

<b>STANDARD of WORK FOR:</b> Swabbing Symptomatic Team Members	
<b>POSITION:</b> Team members with training in PPE Use and Covid nares swabbing techniques	
<b>ENTITY:</b> <input type="checkbox"/> CMHC <input checked="" type="checkbox"/> CMMC <input type="checkbox"/> CMMG <input type="checkbox"/> BRIDGTON HOSPITAL <input type="checkbox"/> RUMFORD HOSPITAL <input type="checkbox"/> BOLSTER HEIGHTS <input type="checkbox"/> RUMFORD COMMUNITY HOME <input type="checkbox"/> ELSEMORE DIXFIELD <input type="checkbox"/> SWIFT RIVER FAMILY MEDICINE <b>FAMILY MEDICINE</b>	
<b>AUTHOR:</b> System Director of Infection Prevention	<b>ORIGINATION DATE:</b> 12/1/2021
<b>TRIGGER:</b> Covid Swabs, Symptomatic	<b>COMPLETED:</b> Yes

*Swabbers must be trained and determined to be competent prior to their shifts in PPE use and swabbing techniques. (competency sheets attached)*

*Swabbers must be provided security clearance to gain access to the decontamination room prior to their shifts.*

*Swabbers must undergo annual fit testing to wear an N95 respirator or be provided with a CAPR and instructions for use, prior to their shifts.*

STANDARD PROCESS STEP	DESCRIPTOR	NOTES	TIME
1. Team member calls Occupational Health and/or Infection Prevention with symptoms of COVID-19 and is referred for PCR testing.	Ex. failed screen, which includes: cough, shortness of breath or difficulty breathing, fever or chills, fatigue, muscle or body aches, headache, sore throat, new loss of taste or smell, congestion or runny nose, nausea/vomiting/diarrhea.	If team member is determined to be critical need, PCR will be processed on-site, otherwise it will be sent out by lab.	
2. Occupational Health and/or Infection Prevention refers the team member to the designated symptomatic swabbing site for swabbing during operational hours.	Team member will arrive masked, check in with Registration in the ED, and be asked to wait in designated area.	Operational hours: 0600-0800 / 1630-1830 7 days per week	

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3. Swabbers must don full PPE; N95 respirator/CAPR, eye protection (full face shield), gowns, and gloves	PPE can be maintained on the swabber if performing successive swabbing with only hand hygiene and glove changes between specimen collection OR if the swabber has to leave the decon area for any reason, PPE will be removed and discarded.	Follow all guidelines and policies for PPE usage. All swabbers must receive education for PPE prior to their swabbing shift.	
4. Swab the team member using the provided kits and instructions	<ol style="list-style-type: none"> <li>1. Disinfect environmental surfaces between patients</li> <li>2. Perform hand hygiene</li> <li>3. Don PPE</li> <li>4. Remove swab from package</li> <li>5. Insert the soft end of the swab into the nostril, approx. <math>\frac{3}{4}</math> of an inch into the nose</li> <li>6. Slowly rotate the swab, gently pressing against the sides of the nostril at least 4 times for a total of 15 seconds. Get as much nasal discharge as possible on the soft end of the swab.</li> <li>7. Using the same swab, repeat the process on the other nostril.</li> <li>8. Place the swab in the sterile tube with transport media and snap off the end of the swab at the break line so that it fits comfortably in the tube and screw tightly to prevent leakage.</li> <li>9. Remove PPE and perform hand hygiene.</li> <li>10. Clearly and legibly label the specimen with the legal name, dob, sex, and date/time of collection if pre-printed labels aren't available.</li> <li>11. Place the tube in a biohazard transport bag with appropriate paperwork placed in the outside pocket. Seal</li> <li>12. Perform hand hygiene</li> </ol>	<p>After swabbing, symptomatic team member is instructed to leave the building.</p> <p><i>All follow up calls to be made to Occupational Health or Infection Prevention, <u>not</u> the lab directly.</i></p>	

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5. Swabber completes form, clarifying spelling, or allows team member to legibly complete form with all information necessary for lab to register and process specimen. Disinfect outside of specimen bag.	Date, First and Last Legal Name of the Team Member, Date of Birth, Sex, check off location where the swabbing took place and how the testing should proceed ( <i>defer to in-house testing if not informed otherwise</i> ) CHECK PROPER SPELLING OF TEAM MEMBER'S NAME	Place form in the outside pocket of the biohazard bag to accompany the labelled specimen. Form and specimen labeling must match, be legible, and correctly spelled to match name of team member in system.	
6. Swabber to provide team member written instructions to follow up with the results of testing by accessing the patient portal (myHealthLink) as soon as resulted.	Contact Occupational Health or Infection Prevention with results: If positive: determine next steps and return to work date If negative: make determination as to whether team is allowed to work with symptoms exhibited (Occ Health nurses to work with manager)	<i>Note: myHealthLink requires full registration prior to COVID swabbing, otherwise manual call will have to be conducted for results.</i>	
7. Swabber disinfects immediate environment at the end of their 2 hour shift and stocks the swabbing room with PPE and testing supplies for next shift	PPE can be obtained from the ED supply room or contact IP during workday hours or nsg supervisor to assist.		
8. Swabber may use the pneumatic tube system in the ED to transport the specimens to the laboratory as they are completed.	Specimens must be properly labeled and correspond with paperwork. Lids must be secured to prevent leakage. Bags must be tightly sealed to prevent contamination. All specimens must be delivered for processing to the lab within a 4 hour window of collection.	<i>If possible, do not wait until the end of shift to send all swabs to the lab in order to prevent a backlog for COVID specimen processing.</i>	
9. Swabber provides swabbing list to Registration team member who will scan it and e- mail to Infection Prevention and Occupational Health teams.	Scan to: <a href="mailto:kikerde@cmhc.org">kikerde@cmhc.org</a> , <a href="mailto:CMMCinfection.Prevention@cmhc.org">CMMCinfection.Prevention@cmhc.org</a>		

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10. Original placed in COVID binder to be picked up by IP.			
11. Lab registers team members swabs and enters an order into Cerner.			

#### REVIEW/APPROVAL SUMMARY

**SUPERSEDES:**

**REVIEW/REVISION DATES** *(dates in parentheses include review but no revision):* **9/28/21, 10/13/21, 11/16, 12/21**

**APPROVAL BODY(IES):** Incident Command

**APPROVAL DATE:** 10/5/2021

[How To Collect Your Anterior Nasal Swab \(cdc.gov\)](https://www.cdc.gov/coronavirus/2019-ncov/how-to-collect-your-anterior-nasal-swab.html)

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