Phone Advice Line Tools
Guidelines for Children (2-17 years) or Adults (≥ 18 years) with Possible COVID-19

Includes initial phone script, accompanying decision algorithm, and tailored care advice messages
COVID-19 PHONE SCRIPT
See pages 6–10 for corresponding Care Messages.

1) Greeting

“Thank you for calling ________ (company name/clinic name).
My name is ______________. I am a (Title: such as RN, Pharmacist, Medical Doctor, or Medic).
How can I help you?”

2) Start triage and evaluate for life-threatening conditions

“Are you ill or calling for someone who is ill?”

- If No: If caller needs general education about COVID-19, provide information using the CDC website and other sources for relevant local public health information. (SEE CARE MESSAGE A)
- If Yes: Collect demographic information that is needed by your facility including asking about age and gender. Ask “What is the age of the person who is ill?”
  - If younger than 2 years old: Evaluate for life-threatening emergency medical condition.
    - Ask “Is the child experiencing any of these symptoms?”
      - Extremely fast or shallow breathing
      - Blue-colored lips or face
      - Not waking up or not interacting when awake
      - So irritable that the child does not want to be held
      - Seizures
      - Other life-threatening emergency signs as per your center’s standard protocol
    - Advise to call 911 if they report any life-threatening symptoms. (SEE CARE MESSAGE B)
    - If no life-threatening symptoms, recommend that they contact their usual healthcare provider so that they can be evaluated that day or as soon as possible. (SEE CARE MESSAGE C)
  - If older than 2 years old: Evaluate for life-threatening emergency medical condition.
    - Ask “Are you/they experiencing any of these symptoms?”
      - Extremely difficult breathing (can’t talk without gasping for air)
      - Blue-colored lips or face
      - Severe or persistent pain or pressure in the chest
      - Severe, constant dizziness or lightheadedness
      - Acting confused or hard to wake up
      - Slurred speech (new or worsening)
      - New onset of seizures or seizures that won’t stop
      - Other life-threatening emergency signs as per your center’s standard protocol
    - Advise to call 911 if they report any life-threatening symptoms. (SEE CARE MESSAGE B)
    - If no life-threatening symptoms, proceed with triage. Screen for COVID-19 symptoms.

3) Screen for COVID-19 symptoms and take note of any symptoms or symptom details

Exposure

"In the two weeks before you felt sick, did you:"
- Have contact with someone who was diagnosed with COVID-19?
- Live in or visit a place where COVID-19 is spreading?
**Check for symptoms**

“Do you/they have fever or have you/they felt hot or feverish in the last two days?”

- Ask “**Were you able to measure the temperature with a thermometer?**”
  
  - If Yes: Ask “**What was the temperature and when was it measured?**”
  
  - If No: Ask “**Are you/they experiencing shaking, chills, or sweating? Do you/they feel very warm to the touch?**”

- Ask “**When did the fever/feverishness start?**”

- Ask “**Was fever-reducing medication given?**”
  
  - Give examples if needed (e.g., ibuprofen, acetaminophen).
  
  - If Yes: Ask “**How long ago was the medication taken?**”

“Are you/they having shortness of breath?”

- If Yes: Ask if they are experiencing severe shortness of breath.
  
  - “**Are you/they having difficulty talking without catching your/their breath?**”
  
  - “**Do you/they need to stop to catch your/their breath when walking across the room?**”
  
  - Advise the patient to call 911 or go to the ED if shortness of breath is severe. *(SEE CARE MESSAGES B and D)*

- If No: Continue with triage.

“Do you/they have a cough?”

- If Yes: Ask if patient has coughed up any blood.
  
  - Ask “**How much blood have you/they coughed up?**” or “**Have you/they coughed up more than a tea spoon of blood?**”
  
  - If patient reports coughing up more than 1 teaspoon of blood (hemoptysis), advise them to go to the ED. *(SEE CARE MESSAGE D)*

- If No: Continue with triage.

“Now, I’m going to ask you about your/their blood pressure. Signs of low blood pressure can include cold, pale, or clammy skin; or feeling so light-headed and so weak that you/they are not able to stand. Do you/they have any of these symptoms?”

- Ask if they have a blood pressure measuring instrument at home.

