COVID-19 Community Testing Pathway for GP/LUCS In NHS Lothian

GP’s/LUCS should make an assessment using the most up to date [case definition](https://www.hps.scot.nhs.uk/a-to-z-of-topics/wuhan-novel-coronavirus/) and ensure **the patient meets both the clinical and epidemiological criteria**. Ideally this assessment should be made over the phone. If the patient is already in the practice or LUCS, follow the [primary care guidelines](https://www.hps.scot.nhs.uk/web-resources-container/novel-coronavirus-2019-ncov-guidance-for-primary-care/) and/or local LUCS pathway.

The up to date list of [risk areas](https://www.hps.scot.nhs.uk/web-resources-container/novel-coronavirus-2019-ncov-risk-areas/) is here.

## Adult Patient(s) with severe symptoms:

If a patient has severe symptoms requiring potential admission to hospital please discuss with RIDU by calling NHS Lothian switchboard on 0131 536 1000 and asking for infectious diseases doctor on call.

## Adult Patient(s) with mild symptoms:

* **Please ensure that the patient fits the** [**case definitions**](https://www.hps.scot.nhs.uk/a-to-z-of-topics/wuhan-novel-coronavirus/) and has one of the following: cough, shortness of breath and/or fever alone.
* Lothian now has a community testing team who can test people who meet the case definition with mild symptoms in their own home.
* If the patient has mild symptoms and fits the case definition above, please email the [assessment form](http://intranet.lothian.scot.nhs.uk/Directory/healthprotection/Pages/GPNoticeBoard.aspx) to the following email address: wgh.infectiousdiseases@nhslothian.scot.nhs.uk.
* Please follow the ‘what to tell the patient’ section.
* Patients must self isolate at home [*home isolation advice sheet*](http://intranet.lothian.scot.nhs.uk/Directory/healthprotection/Pages/GPNoticeBoard.aspx)
* If you have any concerns regarding the if the patient is suitable for testing for COVID-19 or their suitability for home isolation please contact The Health Protection Team on 0131 465 5420 for further advice (eg patient does not have capacity to understand advice, patient has package of care, patient not able to arrange own food and medicines, accommodation not suitable for home isolation, household members at increased risk of severe disease)
* The Community Testing Team will review each assessment form. If the case does not fulfill the possible case definition, they will NOT be tested. The GP will be emailed back on the same day, or next day if the assessment form is sent after 3pm, to inform them of decision and the GP should contact the patient to discuss clinical management of alternative diagnoses. The Community Testing team will not contact the patient.
* The Health Protection Team will inform the LUCS team of any patients’ forms assessed by LUCS Friday 6pm – Sunday 5pm that do not meet the possible case definition and therefore will not be tested. After this time, the patient’s own GP will be informed the next working day that the patient will not be tested.

## Children with severe symptoms:

* All children (age 13 and under) with severe symptoms must be discussed with the paediatric medical registrar on-call (Bleep 9424 via RHSC switchboard). Patients will likely need to be seen in RHSC A&E.

## Children with mild symptoms

* All children (age 13 and under) with mild symptoms can be referred using the adult referral form (see above). The child will then be referred by RIDU the following day to Dr Laura Jones, Paediatric Consultant, for consideration of community testing.

# Management of a possible case(s) NOT requiring hospital admission

## Community Testing Team

Following email notification from GP/LUCS, the community testing team will contact the patient and arrange a time for testing within the following 48 hours.

Patients should continue to self isolate.

## What to tell the patient:

* Advise the patient that we have a community testing team and someone will be in contact with them about testing over the next few days.
* Please advise patients that it may take up to 48-72h before the team arrives.
* The team will telephone the patient shortly before arrival and so patients should answer their telephone if called.
* The community team will be dressed in protective clothing and wearing a mask. They will take a nose and throat swab from you.
* You will be informed of the results within 48 hours. The team that advises you of the results will tell you if you can leave self isolation and what to do next.
* You must self isolate at home (*For information on home isolation please see the* [*home isolation advice sheet*](http://intranet.lothian.scot.nhs.uk/Directory/healthprotection/Pages/GPNoticeBoard.aspx) *and ensure patient is aware of information.*).
* If anyone else in the family becomes unwell they or you (if a child) should contact your GP or 111 if your GP is shut.
* If you get worse you should contact your GP or 111 if your GP is shut (or 999 if medical emergency) stating clearly that you are in self isolation.
* Check if any co-travellers have symptoms and advise to contact their own GP by phone.
* Check if any of their household contacts / co-travellers are health care workers and advise them to call their Occupational Health for advice.

## RESULTS

Lothian Health Protection Team (HPT) will be informed by virology of 2019 novel coronavirus (COVID-19) results only and will contact the possible case by telephone to inform them of this result. Routine respiratory virus results will be available to GPs as per normal procedures.

Results should now be available within 36 hours of the swab being taken. The Health Protection team will inform patients of the results within 48 hours of the swab being taken.

**A negative result does NOT automatically mean that they can come out of home isolation**. HPT will discuss this with the person and give them appropriate advice.

**Note:** Patients should have a repeat COVID-19 test if their clinical symptoms worsen, or if within their 14-day observation period new symptoms develop. The observation period refers to 14 days after arrival from risk area or last contact with a confirmed case.

In this situation a further referral for community testing or if symptoms are concerning, discussion with the Infectious Diseases Unit should occur.