

GP remote triage assessment

collect/send pulse oximeter if appropriate

remote assessment continues

GP F2F assessment at hot site or zone

See clinical flowchart Annex 1

Keep at home/care home

Hospital admission/assessment

Advise Covid test if status not already known (do not wait for result)

Symptomatic **AND EITHER** ≥ 65 yrs **OR** shielded cohort **OR** clinical concern considering individual risk factors such as pregnancy, learning disability, caring responsibilities and/or deprivation

Yes

No

≥ 18 yrs **AND** no EHCP stating escalation of care to hospital would be inappropriate **AND** usual resting O_2 sats are 96% or more in air

Yes

No

No

Consider whether oximetry@home monitoring is suitable

Yes

Can the patient manage with just the self-care information and diary?

No

Use clinical judgement to consider using in addition to diary:

- Local social prescriber link worker for check-in/reminder calls **AND/OR**
- AccuRx Florey **AND/OR**
- Usual clinical follow up

Yes

Instruct patient to use self care pulse oximeter and diary +/- other agreed monitoring arrangements.

Check understanding of escalation/safety netting criteria

use S1/EMIS/Ardens or CDRC oximetry@home template

Stop oximetry monitoring after 14 days from start of symptoms OR once negative covid PCR test result received if not yet confirmed

Pulse oximeter returned to GP practice (unless at care home) and decontaminated