COVID Positive Pathways

Department

of Health

CTORIA

State Government

Stratification Criteria – Adults – Updated 14 January 2022 OFFICIAL

| | | Self-Care | Low | Medium – Clinically Stable | Medium - at Risk of Deterioration | High – inpatient |
|------------|---|---|---|---|--------------------------------------|-----------------------------|
| Conditions | | Requires all criteria to be met | Requires age/vaccination & symptoms all to be met | Only <u>one</u> of age/vacc pregnancy status or sym | | Requires symptoms only |
| | Age & Vaccination Status ¹ | >12 and <60 + vaccinated | 50-74 + vaccinated <50 + any vaccination status | ≥75 + any vaccination status 50-74 + unvaccinated | | Any |
| | Pregnancy Status | <28 weeks & up to 2 weeks postnatal + vaccinated | >28 weeks + vaccinated <12 weeks + unvaccinated | >12 weeks & up to 2 weeks postnatal if unvaccinated | | Any |
| Criteria | Symptoms | Nil or Mild | Nil or Mild | Nil or Mild | Moderate | Severe |
| | Comorbidities | Low-risk or no comorbidities No high or moderate-risk comorbidities | Low-risk or no comorbidities Moderate-risk comorbidities if <60, vaccinated or not pregnant/2wks postnatal No high-risk comorbidities | High risk cor Moderate-risk comorbiditie pregnant/2wk | s if >60, unvaccinated or | Any |
| | Social | No social supports required | May require social supports | May require so | cial supports | May require social supports |

1. Vaccinated = at least 2 doses, with second dose > 14 days ago

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Low-risk comorbidities

| Comorbidity/Risk Factor | Definition | |
|--|--|--|
| Obesity | BMI 30-35 by calculator | |
| Psychiatric-Mental Health | Seeing a GP/psychologist/psychiatrist | |
| Treatment: Stable & engaged in | • Symptoms not substantially worse than baseline, or if worse | |
| care | has plan to follow up with usual providers | |
| Cardiac disease: Other | Well controlled / stable AF | |
| inactive/well controlled cardiac | Paroxysmal SVT | |
| condition | Pacemaker functioning well | |
| Hypertension | High blood pressure on or off medication | |
| Diabetes: no medication and | • HBA1c if known < 7.5% | |
| well controlled | Gestational diabetes, even if on medication | |
| Cancer: In remission or under | • e.g. prostate cancer under observation, breast cancer on | |
| observation and not impacting | hormonal therapy but not impacting function | |
| function | | |
| Asthma: Mild | Occasional use of reliever (Ventolin, blue puffer) | |
| | Exercise induced | |
| Respiratory disease: Other | E.g. Sarcoidosis in remission and not on treatment | |
| inactive or well controlled | Lung cancer in remission | |
| | Past history of tuberculosis | |
| | Lung nodule under surveillance | |
| Haematological condition: | • E.g. iron deficiency anaemia, thallasaemia minor/trait, past | |
| Other well controlled/inactive | history of DVT > 3 months ago, ITP no longer in treatment | |
| Current or ex-smoker | | |
| Disability (including | Independent with ADLs | |
| intellectual/cognitive): Not | | |
| dependent on others for care | | |
| →If has one or more of these comorbidities AND meets the rest of the self-care criteria: stream | | |
| to self-care | | |
| \rightarrow If has one or more of these comorbidities AND meets the rest of the low-risk pathway criteria: | | |
| stream to low-risk pathway | | |

Moderate-risk comorbidities

| Comorbidity/Risk Factor | Definition | | |
|--|--|--|--|
| Obesity | BMI >35 by calculator | | |
| Cardiac disease: Ischaemic heart disease | Hx of CABG/stents/angina/previous AMI | | |
| Cardiac disease: Heart failure | Known heart failure diagnosis, requires diuretics and/or fluid restriction to prevent fluid overload due to heart failure, hospital admissions with fluid overload | | |
| Cardiac disease: Other significant active/poorly controlled cardiac condition | Severe valvular heart disease Cardiomyopathy not captured above Atrial fibrillation with poor rate control or recent admission | | |

| Comorbidity/Risk Factor | Definition | | |
|---|---|--|--|
| | Implanted defibrillator | | |
| | | | |
| | | | |
| Diabetes: On medications/insulin or poorly | HBA1c if known > 7.5% | | |
| controlled | Frequent BSLs above 12 | | |
| | Diabetic complications such as foot | | |
| | ulcer/infection | | |
| | Does not include gestational diabetes | | |
| Renal failure: reduced renal function, dialysis | eGFR < 60 if known | | |
| | • Reports reduced renal function or follow up by | | |
| | renal specialist | | |
| | Haemodialysis or peritoneal dialysis | | |
| Liver failure | • Cirrhosis (e.g. due to alcohol, non-alcoholic | | |
| | fatty liver disease, viral hepatitis, autoimmune | | |
| | liver disease). | | |
| | Previous or recurrent episodes of liver failure | | |
| | due to an ongoing condition. | | |
| | Does not include: viral hepatitis without | | |
| | cirrhosis | | |
| Cancer: End stage or palliative management | e.g. metastatic disease impacting function, | | |
| | known to community palliative care service | | |
| Asthma: moderate/severe | On a regular preventer including an inhaled | | |
| | corticosteroid | | |
| | • Oral steroids (prednisolone) in the last 12 | | |
| | months for an exacerbation | | |
| | Any previous hospitalisation due to asthma | | |
| Respiratory: COPD, other significant active | Known diagnosis of COPD | | |
| lung condition | Reports emphysema or chronic | | |
| | cough/breathlessness related to significant | | |
| | smoking history | | |
| | CF, bronchiectasis, pulmonary fibrosis, pulmonary hypothesian | | |
| Haematological condition: Other significant | pulmonary hypertension | | |
| | | | |
| Stroke | With residual deficit/disability or with known | | |
| | cerebrovascular disease (e.g. carotid stenosis | | |
| | or endarterectomy) | | |
| Dementia | Alzheimer's | | |
| | Other dementia diagnosis | | |
| | Known age related cognitive decline without formal diagnosis, ospecially if impacting | | |
| | formal diagnosis, especially if impacting | | |
| Other neurological condition | function or previous episodes of delirium | | |
| Other neurological condition | Parkinson's disease | | |
| | Motor neuron disease | | |
| | Multiple sclerosis | | |