- Ask “**Have you measured your/their blood pressure today? What was your/their blood pressure?**”
  
  - If concern for low blood pressure (hypotension), advise them to call 911 or go to the ED. *(SEE CARE MESSAGES B and D)*

If younger than 2 years old: “**Does your child appear to have trouble breathing?**”

- Ask “**Are the ribs pulling in with each breath?**”
  
  - If concern for labored breathing, advise the caller to take patient to the ED immediately to be evaluated. *(SEE CARE MESSAGE D)*

If 2-4 years old: “**Does your child appear dehydrated?**”

- Ask about signs of dehydration in young children, such as no urine for 8 hours, dry mouth, and no tears when crying.

- If concern for dehydration, advise the caller to take patient to the ED to be evaluated. *(SEE CARE MESSAGE D)*
Ask all ages: “Do you/they have any of the following symptoms:”

- Runny or stuffy nose
- Sore throat
- Muscle aches, body aches, or headaches
- Fatigue or malaise
- Nausea, vomiting or diarrhea

4) Assess for high risk conditions

“Do you/they have any ongoing medical conditions?”

- If Yes: Note the condition(s).
- If No: Say “Let me quickly review some categories of medical conditions, to be sure. Do you/they have any of the following medical conditions?”

Read category names and provide further descriptions if caller needs more info:

- **Chronic lung disease** – e.g., asthma, chronic obstructive pulmonary disease [chronic bronchitis or emphysema], or other chronic conditions associated with impaired lung function or that require home oxygen
- **Serious heart conditions**, including congestive health failure
- **Diabetes with complications** – e.g., limb amputation, kidney disease, vision problems, heart disease, history of stroke, or, especially if they have uncontrolled diabetes or other complications
- **Neurological conditions that weaken ability to cough** – e.g., disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy [seizure disorders], stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury
- **People with weakened immune systems** – e.g., seeing a doctor for cancer and treatment such as chemotherapy or radiation, received an organ or bone marrow transplant, taking high doses of oral steroids or other immunosuppressant medications, HIV or AIDS
- **Dialysis** – e.g., patient is under treatment for kidney disease, including receiving dialysis, or has been told they have chronic kidney disease
- **Cirrhosis of the liver** – e.g., cirrhosis, chronic hepatitis, patient is under treatment for or has been told they have liver disease
- **Extreme obesity** – e.g., Body Mass Index [BMI] greater than or equal to 40
- **Pregnancy** – e.g., in the last two weeks or currently

- If history appears unreliable:
  - Screen for other medical conditions.
  - “Please tell me about any medicine that you/sick person take(s) daily or regularly.”
  - Ask about current medications that might indicate underlying chronic conditions.

If any underlying medical conditions and symptoms, advise to contact provider to be seen within 24 hours.

*(SEE CARE MESSAGE E)*
5) Screen for special circumstances
“Do you/they live in a nursing home or other long-term care facility?”
  • If Yes: SEE CARE MESSAGE G.
  • If No: Ask “In the last two weeks have you/they worked or volunteered in a hospital, emergency room, clinic, medical office, ambulance service, first responder services, or any health care setting or take care of patients as a student or part of your work?” (IF YES, SEE CARE MESSAGE F)
  • If No to both questions: Proceed with triage to provide appropriate disposition.

6) Provide appropriate disposition
Use information provided by severity of symptoms, exposure, and comorbidities to determine appropriate disposition.
The following flowchart can be used as a guide to direct patient to the right level of care. However, use clinical judgement to determine the optimal disposition for the patient based on acuity and local conditions.
These recommendations will have to be adapted to local protocols.
FOR CARE AT HOME, SEE CARE MESSAGE H.
Figure 1. Clinical decision algorithm to guide care advice messages

