



COVID-19 Infection Control in the Outpatient Setting During Community Transmission Quick Guide

The NYC Department of Health and Mental Hygiene (DOHMH) recommends the use of standard, contact, and droplet precautions when caring for patients who have confirmed or possible Coronavirus disease 2019 (COVID-19). When coming into close contact or caring for a patient with possible or confirmed COVID-19, personal protective equipment (PPE) should include:

- facemask (procedure or surgical mask) AND gown AND gloves AND eye protection (goggles or face shield)
- N95 respirator or Powered Air Purifying Respirator (PAPR) is only required for *aerosol-generating procedures* (e.g., high flow O2, nebulizer)

The safety of our healthcare workers is a top priority. These measures are part of an [overall infection control package](#) designed to keep healthcare workers safe including: rapid identification and source control of symptomatic patients (masking and separation), strict adherence to respiratory and hand hygiene practices, [training staff on correct use of PPE](#), and routine environmental cleaning and disinfection of surfaces and equipment. To minimize unnecessary exposures in the healthcare setting, we encourage you to perform an initial evaluation of patients with fever or respiratory symptoms remotely via telephone, messaging or video. *Testing for COVID-19 is not recommended for persons with mild and moderate illness*, unless a diagnosis may impact patient management. Patients who can be safely managed at home should be given [instructions](#) to self-isolate for **7 days** following onset of symptoms and **72 hours after being consistently afebrile (without the use of antipyretic medication) with resolving respiratory symptoms**. For more information on COVID-19 for healthcare providers, go to the [DOHMH COVID-19 Provider Page](#).

Outpatient Facility Infection Control Recommendations				
Setting	Scenario	Patient being evaluated	Healthcare Workers	Non-Clinical Staff
All areas	Patient without fever or respiratory symptoms ¹	Standard precautions ²	Standard precautions	Standard precautions
Waiting area	Patient with fever or respiratory symptoms	Immediately give facemask and separate from others	Wear facemask and gloves if within 6 feet of patient	Wear facemask and gloves if within 6 feet of patient
Exam room <i>Place patient with fever or respiratory symptoms in a private room</i>	Initial evaluation of patient with fever or respiratory symptoms	Facemask	Facemask Gown Gloves Eye protection	Avoid entering the room - Facemask, gloves and avoid close contact if entry necessary
	Patient determined to be low suspicion for COVID-19 (i.e., alternate diagnosis more likely, such as allergic rhinitis)	Facemask	Facemask	Standard precautions

¹ New cough OR new shortness of breath OR new sore throat

² [Standard Precautions](#) are used for all patient care. They're based on a risk assessment and make use of common-sense practices and personal protective equipment use that protect healthcare providers from infection and prevent the spread of infection from patient to patient.



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<i>with door closed</i>	Patient with COVID-19 like illness*	Facemask	Facemask Gown Gloves Eye protection	Avoid entering the room - Facemask, gloves and avoid close contact if entry necessary
	Specimen collection for COVID-19 testing (nasopharyngeal/oropharyngeal swabs) ³	Facemask; only remove for specimen collection	Facemask Gown Gloves Eye protection	Do not enter room during procedure
	Any aerosol generating procedure with symptomatic patient (e.g., high flow oxygen, nebulizer); <i>avoid whenever possible</i>	Facemask when possible; only remove when necessary for treatment	Minimize close contact (<6 ft) N95 if available (or facemask) Gown Gloves Eye protection	Do not enter room during procedure
All areas Environmental Cleaning	Room cleaning after a patient with possible COVID-19 vacates room - Can enter room immediately after patient leaves		Facemask Gown Gloves Eye protection if risk of splash	Facemask Gown Gloves Eye protection if risk of splash

COVID-19 LIKE ILLNESS* = new onset of subjective or measured ($\geq 100.4^{\circ}\text{F}$ or 38°C) **fever OR cough OR shortness of breath OR sore throat** that cannot be attributed to an underlying or previously recognized condition. (in children, fever with sore throat may be attributable to conditions other than COVID-19 (e.g., strep throat) and parent/guardian should consult a healthcare provider)

CONFIRMED COVID-19 = Ill person who tests positive for COVID-19

POSSIBLE COVID-19 = Person with COVID-19 like illness but for whom there is not a laboratory-confirmed diagnosis.

³ Testing for COVID-19 is not recommended for persons with mild-moderate illness, unless a diagnosis may impact patient management.