

## MEDICAL INTAKE

### Step 1: Notification

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The Isolation and Quarantine (IQ) Coordinator will contact the Nurse of an incoming patient. Transport scheduled by IQ Team.

### **Isolation and Quarantine intake will not be available after 7:00 PM.**

Patients will not be taken in or discharged after this time.

The IQ Coordinator will provide care team information regarding client, such as:

- medical and behavioral needs
- mobility
- language needs
- Plan of care
- Prescriptions

Assessing withdrawal risk:

### Opioids

- If patient is currently receiving MOUD
  - Methadone- ETS can make drop
  - Bupe- Dr. Dombrowski to continue prescribing and staff can pick up from pharmacy
- If not receiving MOUD but willing to start bupe, arrange telemedicine visit with Dr. Dombrowski to prescribe.
  - See bupe induction protocol
- If patient has opioids on site, discuss OD risk and promote bupe as temporary measure if patient is not ready to reduce use long term.

### ETOH Withdrawal

- Use CIWA scale to assess
- Nurse works with patient to determine minimum level to manage symptoms and keep within target CIWA range (See CIWA Protocol)

### Step 2: Admission

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1. Prepare PPE.
2. At arrival, complete intake assessment within an hour. Use PPE as indicated for client assessment. **See Intake Assessment form.**
3. Review Patient Code of Conduct and meal schedule. Housekeeping is not available daily. Request for trash pick-up, towels, clothing, and toilet paper and with Site Manager.

RN Processes  
Updated 3.23.2020

4. Review rounding and method of contact.

Tiering

Based on assessment report and intake vitals check, determine patient severity level:

Level 1 patients:

At intake:

- HR under 60 or over 100; or
- Sys BP under 90; or
- O2 sat under 95%; or
- Risk of ETOH or opioid withdrawal

Level 2 patients: All others. Escalate to L1 if shortness of breath at any time

Depending on room availability, assign rooms closer to the staff office for:

- Level 1 clients
- mobility disorders
- BH acuity

## ROUNDING

### Level 1

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Check-in on clients 2 x day am and pm with a visual and verbal assessment (from doorway or window) using the **Assessment – Level 1**. An additional midday phone check in may be added as needed.

For any client with abnormal vital signs at intake, please continue to check vital signs twice daily until no longer in the abnormal ranges defined above. This can be done by instructing the client to take their own vitals using the finger pulse oximeter and BP cuff.

### Level 2

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Check in on clients 2x per day via phone am and pm using the **Assessment – Level 2**.

### Standing orders

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- Narcan
- Epinephrine
- Benadryl
- Tylenol
- Imodium
- Guaifenesin
- Cough drops

**Please call the on-call physician with any concerns about patient status.**

## MEALS

Meals are provided by FairStart. Each bag contains 3 meals. Drop off is 1600-1800.

Once delivered, Care Team will note date on each bag.

Meals are delivered to the door. Knock and leave the food bag at the door.

## FOLLOW UP ON LAB RESULTS

For patients pending test results, CD Epi will follow up daily with test results. Site Manager and /or Nurse on site may also follow up periodically with referring health care provider to receive labs.

Discharge for COVID +:

1. At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
2. At least 7 days have passed *since symptoms first appeared*.

When COVID-19 lab results show negative:

1. Contact IQ Team to confirm results and discharge. IQ team will arrange for transportation if needed.
2. Complete Discharge Report. SW will lead discharge planning.
3. If it is after 1900, you may discharge in the morning. If client has secured a place that evening, client may be released.
4. SW will contact the Site Manager for the room to be scheduled for cleaning by BioClean.

## SHIFT CHANGE OVER AND SHIFT REPORT

Shift changeover is 0700 – 0730 and 1900 – 1930.

### **Huddle Board**

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The Huddle Board is where Care team will gather to report to on-coming care team. In report out:

- Include report brief status summaries on patients and any changes.
- Include summary of admissions and area of concerns.

Update the Care Team information on SharePoint at Huddle Board.

Important contact information:

**Medical Director contact 24/7:**

**Dr. Julie Dombrowski cell 206.714.9431 office 206.744.5640**

**Email [Julie.dombrowski@kingcounty.gov](mailto:Julie.dombrowski@kingcounty.gov)**

On-site security:

On-Call Security Officer: Gloria Fontenot 206.503.1505

On-site manager: 206.679.5908

On-Call Site Supervisor: Josephine Wong 206.390.8335

## DISCHARGE

SW will lead discharge planning.

1. Complete **Discharge Report**.
2. Communicate with Site Manager to schedule room clean.
3. Contact IQ Care Team to arrange for transport.