

When possible, TELEHEALTH should be used to facilitate patient evaluation and prevent unnecessary transfer to hospital emergency department.

Post-Acute Care and Behavioral Health to Hospital Transfer - COVID-19 Assessment and Communication

It is critical for all Post-Acute and Behavioral Health Facilities to notify EMS and hospital emergency departments **PRIOR TO TRANSFER** of the Resident/Patient's COVID-19 status. This tool should be used to document the Resident/Patient's current clinical and COVID-19 status.

FACILITY

_____	Date
Contact Information	Time
Resident/Patient Name	Date of Birth

Reason for resident transfer and any input from the sending Physician/Practitioner

RESIDENT ASSESSMENT QUESTIONS: CHECK THE BOX FOR EACH OF THE CRITERIA APPROPRIATE TO THE RESIDENT/ PATIENT STATUS. FOLLOW THE DIRECTIVE FOR USE OF A STANDARD MASK ON THE PATIENT.

- Has the resident/patient been tested for COVID-19? If yes, date of test _____
- Does the resident/patient have a respiratory illness (*cough, sneezing, fever > 100, shortness of breath, or sore throat?*) Or is the resident/patient immunocompromised?
- Has the facility had a patient that was suspected or confirmed to have COVID-19?
- Has the patient or a member of the facility staff been lab tested positive for COVID-19, or in the past 14 days, been a Person Under Investigation (PUI) for COVID-19, traveled through an airport, traveled on a cruise ship, or had a respiratory illness that was NOT evaluated for COVID-19?

If the answer to ANY of the questions above is YES, you must mask the patient during transfer to the hospital, notify EMS and the hospital ED that the patient is confirmed or suspect COVID-19.

**MASK THE
PATIENT DURING
TRANSPORT TO
THE HOSPITAL**

If the answer to all of these questions is NO

**PATIENT MASK IS
NOT REQUIRED
DURING
TRANSPORT**

Report called to: _____

Date/time _____

