## CORONAVIRUS DISEASE 2019 (COVID-19) INMATE SCREENING TOOL

1. Assess the Risk Of Exposure			
□ Yes □ No	Traveled from, or through, any of the locations identified by the CDC as increasing epidemiologic risk within the last 14 days? Link to CDC Criteria		
☐ Yes ☐ No	Had close contact with anyone diagnosed with the COVID-19 illness within the last 14 days?		
If the answer to ALL the above risk of exposure questions is NO, then STOP here and proceed with normal intake. If the answer to ANY of the above risk of exposure questions is YES, then immediately assess symptoms.			
2. Assess Sym	ptoms	Date of Onset:	
□ Yes □ No	<b>Fever</b> (Fever may not be present in some patients, such as elderly, immunosuppressed, or taking certain medications. Fever may be subjective or objective).		
☐ Yes ☐ No	Cough		
☐ Yes ☐ No	Shortness of Breath (SOB)		
3. Implement Infection Prevention Control Measures if YES to the above questions in (2).			
3a. The Symptomatic Patient			
If the patient has any symptoms, implement Standard, Contact, and Airborne Precautions with Eye Protection			
<ul> <li>Report case promptly to facility leadership, infection prevention and control (IPC), public health and Regional and Central</li> <li>Office QIIPC Consultants.</li> </ul>			
□ Place a surgical mask on the patient and minimize proximity to staff and inmates			
<ul> <li>All staff escorting, evaluating, or in close contact (6 ft.) with the patient should perform hand hygiene,</li> <li>put on gloves, gown, fit-tested respirator (N-95), goggles or face shield and gloves before room entry or inmate contact.</li> </ul>			
Inmate will wear a surgical mask. Doffing: gloves, gown, exit room, doff face shield then N-95 and wash hands.			
☐ Escort patient to a <i>certified</i> Airborne Infection Isolation (AII) room.			
☐ If no All room is available, isolate in room with door closed and <i>preferably</i> air is exhausted outside.			
☐ Prepare for transport to a designated referral healthcare facility in coordination with the local public health authority (do			
not call for transport service without prior notification and escort in place to move inmate).			
☐ Minimize and keep a log of all persons interacting with (6ft.) or caring for, the inmate.			
Once the All room is empty for two hours, it can be cleaned and disinfected with an EPA registered disinfectant			
(Emerging viral pathogens claim), by a person in proper PPE.  ☐ Waste disposal: Double bag trash as hazardous waste. Linens: Double bag in linen hazard bag for washing in central laundry			
3b. The Asymptomatic Patient			
If the patient has no symptoms house in a single cell, and implement Standard, Contact and Droplet Precautions with Eye Protection			
Report case to facility leadership, QIICP, public health and Regional and Central Office QIIPC Consultants.			
☐ House patient in a single cell. The preferred location is within Health Services. If unable to house patient in a single cell			
•	contact Regional and Central Office Infection Prevention and Control Consultants.		
$\square$ Limit # of persons interacting with inmate. Utilize social distancing (6 ft.).			
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non-contact thermometer. Utilize disposable food trays. Have inmate clean and disinfect room daily with disposable			
towels, if possible. Trash will be double bagged out of room.			
wear a su	wear a surgical mask. Remove PPE, except face shield and mask at exit. Outside room, remove mask and wash hands.		
	Continue modified housing and observation procedures until 14 days after the last possible exposure date.		
☐ If at any time the patient becomes symptomatic, implement the steps in 3a — The Symptomatic Patient.			
Inmate Name (	Last, First):Registration #		
Institution:			

Date:

Provider Name/Signature: \_\_\_\_\_