique, places the swab in the media held open by the other staff and then they take the bagged specimen to an assistant who collects all specimens from each bay into a larger bag placed in the cooler for lab pick-up.</li> <li>○ If criteria not met:             <ul style="list-style-type: none"> <li>○ Counsel regarding rationale for not testing.</li> </ul> </li> <li>● The patient is instructed to depart and follow printed instructions given to them earlier.</li> </ul>
<i>Follow-Up</i>	<ul style="list-style-type: none"> <li>➤ Swabs are sent to the lab for Influenza/RSV rapid PCR. If both are negative, reflex to COVID19 PCR.</li> <li>➤ A nurse reviews all results the following day and calls patient with results when available.</li> <li>➤ Positive COVID19 tests are reported directly to the MD at the RDC.</li> </ul>

### Person Under Investigation (PUI) Form Completion and Results Reporting

As above, the Intake Form will be completed during the assessment. The filed Intake Forms will be reviewed the next day by the RDC team. The information included on the form along with the results of testing will determine if a PUI form needs to be completed and submitted to the state health authorities.

Results reporting to patients will be done by the RDC team. A log of results reporting will be maintained and documented in EPIC.

### Personal Protective Equipment (PPE):

ROLE	LOCATION	DECRPTION	TRAINING	NUMBER	PPE
<b>Greeter</b>	First Check-Point	Direct flow based on ACC vs RDC	None	1	Surgical Mask Eye Protection
<b>Greeter</b>	Second Check-Point	Direct flow based on symptoms or no symptoms	CMA	2	Surgical Mask Eye Protection
<b>Registration Check</b>	ACC Awning	Check registration status, provide paperwork	CMA	4	Surgical Mask Eye Protection Gloves
<b>Check-In</b>	Hub Check-In	Confirm identity, provide specimen bag and labels	CMA	4	Surgical Mask Eye Protection Gloves
<b>Swab Collector</b>	Hub Swab Collection Area	Confirm identity, collect forms,	CMA RN	16	N95 Respirator Eye Protection

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		collect swab, complete documentation	Provider		Gloves
<b>Specimen Handler</b>	Hub Swab Specimen Area	Collect bagged specimens and package and store for pick-up	CMA	1	Surgical Mask Eye Protection Gloves
<b>PPE Monitor</b>	Hub Swab Specimen Area	Monitor proper PPE use	CMA	2	Surgical Mask Eye Protection
<b>Traffic Control</b>	Parking Lots	Traffic Control	None	4	Surgical Mask Eye Protection
<b>Supervising Provider</b>	All locations	Oversee and troubleshoot	MD, DO, FNP, PA	1	Surgical Mask Eye Protection

### Training:

All RDC staff must receive relevant training. All will receive training in:

- RDC operations and workflow
- Staff roles and responsibilities
- PPE including donning and doffing techniques

CMA's and Physicians will be trained in:

- NP swab technique
- Safe specimen packaging

Videos

PPE donning and doffing:

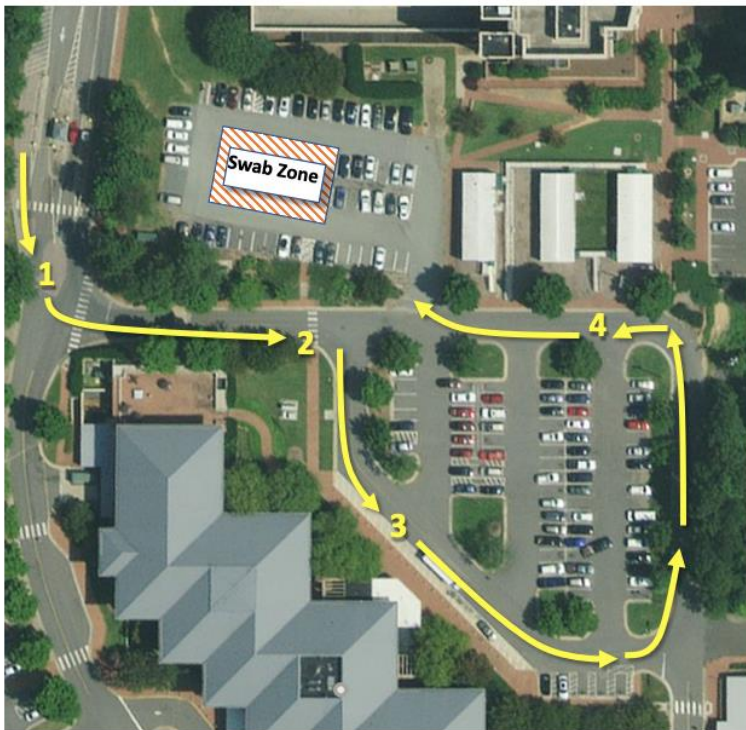
[https://www.dropbox.com/s/ym9g5c0hhr16gul/DonningDoffing\\_COVID19\\_PPE\\_480p\\_04Mar2020.mov?dl=0](https://www.dropbox.com/s/ym9g5c0hhr16gul/DonningDoffing_COVID19_PPE_480p_04Mar2020.mov?dl=0)

