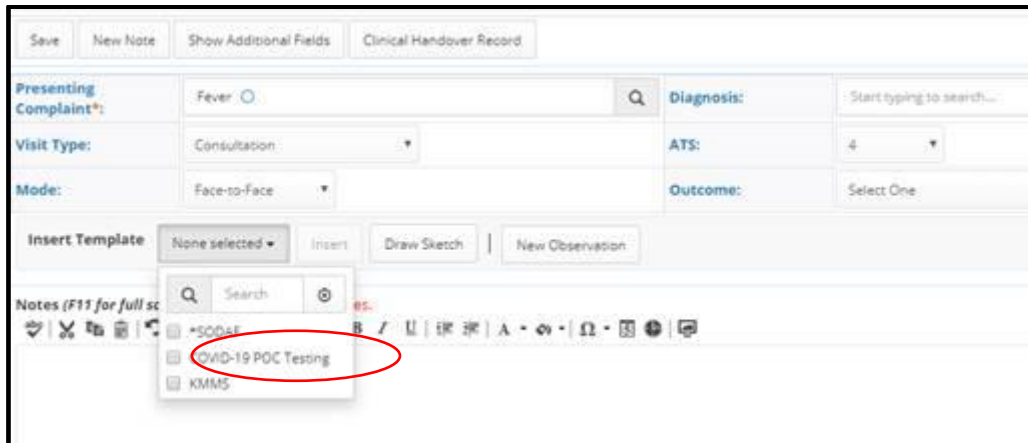


Appendix E – MMEx Template “COVID-19 POC Testing”

To help facilitate good documentation when performing POC testing a template has been created for staff. This should be used by any staff who are undertaking POC testing. The purpose of this template is to ensure:

- accurate, consistent and thorough documentation
- accurate clinical coding
- processes are utilised that are consistent with the COVID-19 toolkit.

It is available by clicking “Insert Template” in the progress notes tab and selecting “Covid 19 POC Testing” and then clicking “Insert”



The screenshot displays a medical software interface for creating a note. At the top, there are buttons for 'Save', 'New Note', 'Show Additional Fields', and 'Clinical Handover Record'. Below these are several input fields: 'Presenting Complaint*' with the value 'Fever', 'Visit Type' set to 'Consultation', 'Mode' set to 'Face-to-Face', 'Diagnosis' with a search box, 'ATS' set to '4', and 'Outcome' set to 'Select One'. The 'Insert Template' dropdown menu is open, showing a search bar and three options: '*SODAF', 'COVID-19 POC Testing' (which is circled in red), and 'KMMS'. Below the dropdown is a rich text editor with a toolbar containing various icons for text formatting and insertion.



The template includes the below information. The highlighted red text is to prompt staff and can be deleted from the notes as appropriate.

Assessment undertaken in isolation room

Remove *red text* when complete

PRESENTATION

Presenting complaint *record in designated field*:
International travel in 14 days prior to symptom onset?
Travel outside of the Kimberley 14 days prior to symptom onset?
Travel outside of the community 14 days prior to symptom onset?
Contact with confirmed/known case? If so who and when?
Contact with any unwell person with fever or respiratory symptoms?
RAT positive / negative?

ASSESSMENT

Signs/Symptoms:
update smoking history in designated module
ensure Indigenous status is recorded in designated field

Other relevant history:

Examination
record ATS in designated field

General Impression:
Temperature:
Respiratory Rate:
Heart Rate:
Blood Pressure:
SAO2 Room Air:
Weight:
Chest auscultation:
Work of breathing:
Other Examination:

Diagnosis/Impression:

INVESTIGATION

COVID-19 testing approved by KAMS Dr (*enter Dr Name*)

record result "COVID-19 – negative" OR "COVID-19- confirmed" in designated field
follow KAMS COVID-19 toolkit http://kams.org.au/wp-content/uploads/2020/03/kams_Covid-19_toolkit.pdf

Result: negative/positive/indeterminate. KAMS Dr (*enter Dr Name*) advised of result
Actions:

PLAN

Follow up:
Patient advice provided:
record diagnosis and outcome in designated field
add recalls/to-do-list as necessary