

Non-Licensed/Non-Clinical Staff Symptom Screening of Patients

Expanding the scope of services of non-clinical staff in a public health disaster or emergency is an acceptable internal solution to address a surge in healthcare demand. So such staff can be utilized for the initial steps of triage. However, the term, “screening” will be used for these staff rather than “triage” because the latter implies a degree of medical interpretation which is to be avoided for staff who are not clinically trained. The strategy is use the patient’s report and interpretation and remove any interpretation by the staff person.

Ask the following questions in succession:

“Do you have a cough?”

“Have you had a fever in the past 24 hours?”

“Are you having any difficulty with your breathing?”

COUGH	FEVER	SHORTNESS OF BREATH (SOB)
Mask + Car Isolation + Regular Triage		
	Car Isolation and Regular triage	
		SOB + any symptoms = Immediate Triage / Provider Evaluation
Mask + Car Isolation + Regular Triage		
	Immediate Triage/Provider Evaluation	
Mask + Isolation Room + Immediate Triage/Provider Evaluation		

Definitions

Mask	Surgical mask + instructions for use and explanation for purpose
Car Isolation	<ol style="list-style-type: none"> 1) Patient returns to own car, to drive up to the front of the clinic 2) Given instructions to wait for triage 3) Given a card with clinic phone number to call in an event of symptom changes or emergency
Isolation Room	Exam room with closed door dedicated for respiratory isolation or Airborne Infection Isolation Room (AIIR)
Regular Triage	Triage by clinical staff per usual protocol
Immediate Triage / Provider Evaluation	Expedited triage by RN or Provider