**Ill or caring for someone ill?**

- **Yes**
  - Collect needed demographics including age and gender of patient
  - **Younger than 2 years**
    - Assess for life-threatening conditions
      - Extremely fast or shallow breathing
      - Blue-colored lips or face
      - Not waking up or interacting when awake
      - So irritable that child doesn’t want to be held
      - Seizures
      - Other conditions as per your center’s protocol
    - No
      - Seek evaluation by an outpatient medical provider as soon as possible. (Triage tool not intended for children <2 years).
  - **2 years and older**
    - Assess for life-threatening conditions
      - Extreme difficulty breathing (can’t talk without gasping for air)
      - Blue-colored lips or face
      - Severe or persistent pain or pressure in the chest
      - Severe constant dizziness or lightheadedness
      - Acting confused or unable to wake up
      - Slurred speech (new or worsening)
      - New onset seizure or seizures that won’t stop
      - Other conditions as per your center’s protocol
    - No
      - Call 911
- **No**
  - Provide education

**Ask Series of Questions:**

**Exposures:** In last 2 weeks before sick:
- Have contact with someone with COVID-19?
- Live in / visit a place where COVID-19 spreading?

**Symptoms:**
- Fever (subjective or measured)
- Shortness of breath
- Severe shortness of breath (unable to speak full sentence)
- Cough
- Coughing up blood (hemoptysis)
- Signs of low blood pressure (cold, pale, clammy skin, light-headed)
- Runny or stuffy nose
- Sore throat
- Muscle, body aches, or headaches
- Fatigue or malaise
- Nausea, vomiting or diarrhea
- For (age 2-4 years)
  - Ribs are pulling in with each breath (retractions)
  - Dehydration/ decreased urine output

**High-risk Conditions:**
- Age ≥65 years
- Chronic lung disease or moderate to severe asthma
- Congestive heart failure
- Diabetes with complications
- Neurologic conditions that weaken ability to cough
- People with weakened immune systems
- Dialysis
- Cirrhosis of the liver
- Extreme obesity (Body Mass Index, or BMI greater than or equal to 40)
- Pregnancy

**Special Circumstances:**
- Live in nursing home or long-term care facility
- Healthcare personnel

**Determine disposition**

**Dispositions:**

**Urgent medical attention is needed/Go to the ED**
- Severe shortness of breath; or
- Hemoptysis; or
- Signs of low blood pressure; or
- Dehydration (only age 2-4); or
- Retractions (only age 2-4)

**Call a provider within 24 hours**
- Any non-severe shortness of breath; or
- Fever + ≥1 comorbidity; or
- Cough + ≥1 comorbidity
  
  (Encourage tele-health options)

**Contact facility occupational health provider immediately**
- Healthcare personnel, and
- Any non-severe shortness of breath; or
- Fever; or
- Any respiratory symptom

**Contact LTC facility healthcare provider to be seen**
- Live in a nursing home/LTC facility and
- Any non-severe shortness of breath; or
- Fever; or
- Cough

**Stay at home, call provider if you get worse**
- Fever + no comorbidity; or
- Cough + no comorbidity; or
- Any other symptom, regardless of comorbidity
  
  (Encourage tele-health options)

**Provide education**
- No symptoms/not sick
CARE ADVICE MESSAGES
See pages 2–5 for corresponding phone script.

**A. No symptoms/not sick**
This telephone triage service is intended for people who are ill or caring for someone who is ill. For general information about coronavirus disease 2019 (COVID-19), please refer to the Centers for Disease Control and Prevention (CDC) website. Do you have something to write with? The CDC’s website is www.cdc.gov/coronavirus.

**NOTE:** If the caller is a healthcare professional, has no symptoms, but reports exposure to an ill person without using recommended personal protective equipment (PPE) precautions, then provide this advice: Contact an occupational health provider or your supervisor in your healthcare facility as soon as possible for instructions.

**B. Call 911 (Emergency Medical Services)**
Immediate medical attention is needed. You need to call 911 now. Tell the 911 operator if you have been in contact with someone with COVID-19 or if you have recently been to an area where COVID-19 is spreading.

Consider Follow Up – Based on your clinic/practice, usual protocol, and/or guidance from your Medical Director, consider placing follow-up calls to any patient advised to call 911 to ensure they sought emergency medical care, assess if their condition has improved or worsened, and to determine final disposition.

**C. Child younger than 2 years old**
This telephone triage is intended for children who are at least two years old and adults. If your child is younger than two years old and is sick, please contact their medical provider as soon as possible.

If your child has had contact with a person who is sick with COVID-19 or has been in an area with community spread of COVID-19, please let their medical providers know.

You can find more information about COVID-19 on CDC’s website. Do you have something to write with? The CDC’s website is www.cdc.gov/coronavirus.

