#### Acute Visits (attempt same day, but within 24/48hrs maximum)

Abscess/ Wound (new, re-check, repack)

Athlete's Foot (acute flare up)

Asthma Attack and/or Bronchitis

Diarrhea/Constipation

Dental Issues (limited to antibiotics)

Flu like symptoms (nausea, vomiting, diarrhea, fever, etc.)

Headache/Migraine (acute, non-chronic)

Lice/Scabies/Ringworm

Lump in skin (breast or other)

New Injury (acute, non-chronic)

Pneumonia

Swollen Glands/ Swelling of limbs

Employee injury--ODCHC (needle stick, fall, etc.)

Pink Eye--Conjunctivitis

### Patient Should call 911

Possible Choking, "I ate something and now I can't breathe" Trouble Breathing or Severe Reaction to Spider Bite, Bee, etc. Medication Reaction causing shortness of breath and/or difficulty swallowing

Unconscious or Unresponsive patient

### Not Appropriate for Evening/Saturday Clinics

Narcotic Refills

Revised 7-31-17

Med Refills in general

Hospital Follow up (unless provider requested)

Physicals (DMV, Paps, etc.)

Nail Removals

**Erectile Dysfunction** 

Motor Vehicle Accident (MVA)

# RN Visits--Visit that an RN can complete independently from start to finish

Minor Reaction to Medication / Injections)

Pregnancy testing/Emergency Contraception (ie Plan B)

Testosterone/ DepoProvera Injections

INR (Coumadin) management

Vaccines

**Blood Pressure Checks** 

Suture Removal

Minor Cuts/ Abrasions

\*\*Upper Respiratory Infection without Shortness of Breath

\*\*Cough

\*\*Sexually Transmitted Diseases- Patient and Partners

\*\*Book with a provider first if slot(s) available

<u>If the patient has an assigned ECHC provider</u>, find an acute time slot and make an appointment with the patient's PCP. If there are no slots available, contact the Pt. Coordinator to eval working the patient in.

<u>If the assigned PCP is not available</u>, offer the patient an acute visit with another provider in the same POD. If there are no acute slots in the assigned POD, contact the Pt. Coordinator to eval working the patient in. Secondary option—offer an appointment for the evening clinic.

<u>If the patient is new to ECHC</u>, offer the patient an acute appointment with any available provider. If there are no appointment times during regular clinic, offer an appointment for the evening clinic. For those issues considered urgent, contact the RN to assess/triage the patient.

## Calls Requiring RN Immediate Attention

# \*\*Immediately have the (1)Triage RN, (2)RNCC, or (3) POD RN speak directly with the patient or family member\*\*

Suicidal Calls/Ideation (800-273-8255)
 Chest Pain of any kind
 Severe Abdominal Pain
 Shortness of Breath of any kind (ask if patient can receive a call back in one hour)

Yes: send triage message to RN

No: follow triage call steps above

- Dizziness (acute, non-chronic) Heart Palpitations Bleeding/Spotting with possible pregnancy
- •Adult/ Child with a Fever of Greater than 1030--- Urgent Triage Msg
- Excessive or on-going bleeding—any location
  - With Injury- Call 911
  - Without Injury- follow triage call steps above
  - Menstrual bleeding- Triage Message
- Pain, swelling, redness in one leg or arm
  - With SOB—go to ER
  - Without SOB---Triage Message
  - Pain, swelling, redness that is spreading---Triage Message
- Domestic Violence or sexual abuse---rape: RN to detail need for victim to be seen in the ER
  - Severe beating, stabbing, injuries---should be directed to the ER
  - Suspected child or elder abuse, follow triage call steps above
- •Motor Vehicle accidents (initial)—severe injury/bleeding, go to ER; F/U or minor injury, RN triage
- Stroke--sudden weakness of arm(s); possible facial droop; slurred speech, confusion