

CW PRACTICE BRIEF

PRACTICE UPDATE - Emergency Department

Use of additional precautions in BCCH-ED during COVID-19 pandemic

Rationale: The Emergency Department (ED) setting is inherently different from the inpatient units and other outpatient settings e.g., patient complexity, emergent care needs, high acuity and high volumes. As a result, conducting a robust COVID-19 screening of patients and families prior to assessment by a healthcare practitioner can be limited. The following practice update will be implemented to further mitigate the risk of potential exposure of patients, families and staff to COVID-19 in the Emergency Department.

1. All ED HCWs will wear masks & eye protection at all times in the ED (as per provincial PPE framework).
2. All ED HCWs will also wear gowns and gloves at all times while delivering direct patient care for all patients in the ED for the duration of their ED visit until transfer or discharge.
3. Patients and caregivers will also wear masks as per the recent provincial policy update. [PHSA Mask Policy on SHOP](#)
4. **All patients/families** presenting to the Emergency Department will be placed in an individual room or physically distanced 2 meters from other people in the waiting rooms or hallways as directed.
5. ED HCWs will complete a COVID-19 screening form on all patients and/or support persons upon initial patient assessment.
6. If the patient and/or support persons screen positive for COVID-19, place the Droplet/Contact isolation sign on the door.
7. If a patient and /or support person do not have COVID-19 symptoms or risk factors for COVID-19 (recent COVID-19 contacts, travel, etc.), **do not put the Droplet/Contact isolation sign on the door.**
8. Patients with other infectious symptoms will require additional precautions as per Point of Care Risk Assessment even though their COVID-19 screen was negative.
9. Following the completion of a patient history and physical assessment and review of the COVID-19 screening form, a physician *may* determine that a patient and/or support persons is NOT suspected to have COVID-19 (or any other infectious condition), in which case **REMOVE the Droplet/Contact isolation signage on the door.**
10. Ensure isolation precautions are appropriately documented/recorded on any communications (MI requisitions, Transport Tracking, FirstNet tracking board, SHARED transfer form, verbal and written handovers).
11. When AGMPs are performed, N95 masks will be used in addition to PPE for Droplet/Contact precautions. Patients requiring AGMPs will be placed in Airborne Infection Isolation Rooms (AIIR) if one is available (or, if not, in a single room with the door closed).
12. All patients **who require admission and screen positive** for **ANY** symptom outlined on the COVID-19 screening form will have a COVID-19 test completed.
13. Admitting physicians will determine if isolation precautions for admitted patients are indicated and will document appropriate isolation precautions on the physician admission orders.
14. Upon patient discharge from ED, the rooms will be appropriately cleaned by EVS according to Standard Operating Procedures.

Version History

DATE	DOCUMENT NUMBER and TITLE	ACTION TAKEN
05-Jan-2021	C-05-13-60913 Use Of Additional Precautions In BCCH-ED During COVID-19 Pandemic	Approved at: CW COVID-19 Working Group

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