Consider Follow Up – Based on your clinic/practice, usual protocol, and/or guidance from your Medical Director, consider placing follow-up calls to any patient advised to contact their provider to ensure that they sought medical advice, assess if their condition has improved or worsened, and to determine final disposition.

**D. Go to the Emergency Department**
Urgent medical attention is needed. You need to go to your nearest emergency department.

If you have had contact with a person who is sick with COVID-19 or you have been in an area with community spread of COVID-19, please let your medical providers know as soon as you arrive at the emergency department.

Consider Follow Up – Based on your clinic/practice, usual protocol, and/or guidance from your Medical Director, consider placing follow-up calls to any patient advised to go to the emergency department to ensure they sought emergency medical care, assess if their condition has improved or worsened, and to determine final disposition.

**E. Contact a medical provider within 24 hours**
You have some symptoms that may be related to COVID-19.

- If no high-risk conditions, skip to table on next page.

- If the patient has a high-risk condition (e.g., > 65 years old, currently pregnant or up to 2 weeks after the end of pregnancy, or has an underlying medical condition) –
  - You also have medical conditions that could put you at greater risk for complications from COVID-19, such as (your age >65 years old, being pregnant or recently pregnant, having an underlying medical condition).
  - Please let your provider know about (your age or this condition).
AND

<table>
<thead>
<tr>
<th>If the patient belongs to your practice or clinic</th>
<th>OR</th>
<th>If the patient does not belong to your practice or clinic</th>
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<tr>
<td>A healthcare provider from this practice/clinic will follow-up with you within 24 hours. If you are not contacted by a provider within 24 hours, call your provider. If your symptoms get worse, seek care by an urgent care center or emergency department. If you have had contact with a person who is sick with COVID-19 or have been in an area with community spread of COVID-19, please let your provider know as soon as you speak with them.</td>
<td><strong>OR</strong></td>
<td>Contact your usual healthcare provider, doctor’s office, clinician advice line, or telemedicine provider to discuss your symptoms. If you do not receive a call back from your medical provider within 24 hours, try to contact them again and if no response, go in to see your medical provider. If you have had contact with a person who is sick with COVID-19 or you have been in an area with community spread of COVID-19, please let your medical providers know as soon as you speak with them.</td>
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AND

- In the meantime, you can follow some steps to prevent others in your household or community from getting sick. Do you have something to write with?
  - **Stay home except to get medical care** – You should stay home until you talk with your usual healthcare provider or another medical provider. In the meantime, restrict activities outside your home, except for getting medical care. Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.
  - **Separate yourself from others in your home** – As much as possible, you should stay in a specific room and away from other people in your home. Also, you should use a separate bathroom, if available.
  - **Wear a facemask, if possible** – If you have cough, runny nose, or sneezing, wear a facemask when you are around other people (e.g., sharing a room or vehicle) and especially before you enter a healthcare provider’s office. If you are not able to wear a facemask (for example, because it causes trouble breathing), then people who live with you should not stay in the same room with you, or they should wear a facemask if they enter your room.
  - **Cover your coughs and sneezes** – Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately clean your hands.
  - **Clean your hands often** – Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.
  - **Avoid sharing personal household items** – You should not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, they should be washed thoroughly with soap and water.
  - **Clean all “high-touch” surfaces everyday** – High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.
Monitor your symptoms – Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). Put on a facemask before you enter the facility. These steps will help the healthcare provider’s office to keep other people in the office or waiting room from getting sick.

You can find more information about COVID-19 on CDC’s website – www.cdc.gov/coronavirus.

Consider Follow Up – Based on your clinic/practice, usual protocol, and/or guidance from your Medical Director, consider placing follow-up calls to any patient advised to contact their provider to ensure that they sought medical advice, assess if their condition has improved or worsened, and to determine final disposition.

Contact the occupational health provider at your workplace immediately

Contact an occupational health provider in your healthcare facility as soon as possible.

If you have cared for a person who is sick with COVID-19 or have been in an area with community spread of COVID-19, please let your occupational health provider know as soon as you speak with them.

If your facility does not have an occupational health provider, seek care with your usual provider.

