

Psychiatry Unit Zone 4 : Clinical pathway for admitted patients during the COVID-19 pandemic

Patient admitted to Psychiatry Unit during the COVID-19 pandemic

Nursing care: Daily assessment of clinical symptoms of COVID-19 : Check symptoms according to RC-196 form: COVID-19 – screening tool – admitted patients (Fever-chills (> 38) or recent history of fever/chills, cough, runny nose, nasal congestion, headaches, shortness of breath and sore throat)

Does patient have symptoms related to COVID-19?

YES

NO

1. **Place in isolation in their room and have them wear a mask.**
2. Notify the on-call/attending psychiatrist.
3. Notify Claudine at Bed management during the day on weekdays and the supervisory during the evening/night/weekend.
4. Complete form RC-196B COVID-19 – Screening tool – admitted patients and fax to number on form for Zone 4.
5. Transfer patient to COVID-19 SUSPICIOUS Unit: **Use PPE** (droplets -contacts) for all interactions with the patient and to transfer the patient to COVID-SUSPICIOUS Unit (gown, gloves, blue surgical mask and goggles).
The swab test will be done at COVID-19 SUSPICIOUS Unit
6. Have the patient's stretcher/wheelchair and room cleaned after the transfer.

Results by swab testing?

Results: COVID-19 POSITIVE

Patient transferred to designated COVID Unit at regional hospital

Results: NEGATIVE

If no other testing required (e.g. influenza), patient returns to Psychiatry Unit.

Patient admitted to designated COVID Unit under care of physician at COVID Unit

Patient calm and cooperative

Consultation service of psychiatric nursing care

Patient unstable from psychiatric standpoint/agitated/uncooperative

Psychiatrist in ongoing consultation during the patient's stay at COVID Unit

Patient discharged from designated COVID Unit

Assessment of need for nursing care staff at Psychiatry Unit to work in collaboration with staff of the designated COVID Unit

Patient discharged from Psychiatry

PERMANENT DISCHARGE

Patient transferred to Psychiatry Unit