

TRIAGE TOOL FOR INFECTIOUS DISEASES -TEAM ED & IPC HOMERUN!

Outil d'aide à la décision pour les maladies infectieuses lors de l'arrivée des usagers à l'urgence—La combinaison des expertises



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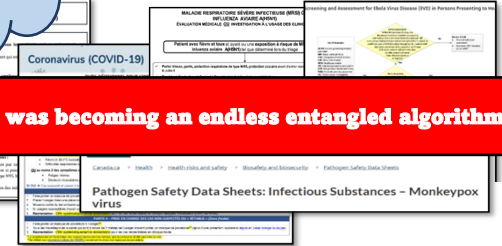
ISSUE

Triage is complex : it requires skills and honed expertise
 Triage, including evaluation of infectious risks must be done within 5 minutes!
 Triage serves to quickly and reliably :

- ◆ Determine a crucial clinical trajectory
- ◆ Identify the risks of transmission of a communicable disease
- ◆ Implement the appropriate IPC measures as needed



Screening was becoming an endless entangled algorithm!



In the pre-COVID-19 era, a limited number of various triage tools were sufficient to cover the basic infectious diseases. Then COVID-19 happened... and along came M-Pox, avian flu, a new Ebola virus, and so on

Considering :

- ◆ The impact of COVID-19 pandemic measures
- ◆ That travel restrictions have been removed
- ◆ That COVID-19 is no longer our sole preoccupation
- ◆ That every healthcare facility will need to adjust or develop their own triage tool

How to do it ALL?

PROJECT

Design a decision tool to streamline the infection risk assessment by combining the different existing triage tools

Structure and organise the sequence of questions with the goal of obtaining a **SIMPLE** decision-making process that would allow IPC measures to be applied when needed, **WITHOUT COMPROMISING EFFICIENCY**

Add **ALL** but focus **ONLY** on the important details on signs/symptoms and infection control measures to help decide if additional precautions are required

METHODOLOGY

- ◆ Review of infectious diseases questionnaires and triage tools available
- ◆ Keep symptoms at the core of the assessment and not the diagnoses
- ◆ Accepting that more patients will be isolated at triage knowing that a full clinical evaluation will follow
- ◆ Simplify and reduce - streamline
- ◆ Test the process, making it better with every cycle (PDSA)
- ◆ Separate the triage from the IPC add-ons - lighten the algorithm
- ◆ **COMBINE ED AND IPC EXPERTISE** : within MSSS, with Institut national de santé publique du Québec AND with clinicians from the healthcare establishments from around the province

RESULTS

In 3 months - Team ED and IPC homerun!

Simple + Efficient + Precise + Useful + Practice based

The **DECISION-MAKING TOOL FOR INFECTIOUS DISEASES WHEN PATIENTS ARRIVE AT EMERGENCY DEPARTMENTS** was published on the MSSS web portal, Nov. 2022.

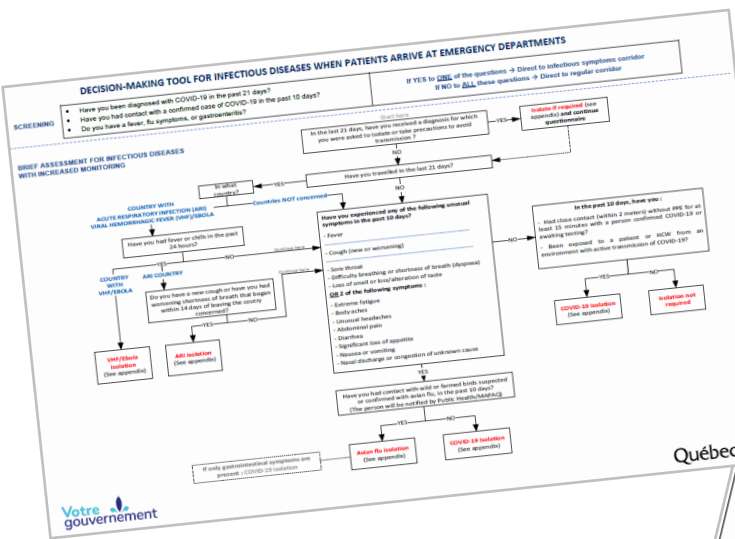
Triage and IPC tool that streamlines the infection risk assessment and clinical evaluation of the patient in one algorithm and 2 annexes

Can be used by ED and IPC practitioners and may be adapted locally as needed

Provides links to referred web sites e.g.: Quebec Public Health list of countries with infectious diseases advisory (viral hemorrhagic fevers, SARS, etc.), Table 4 and 5 of Health Canada *Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings*, etc.

Viral gastroenteritis not included - **Why?** It's included in the pathway of COVID-19 that lists signs and symptoms of GE

Work still in progress! This tool will have to be up-dated and improved with the evolving epidemiology of COVID-19



APPENDIX - DETAILS FOR ISOLATION OF PATIENTS PRESENTING INFECTIOUS SYMPTOMS		APPENDIX - DETAILS FOR ISOLATION OF PATIENTS PRESENTING INFECTIOUS SYMPTOMS WITH SKIN RASH	
COMMON FEATURES	ISOLATION	COMMON FEATURES	ISOLATION
COVID-19 Fever Cough Sore throat Loss of taste or smell Fatigue Headache Muscle aches Diarrhea Nausea or vomiting Red, painful, itchy eyes Swollen lymph nodes	COVID-19 Isolation (Clear separation)	Scarlet fever Fever Rash Strawberry tongue Sandpaper rash Swollen lymph nodes	Scarlet fever Isolation (Clear separation)
Measles Fever Cough Runny nose Red, itchy eyes Rash	Measles Isolation (Clear separation)	Scarlet fever Fever Rash Strawberry tongue Sandpaper rash Swollen lymph nodes	Scarlet fever Isolation (Clear separation)
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