Be sure to mention that you have symptoms and work in a healthcare facility or with patients. If your symptoms get worse, seek care by an urgent care center or emergency department, but call ahead to let them know you are sick, work in a healthcare setting, and may have had exposure to COVID-19.

In the meantime, you can follow some steps to prevent others in your household or community from getting sick. Do you have something to write with?

• Stay home except to get medical care – You should stay home until you talk with your usual healthcare provider or another medical provider. In the meantime, restrict activities outside your home, except for getting medical care. Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.

• Separate yourself from others in your home – As much as possible, you should stay in a specific room and away from other people in your home. Also, you should use a separate bathroom, if available.

• Wear a facemask, if possible – If you have cough, runny nose, or sneezing, wear a facemask when you are around other people (e.g., sharing a room or vehicle) and especially before you enter a healthcare provider’s office. If you are not able to wear a facemask (for example, because it causes trouble breathing), then people who live with you should not stay in the same room with you, or they should wear a facemask if they enter your room.

• Cover your coughs and sneezes – Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately clean your hands.

• Clean your hands often – Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.
• **Avoid sharing personal household items** – You should not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, they should be washed thoroughly with soap and water.

• **Clean all “high-touch” surfaces everyday** – High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

• **Monitor your symptoms** – Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). Put on a facemask before you enter the facility. These steps will help the healthcare provider’s office to keep other people in the office or waiting room from getting sick.

You can find more information about COVID-19 on CDC’s website – [www.cdc.gov/coronavirus](http://www.cdc.gov/coronavirus).

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Consider Follow Up – Based on your clinic/practice, usual protocol, and/or guidance from your Medical Director, consider placing follow-up calls to any patient advised to contact their provider to ensure that they sought medical advice, assess if their condition has improved or worsened, and to determine final disposition.

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**Contact a healthcare provider in the long-term care facility where you live**

You may be at higher risk for severe illness since you live in a nursing home / long-term care facility.

Tell a caregiver at the facility that you are sick and need to see a medical provider as soon as possible.

In the meantime, you can follow some steps to prevent others in your household or community from getting sick. Do you have something to write with?

• **Stay in your room except to get medical care** – You should stay in your room/apartment until you talk with the healthcare provider in your facility.

• **Cover your coughs and sneezes** – Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately clean your hands.

• **Clean your hands often** – Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

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Consider Follow Up – Based on your clinic/practice, usual protocol, and/or guidance from your Medical Director, consider placing follow-up calls to any patient advised to contact their provider to ensure that they sought medical advice, assess if their condition has improved or worsened, and to determine final disposition.
Stay home and take care of yourself. Call your provider if you get worse.
Sorry you're feeling ill. You have one or more symptom(s) that may be related to COVID-19.

Stay home and take care of yourself. You can follow some steps to prevent others in your household or community from getting sick. Do you have something to write with?

- **Drink plenty of water and other clear liquids to prevent fluid loss (dehydration).**
- **Treat fever and cough with medicines you can buy at the store. Follow the directions on the label.**
- **Stay home except to get medical care** – You should restrict activities outside your home, except for getting medical care. Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.
- **Separate yourself from others in your home** – As much as possible, you should stay in a specific room and away from other people in your home. Also, you should use a separate bathroom, if available.
- **Wear a facemask, if possible** – If you have cough, runny nose, or sneezing, wear a facemask when you are around other people (e.g., sharing a room or vehicle) and especially before you enter a healthcare provider’s office. If you are not able to wear a facemask (for example, because it causes trouble breathing), then people who live with you should not stay in the same room with you, or they should wear a facemask if they enter your room.
- **Cover your coughs and sneezes** – Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately clean your hands.
- **Clean your hands often** – Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.
- **Avoid sharing personal household items** – You should not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, they should be washed thoroughly with soap and water.
- **Clean all “high-touch” surfaces everyday** – High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.
- **Monitor your symptoms** – Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). Put on a facemask before you enter the facility. These steps will help the healthcare provider’s office to keep other people in the office or waiting room from getting sick.

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*Consider Follow Up – Based on your clinic/practice, usual protocol, and/or guidance from your Medical Director, consider placing follow-up calls to any patient advised to contact their provider to ensure that they sought medical advice, assess if their condition has improved or worsened, and to determine final disposition.*