



Phone call for Respiratory Systems/COVID19 Concern

New Cough (<7days + Continuous) AND/OR
 ± Fever Loss of/change in sense of smell or taste
 ± Risk Factors
 AND/OR
 NEW Breathlessness (MMRC >1)

Practice Respiratory Appointment

Clinical Assessment

Key symptom : BREATHLESSNESS **RED FLAGS**

- O2 Sat <92%
- COPD <known baseline or <88%
- Respiratory Rate ≥22
- NEWS Score > 2
- OR
- **Clinical Concern**

- Severe SOB at rest
- Chest Pain
- Blue lips or face
- Difficulty breathing
- Clammy, cold or mottled skin
- Poor urine output
- Difficult to rouse
- Haemoptysis

Attention!

Most of these cases should be routed through NHS 24; however it is possible that you may still receive calls which you should redirect to NHS 24. The following protocol should be applied

Attention!

IF Communication difficulty or capacity concerns
 OR Complex COVID Severity Risk Factors
 Then consider Assessment Centre or Practice Respiratory Appointment

Respiratory function (especially inability to talk in full sentences)



2RISK FACTORS for deterioration

- Age >60
- Frailty
- Respiratory or Cardio Comorbidities
- Immunosuppression including cancer

Assessment suggests SATA¹ needed

Adult

Pregnant

Phone Medical Receiving/SATA

Phone Obstetric Receiving

SCI Gateway COVID19 SATA referral

Patient's own transport or admin staff arrange Ambulance

Hospital/SATA¹ Assessment

Assessment suggests SATA¹ NOT needed



Risk factors²

NO Risk factors²

COPD

Phone call the next working day

Community Respiratory Team.

Self Care Advice + Worsening Advice (Based on getting breathless)

Reference Information

NEWS Scoring system

Physiological parameter	Score						
	3	2	1	0	1	2	3
Respiration rate (per minute)	≤8		9-11	12-20		21-24	≥25
SpO ₂ Scale 1 (%)	≤91	92-93	94-95	≥96			
SpO ₂ Scale 2 (%)	≤83	84-85	86-87	88-92	93-94 on oxygen	95-96 on oxygen	≥97 on oxygen
Air or oxygen?		Oxygen		Air			
Systolic blood pressure (mmHg)	≤90	91-100	101-110	111-219			≥220
Pulse (per minute)	≤40		41-50	51-90	91-110	111-130	≥131
Consciousness				Alert			CVPU
Temperature (°C)	≤35.0		35.1-36.0	36.1-38.0	38.1-39.0		≥39.1

MMRC DYSPNOEA Scale

Grade	Description	Notes
Grade 0	No dyspnea	Not troubled by breathlessness except with strenuous exercise.
Grade 1	Slight dyspnea	Troubled by shortness of breath when hurrying on a level surface or walking up a slight hill.
Grade 2	Moderate dyspnea	Walks slower than normal based on age on a level surface due to breathlessness or has to stop for breath when walking on level surface at own pace.
Grade 3	Severe dyspnea	Stops for breath after walking 100 yards or after a few minutes on a level surface.
Grade 4	Very severe dyspnea	Too breathless to leave the house or becomes breathless while dressing or undressing.

¹SATA = Specialist Assessment and Treatment Areas

Online NEWS Score Calculator

<https://www.mdcalc.com/national-early-warning-score-news>



COVID-19 APPROVED GUIDANCE

OFFICIAL SENSITIVE

Note: This guidance has been fast-tracked for approval for use within NHSGGC

Covid-19 GP Practice Respiratory Appointment GP Advice 3

This guidance is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guidance, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following guidance, it is good practice to record these and communicate them to others involved in the care of the patient.

Version Number:	6
Does this version include changes to clinical advice:	Yes
Date Approved:	20 th May 2020
Approval Group:	Primary Care Clinical Advisory Group

Important Note:

The version of this document on the Clinical Guideline Directory is the only version that is maintained.

These "GP Advice Deck" are produced by the Primary Care Clinical Advisory Group to assist in the GP Practice response to the COVID19 pandemic. They may change at regular intervals and, in future, will be accompanied by a note explaining what has changed. They are designed to be able to be printed on A4 paper in black and white (obviously web links won't work when printed). There will be versions adapted for use in the Assessment Centres. The clinical assessment and referral criteria are informed by national guidance and with links to secondary care colleagues. The thresholds are likely to change as the pandemic progresses.

Usually they will be sent out from Primary Care Support as a whole deck and it may be simpler to print all and replace all at once to ensure you have the latest versions. It is probably not worth laminating due to the frequency of changes.