Clinical Course

Virological phase

Immunological phase

Mild Self Limiting Illness in 80%

Worsening hypoxia occurs around day 7

ARDS

Shock

Renal Failure

Cardiovascular collapse

5% poor outcome requiring critical care

Unwell, deteriorating

20 - 30% require hospitalisation

At risk of deterioration:

- Steroids or immunosuppressants
- Chronic respiratory disease
- Chronic kidney / liver disease
- Cancer
- Cardiovascular disease
- Diabetes
- Smoking
- Obesity
- Frailty

Clinical Symptoms:

- Fever >37.8
- Dry cough (occ sputum)
- Sore throat
- Fatigue
- Pain
- Other Symptoms: Dyspnoea, Chest pain, Anosmia/Dysgeusia, Headache, Dizziness, Abdominal pain, Nausea, Diarrhoea

Clinical triage

1. Connect
   - Get prepared
   - VC possible?
   - Confirm Patient ID
   - Location
   - Contact Number

2. Clinical triage
   - If they sound or look very sick—such as shortness of breath—go direct to red flags.

Establish what the patient wants out of the consultation

- Clinical assessment
- Referral
- Certificate
- Reassurance
- Advice

3. Clinical assessment
   - Over phone, ask carer/patient
     - State of breathing?
     - Colour of face/lips?
   - Over video
     - General demeanour?
     - Skin colour?
     - Respiratory rate?
   - Respiratory function (especially inability to talk in full sentences)
     - How is your breathing?
     - Is it worse than yesterday?
     - What does it stop you doing?

Patient may be able to take their own measurements if they have instruments at home (temperature, pulse, peak flow, BP, O2 saturation). Interpret self-monitoring results with caution and in the context of your wider assessment.

4. COVID most likely diagnosis?
   - No?
     - Refer GP/OOH
   - Yes?
     - Patient pathway
     - NH?
     - CFS 7+?
     - ACP/DNACPR?

5. Clinical Frailty Score
   - Frailty
     - Do they need daily help with washing or dressing?
   - Assessment at home
     - DN
     - GP
     - ANP
     - H@H
     - Dom O2
     - Anticipatory Prescribing

Clinical Triage

Notes: Referred to OOH.

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Notes: Referred to OOH.
Assessment of severity

Mild symptoms?

Stay home
Self management
Fluids 6-8 glasses per day
If living alone – someone to check on them

Moderate or severe symptoms?

Assessment at COVID assessment clinic

Respiratory rate 24+
O₂ saturations <92% (In COPD SpO₂ <88% or below baseline)
Significant clinical concern

Immuno-compromise
Significant comorbidity

Assessment at hospital

Red Flags – 999 if necessary

Useful contact numbers
ED___________________________
Palliative care__________________
Respiratory on call______________
Hospital @ Home_______________
District Nursing_________________

This infographic, intended for use in a primary care setting and community COVID-19 hubs is based on data available in March 2020. It may be subject to change.

Additional Resources
Primary Care Resus Guidelines
BMJ Primary Care Guidance
Health Protection Scotland – COVID-19 Guidance for Primary Care
Health Protection Scotland – Literature Review for COVID-19
For pregnancy and paediatrics guidelines (see national clinical advice guidance)
NHS Inform

This has been adapted by Dr Stefanie Lip, Dr Erica Peters, Dr Michelle Watts, Dr Beth White, Dr Dan Beckett, Prof Graham Ellis from: Greenhalgh T, Koh G. Covid-19: a remote assessment in primary care. BMJ 2020;368:m1182

Disclaimer: This infographic is not a validated clinical decision aid.