

COVID-19 ED Facilitated Discharge Programs

LOWER SEVERITY

HIGHER SEVERITY

WHAT'S INCLUDED

COVID WATCH



TEXT-BASED SYMPTOM CHECK-INS (2X / DAY)



ESCALATION TO RN/APP/MD AS NEEDED

COVID PULSE



TEXT-BASED SYMPTOM CHECK-INS (2X / DAY)



PULSE OX MONITORING



ESCALATION TO RN/APP/MD AS NEEDED

PENN MEDICINE AT HOME



VIDEO VISITS (2X / DAY)
DEVICES & EDUCATION GIVEN AS NEEDED



24/7 ON-CALL RN LINE; DAILY MD CASE REVIEW



FREQUENT, COMPLETE VITALS MONITORING



IN-PERSON VISITS AND CARE AS NEEDED
EXAMPLE: IVF, WOUND CARE ETC.

TARGET PATIENTS

STABLE FOR DISCHARGE WITH:

No or well-managed comorbidity

AND negative imaging

AND amb. SpO2: ≥ 95 **RA**

EXCLUDE if non-tech savvy; consider referral to PMAH instead

STABLE FOR DISCHARGE WITH:

*Multiple well-managed comorbidities

AND/OR new infiltrate

AND/OR amb. SpO2: 93-94 **RA**

EXCLUDE if non-tech savvy; consider referral to PMAH instead

STABLE FOR DISCHARGE WITH:

*Significant comorbidities with need for close monitoring (e.g., poorly controlled DM, significant cardiac or lung disease, active cancer on treatment, immunosuppression)

OR home health need

PREGNANCY WATCH

For pregnant patients < 16 weeks meeting COVID WATCH criteria enroll into **PREGNANCY WATCH**. Consult 215-662-3815 for pregnant patients meeting COVID Pulse criteria and/or ≥ 16 weeks for further guidance.

* IMPORTANT

For patients with well-documented Penn PCPs or specialists, please attempt coordination with provider/service prior to discharge (phone call, then epic message). Do not enroll patients in multiple COVID discharge programs.

ED physician may consider enrollment of patients with ambulatory SpO2 92 if well-appearing, with negative imaging/workup.