# COIP Field Site

**Novel 2019 Coronavirus Screening Protocol**

**Ver. 03-17-2020**

**All visitors to a COIP field site should be encountered before entering to office door and read the following script:**

“In order to protect the health of our patients and staff, we are going to ask you some questions about symptoms you might have and any travel that may put you at risk for the Coronavirus disease (COVID-19). Please understand that we are doing this for your and other patient’s protection. If you have symptoms or travel that put you at risk, we will ask you to put a mask on and we will take you to an exam room. We will wear a gown and mask while we are talking to you and finding out how you are doing. This is what is recommended we do until we know if you could have Coronavirus infection. We will give you information about Coronavirus and talk about if testing is needed. We ask for your patience and understanding.”

**After reading the script you must ask the following key questions:**

1. Do you have any of these symptoms:

 Cough \_\_\_Fever \_\_\_Shortness of breath \_\_\_Body aches \_\_\_Other symptoms\_\_\_\_

If yes to any of these, use the following procedures:

**If it is a UCCN or Primary care clinic day:** hand a surgical mask to the participant to place on their face immediately and notify a nurse or doctor. After the mask is on, allow the person to enter the field site and direct him/her to the designated isolation room and shut the door. If the patient has a phone with them, obtain the phone number so the doctor or nurse can communicate with him/her via phone.

**If not a clinic day:** hand a surgical mask to the participant to place on their face immediately and provide them with an information sheet on who to contact for further assessment and testing. The individual should be directed to go home or another private space to isolate him/herself and to contact their doctor or the Chicago Department of Health Number listed on the information sheet. **Person should not enter the office to call.**

***If a person answers no to the symptom questions above, and the next two questions:***

* 1. Have you traveled from Europe, China, Iran, South Korea, or Japan in the last 14 days? Yes \_\_\_ No \_\_\_\_

If yes, to any of the above please list travel locations (cities or Province):

Date(s) of travel

* 1. Have you had exposure to someone ill traveling from those areas or someone known or suspected of having Novel 2019 Coronavirus? Yes No

If yes, please describe the details

**Additional information for staff**:

Updated information is available from CDC on current locations of active novel 2019 Coronavirus is available at: : https:[//w](http://www.cdc.gov/coronavirus/2019-ncov/index.html)ww[.cdc.gov/coronavirus/2019-ncov/index.html](http://www.cdc.gov/coronavirus/2019-ncov/index.html)