Algorithm for Triage Assessment - Updated February 26 2020 0600-2300 Patient is 2300-0600 screened and registered Travel/ARI Predownstairs Screening over phone **FAIL PASS** Patient to per-Routine triage form hand hy-**FAIL PASS** assessment in giene and put on mask 2501, 2617, 2618 Patient to per-Register patient form hand hy-Screeners notify by phoning ED Admit as per Discharge as per MCWH staff at giene and put Clerk ext. 4210 **OB** protocol OB protocol on mask RN dons PPE, Complete Ad goes to registra-RN dons PPE, tion. Accompany Hoc ARI screengoes to ED. patient to 2615 ing in Power-Transport pafor assessment tient from ED Chart doors to 2615 for assessment Notify OB of pa-Routine triage tient's arrival in assessment in triage and failed Notify OB of 2501, 2617 or 2618 screening patient's arrival in triage and failed Discharge as Admit as per screening per OB proto-OB protocol col Presenting for OB complaint? In labour—admit. YES NO See L&D Algorithm Send patient to ER for Address materassessment of ARI/ nal/fetal wellbepresenting medical coming (NST) Discharge—still pregnant. Follow plaint up with OB by phone to define care plan; consider monthly US for growth/fluid; continue home isolation as directed by Public Health