Triage of Acute Respiratory Disease (As of 7 Feb 2020)

Attendance of patients in hospital, OPD, Community Clinics

A
History of travel to China within past 14 days
OR
History of close contact with a person known to have 2019-nCoV illness within past 14 days

B
Presenting fever or symptoms of acute respiratory disease (eg. cough, shortness of breath)

Either A or B

If A only
Home or hospital quarantine for contact person

If B only
Further investigation for diagnosis and treatment

A and B

- Isolate the patient in a separate room (eg. Fever room)
- Take strict IPC measures depending on severity
- Take complete and detailed history and physical examination
- Inform immediately to DoMS, CEU, State and Regional Health Department

Person Under Investigation (PUI) for suspected pneumonia

- Isolate the patient
- Take specimen and send to NHL (To follow specimen collection guidelines)
- Follow “Clinical Management Guidelines for 2019 Novel Coronavirus (2019-nCoV) infection”

Uncomplicated illness PUI

Symptomatic treatment

Result (-)

Mild pneumonia PUI

Symptomatic treatment oral antibiotics

Result (+)

Result (-)

Severe pneumonia (suspected)
(Any of one)

1) Respiratory rate > 20 breaths/min
2) Severe respiratory distress
3) SpO2 < 90% on room air
4) Systolic blood pressure ≤100 mmHg
5) Altered mental status (GCS ≤15)

Assess for ventilator & specialist care

Result (+)

Confirmed case
- High flow O2 5L/min
- Supportive treatment including fluid therapy
- IV antibiotics/ antiviral
- Treatment of complications
- 14 days isolation

Death - proper disposal of the dead person

Note: If the patient’s condition becomes severe, refer to tertiary hospital where ventilator facilities and specialists services are available. Inform focal regional and national hotline before referral.

DoMS - Department of Medical Services       CEU- Central Epidemiological Unit