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# All Wales Guideline for the Management of patients with confirmed or suspected COVID-19 in the Community during winter 2020/21

A dynamic national guideline to safely manage patients in the community and to safely manage the flow of patients into hospital

- AIM 1** - To allocate the right resources to the right people at the right time
- AIM 2** - Selected patients are monitored with safety netting to detect deterioration early
- AIM 3** - All patients have a COVID infection status prior to hospital admission to reduce hospital transmission

## STEP 1 INFORMATION: TELEPHONE TRIAGE

### 1 Deteriorating patient or no improvement after 7 days

Especially those in high risk category, worsening or non-resolving symptoms:

- Breathlessness
- Fever

Low risk patients for SpO<sub>2</sub> monitoring may not require physical examination

[allwales.icst.org.uk/education/telephone-triage/](http://allwales.icst.org.uk/education/telephone-triage/)

Consider palliative care and ethical framework

[allwales.icst.org.uk/education/palliative-care/](http://allwales.icst.org.uk/education/palliative-care/)

## STEP 3 INFORMATION: TEST

### 1 Understanding SpO<sub>2</sub> and COVID Test

Emerging evidence suggests that people may not present with breathlessness despite significant hypoxaemia. If uncertain, a low threshold for pulse oximetry is advised.

[allwales.icst.org.uk/education/pulse-oximetry/](http://allwales.icst.org.uk/education/pulse-oximetry/)

Health Boards to oversee point of care testing (POCT) distribution in the community, pre-hospital, and/or Emergency Departments.

[allwales.icst.org.uk/education/poct-covid-test/](http://allwales.icst.org.uk/education/poct-covid-test/)

## STEP 4 INFORMATION: MANAGE

### 1 COVID Front door & non COVID Front door

Meeting a SpO<sub>2</sub> threshold should prompt the clinician to use clinical judgement based on the following suggested criteria. Use a Consultant Connect Advice line if further advice needed

Patients not requiring admission based on decision at front door to be monitored in virtual ward

[allwales.icst.org.uk/education/front-door/](http://allwales.icst.org.uk/education/front-door/)

### 1 Virtual ward

- Continue safety netting for 14 days
- Monitor SpO<sub>2</sub>

[allwales.icst.org.uk/education/virtual-ward/](http://allwales.icst.org.uk/education/virtual-ward/)

## STEP 2 INFORMATION: IN-PERSON ASSESSMENT

### 1 In-person assessment

An in-person assessment can be undertaken in a designated room in the GP practice or Cluster Hub or at the patients home, using PPE.

Risk stratify your patient to help determine whether they require admission to hospital or management in the community with safety netting.

[allwales.icst.org.uk/education/in-person-assessment/](http://allwales.icst.org.uk/education/in-person-assessment/)

### 1 Likely other respiratory

The differential diagnosis of patients presenting with suspected COVID-19 include:

- Pneumonia
- Exacerbation, or worsening of an underlying lung disease
- Other viral illnesses

[allwales.icst.org.uk/education/other-respiratory/](http://allwales.icst.org.uk/education/other-respiratory/)

### 1 High risk criteria

- Hypoxaemia in any patient\*  
\*Resting SpO<sub>2</sub> <88% on air or >5% below baseline in a patient with COPD
- High risk patients with SpO<sub>2</sub> <95% who are deemed too sick to stay at home or admit to virtual ward.

### 1 Moderate risk criteria

- Over age 65
- Under age 65 with co-morbidities
- BAME

### 1 Low risk criteria

- Under the age 65 with no co-morbidities

[allwales.icst.org.uk/education/risk-stratification/](http://allwales.icst.org.uk/education/risk-stratification/)