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| Comorbidity/Risk Factor | Definition | |
|--|---|--|
| Disability (including intellectual/cognitive): dependent on others for care | Dependent with ADLs | |
| → If has one or more of these comorbidities AND is aged >60, unvaccinated and pregnant/2 weeks postnatal: stream to medium-risk pathway → If has one or more of these comorbidities AND is aged <60, vaccinated and not pregnant/2 weeks postnatal AND has nil or mild symptoms: stream to low-risk pathway | | |

High-risk comorbidities

| Comorbidity/Risk Factor | Definition |
|---|---|
| Transplant history | Solid organ or bone marrow/stem cell |
| | transplant ever |
| Cancer: Active treatment within last 6 | Chemotherapy, immunotherapy, or |
| months | radiotherapy within the last 6 months |
| Significant haematological conditions | Lymphoma/leukaemia/myelodysplasia |
| | (excluding in remission >12 months) |
| | Sickle cell anaemia or thalassaemia major |
| Immunosuppressive treatment/medication | E.g. Azathioprine, methotrexate, leflunamide, mycophenolate, fingolimod, rituximab, cyclophosphamide Daily prednisolone or other corticosteroid (if above 20mg/day > 2 weeks or lower doses if long duration of treatment) Biologic drugs for arthritis or inflammatory bowel disease Does not include: mesalazine, oral budesonide, inhaled steroids, hydroxychloroquine |
| Other immunosuppressive condition | • E.g. HIV/AIDS |
| | Primary or acquired immunodeficiencies |
| | Hypogammaglobulinemia |
| Psychiatric-Mental Health Treatment: | Recent inpatient admission or active |
| Unstable, complex or not engaged in care | involvement of CATT team/community mental |
| | health team |
| | Identified risk of harm to self or others |
| | Significantly worse symptoms than baseline |
| | but doesn't have access to |
| | GP/psychologist/psychiatrists |
| Disability (including intellectual/cognitive): Down syndrome | Down Syndrome |
| Pregnant >12 weeks gestation and up to 2 | |
| weeks postnatal if unvaccinated | |
| ightarrow Stream to medium-risk pathway always | |

Severe Symptoms

| Symptom | Definition |
|---|--|
| Severe chest pain | Severity: causes distress, rated as greater than 7 out of 10, does not improve with simple analgesia Duration: lasts for more than a minute Quality: cardiac sounding (heavy chest pressure, central) or pleuritic (sharp, stabbing, worse on inspiration) Associations: new breathlessness at rest or minimal exertion, syncope/presyncope, coughing blood |
| Shortness of breath whilst remaining still or getting dressed | Finding even simple activities like getting dressed hard due to breathlessness, feeling breathless whilst seated quietly at rest or lying down, unable to speak in sentences, or feeling distressed due to shortness of breath |
| Dizziness to the point of passing out or nearly passing out | Postural dizziness associated with a loss of consciousness or fall Actual black out Feeling extremely weak/faint to the extent of being unable to get up from seated or lying position |
| Coughing blood | Excludes small flecks or streaks of blood in sputum or pink coloured sputum (unless also associated with new breathlessness or chest pain) |

Moderate Symptoms

| Symptom | Definition | |
|---------------------|--|--|
| Moderate chest pain | Severity: able to tolerate but uncomfortable, minimal improvement with simple analgaesia, rated 4-6 out of 10 Duration: lasts for more than 10 minutes Quality: pleuritic sounding or vague/non- specific but excluding that only associated with coughing or movement Associations: no significantly worsened breathlessness | |

| Symptom | Definition |
|---|--|
| Unable to eat/drink anything at all | Greater than 24 hours without food or 12 hours without fluid intake OR if associated with concern for volume depletion (postural dizziness, low or absent urine output) |
| Shortness of breath whilst walking around | Needing to stop to take a breath, or noticeably having to breathe more heavily, whilst walking at what would usually be a comfortable pace around the house |
| → Stream to medium-risk pathway | |

Mild Symptoms

| Symptom | Definition | |
|---|---|--|
| Mild chest pain | Not distressing, improves or almost resolves with simple analgesia OR Chest pain only associated with coughing OR Vague non-distressing chest tightness/discomfort in someone who is otherwise well and has no breathlessness | |
| Shortness of breath only on moderate exertion | Needing to stop to take a breath, or noticeably having to breathe more heavily, whilst walking briskly or walking up stairs | |
| Other acute respiratory symptoms | Productive or non-productive cough that is not productive of blood (see severe symptoms – coughing blood) Runny nose Sore throat | |
| Systemic symptoms | Fever or chillsMyalgia (muscle aches and pains) | |
| → Stream to self-care, low or medium-risk pathway based on other criteria | | |

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