

Criteria for lifting the confinement for elderly patients with Covid-19

Consequences for short stay hospitalisation - discharge in dedicated medium- and long-term institutions

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INTRODUCTION

There are several dedicated Covid-19 short stay, medium-stay and long-stay geriatric units which have been created, and some are still being created in APHP. Moreover, there are elderly patients who have been hospitalised in other specialities' dedicated departments. Hence, dedicated geriatric Covid-19 facilities are being created and their flexibility must be optimised in order to respond as effectively as possible to the needs of elderly patients suffering from Covid-19.

Against this background, the question that is constantly being asked every day is what the "minimum" stay in a dedicated sector should be in relation to the period of hospital confinement.

CRITERIA FOR LIFTING THE CONFINEMENT FOR AN ELDERLY PATIENT WITH COVID-19

- from 10 days after the symptoms begin
- **AND** at least 48 hours after the symptoms have improved: improvement in shortness of breath and respiratory rate
< 22/min, temperature < 38°5C
- once the confinement period has been lifted, WITH droplet and contact- related precautions in place for 14 days after the confinement has been lifted.
- After 14 days, these measures can be lifted.

NB: - coughing may persist for a long time and has deliberately been excluded as a "blocking" symptom
 - viral samples are not recommended as part of the decision making process for lifting confinement
 - therefore, it is vital to make a note of the first day of the onset of symptoms and the 1st day on which they cease

CONSEQUENCES FOR ENTRY-DISCHARGE DECISIONS DEPENDING ON THE GERIATRIC SECTOR

- **Patients leaving a short-stay Covid-19 unit, requiring a stay in an aftercare and rehabilitation unit:**
 - possible from day 10 after the onset of symptoms, subject to improvement in symptoms after 48 hrs and clinical status enabling the patient to be able to reasonably benefit from an aftercare and rehabilitation facility.
 - stay in a dedicated post-Covid-19 aftercare and rehabilitation unit for 14 days (droplet and contact-related precautions), then either transferred to a "standard" aftercare and rehabilitation unit with no particular measures in place, or returned to patient's home.
- **Patient suffering from Covid-19 being treated in a dedicated aftercare and rehabilitation unit or long-stay nursing home since diagnosis**
 - once the first 10 days of symptom have passed, remain in the dedicated unit for the following 14 days (droplet and contact-related precautions) then a possible return to a "standard" aftercare and rehabilitation unit or a long-stay care home with no particular measures in place.
- **NB: Two patients with COVID-19 can be hospitalised in a double room.**

REFERENCES

Advice relating to the clinical criteria for leaving isolations for patients infected by SARS-CoV-2, HCSP 16 March 2020

REDACTION	VALIDATION	APPROVAL
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