NP swab technique: <https://www.youtube.com/watch?v=DVJNWefmHjE>

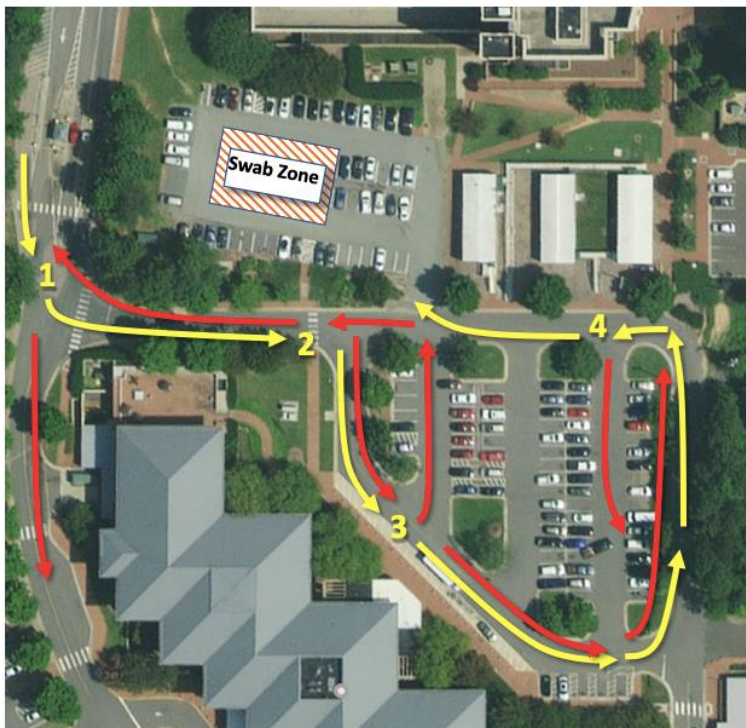
OP swab technique: <https://www.youtube.com/watch?v=-uyBJ0nv4oI>

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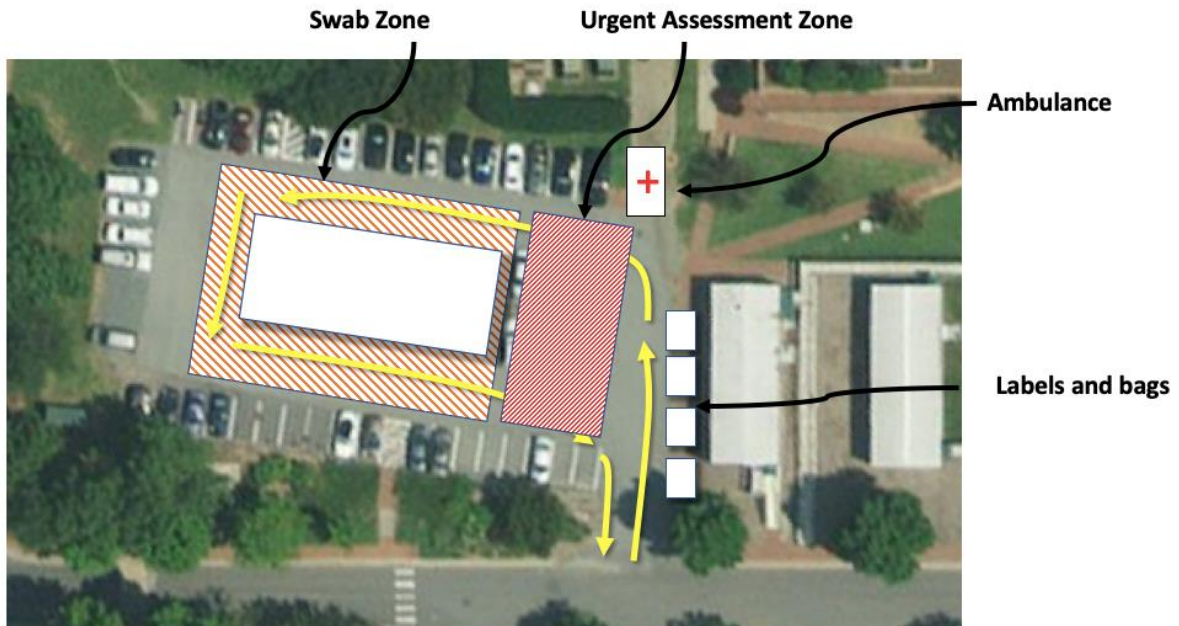
1. Traffic Control: **RDC** or **ACC**?
2. CMA: **Symptoms** or **No Symptoms**?
3. CMAs: **Appointment** or **No Appointment**?
4. Traffic Control: **Registered** or **Not Registered**?



1. Traffic Control: **RDC** or **ACC**?
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