Important Information for Connecticut Physicians, APRNs, PAs, and RNs

About COVID-19 – March 16, 2020

Connecticut is experiencing community transmission of SARS-CoV-2, the coronavirus that causes COVID-19. Patients with possible COVID-19 are seeking evaluation and guidance, and all healthcare providers are vital in the public health response to COVID-19.

It is understandable that your team is anxious, as are your patients, and perhaps you are too. Your caring and reassurance can be of tremendous benefit to your patients and staff. As difficult as this time is, it is a special time to serve your patients when they need it the most, and we all thank you for it.

Evaluation of Patients with Possible COVID-19

You are a trusted source for patients to have their questions answered and their concerns addressed in the context of their own health status and social situation. The Centers for Disease Control and Prevention (CDC) and Connecticut Department of Public Health (DPH) websites have valuable information and educational resources on COVID-19, infection prevention, and self-care for patients and their caregivers.

All patients who are well enough to stay home should be recommended to do so and practice frequent handwashing, disinfection of high-touch surfaces, and social distancing. Those who can maintain a distance of 6 feet from household members with respiratory symptoms should do so if possible.1

Outpatient Evaluation:

Evaluation and guidance of patients with possible COVID-19 (e.g. fever, cough) can be safely done in the outpatient setting. Testing is becoming more available to outpatient settings through commercial laboratories and “drive-through testing” sites, many of which require a physician’s order. Routine referral of patients to our already heavily burdened hospital ERs without evaluation will quickly overwhelm them.

Some outpatient providers are concerned about not having adequate personal protective equipment (PPE) to evaluate and care for patients with possible COVID-19. You might see providers in full PPE at testing sites and wonder if you need to be similarly prepared. The following recommendations from CDC are more consistent with outpatient settings2:
• SARS-CoV-2 spreads by droplets and direct contact; airborne transmission from person-to-
person over long distances is unlikely.
• N95 respirators and negative pressure rooms are not always necessary; they are recommended 
for aerosol-generating procedures when available.
• For lower-risk procedures, patient evaluation, and routine care: use regular surgical facemasks, 
appropriate eye protection (face shields; glasses are inadequate), gowns, and gloves.
• When triaging patients, have patients with respiratory symptoms put on masks, and isolate 
patients with possible COVID-19 in examination rooms with the door closed.

CT DPH recognizes that recommended PPE is in short supply. Proactively check with your usual PPE 
supplier on status and be prepared for shortages. Extend current supplies with careful PPE stewardship, 
following CDC recommendations for conserving PPE.¹

As our communities adapt to disruptions of daily activities, it is expected that daily practices of medical 
clinics will also change:²

• Explore alternatives to face-to-face triage and visits, such as telemedicine. Appointments may 
not be necessary if the patient can be managed from home.
• Postpone elective procedures, surgeries, and non-urgent outpatient visits. Doing so may also 
help with PPE supply.
• Physical barriers and alterations to patient flow can minimize exposing medical personnel and 
patients to infection. Minimize patient time in waiting areas; consider alternate waiting areas.

Hospital Evaluation:

Triage and Infection Control: follow your institution’s policies for evaluating patients with possible 
COVID-19, ensure patients with cough are wearing masks, and continue to wash your hands before and 
after seeing each patient.

Testing for COVID-19: Testing availability is increasing as commercial testing becomes available.

CT State Public Health Laboratory (SPHL) testing no longer requires prior approval by DPH and is 
reserved for hospitalized patients and healthcare providers with symptoms consistent with COVID-19 
(most commonly, fever and cough).

• Please do not submit specimens unless they are from hospitalized patients or healthcare workers.
• CT SPHL will prioritize specimens from:
  o Healthcare workers that provide direct patient care in hospitals
  o Patients who reside in congregate settings such as shelters, nursing homes, dorms, and 
prisons
• For patients in the Emergency Department who will not be admitted, hospitals are building 
capacity for in-house or send-out laboratory testing.
• Patients may also seek testing at “drive-through testing” sites, many of which require a 
laboratory test order from a physician.

While Public Health agencies, the 211 Hotline, and other COVID-19 hotlines can provide information 
and general guidance on COVID-19, they can neither perform medical evaluations nor deliver medical 
care. The hotlines can help answer general questions your patients might have about COVID-19, 
allowing you to conduct patient-specific evaluation and care.
Case Reporting
DPH is no longer requiring PUI (Persons Under Investigation) forms with submission of testing specimens. Please fax completed PUI forms for COVID-19-positive patients to (860) 509-7910. The COVID-19 PUI form can be found here: https://portal.ct.gov/Coronavirus

Resources