

COVID-19 ACTION PLAN

Name:	Date:
Prescriber:	PHN #:
Prescriber Contact Information:	
Pharmacy (select location):	
Prescriber Signature:	

The colors on the traffic light will help you manage illness from COVID-19



- GREEN** means Go Zone!
Use standard measures to protect yourself against COVID-19
- YELLOW** means Caution Zone!
Follow these steps when feeling sick
- RED** means Danger Zone!
Seek urgent medical attention

Patient: Please retain an electronic copy of this action plan to access all linked resources.

Doctor: There is a new [temporary fee code](#) for in-person or virtual patient care related to COVID-19 assessment and treatment

GO	Follow these measures to protect yourself against COVID-19
<p>You have:</p> <ul style="list-style-type: none"> No signs and symptoms of COVID-19 Had contact with a sick person but are not sick yourself Traveled or are traveling but have no symptoms of COVID-19 Stable health otherwise <p>Extra considerations:</p> <ul style="list-style-type: none"> These treatments reduce the chance of being hospitalized with COVID Even if eligible, you may not need treatment (if your symptoms are very mild, for example). There is NO COST for these treatments. 	<p><input type="checkbox"/> You are eligible for your next COVID-19 Vaccine on: _____. Check your vaccine history on https://www.healthgateway.gov.bc.ca/</p> <p><input type="checkbox"/> Obtain 5 rapid antigen tests from your local pharmacy to have on hand. Do not test if you do not have symptoms of COVID-19.</p> <p>Planning ahead before a COVID-19 infection helps. Treatments to discuss with your care provider:</p> <p><input type="checkbox"/> Nirmatrelvir/ritonavir (Paxlovid) (Special prescription form covered under Plan Z). My medications were reviewed, and I know the modifications I need to make for Paxlovid.</p> <ul style="list-style-type: none"> <input type="checkbox"/> 300/100 mg (eGFR ≥ to 60 mL/min) medication is taken by mouth twice daily X 5 days <input type="checkbox"/> 150/100 mg (eGFR 30-59 mL/min) medication is taken by mouth twice daily X 5 days <p><input type="checkbox"/> Remdesivir (a 2 or 3 dose IV treatment for the highest risk patients that cannot take Paxlovid). Call your doctor or nurse practitioner when you test positive for a referral.</p> <p><input type="checkbox"/> Not currently eligible for treatment due to low risk of severe COVID; please reassess if your health condition changes.</p> <p>Knowing your kidney and liver function helps your team determine the best treatment.</p> <p><input type="checkbox"/> Provider: please provide a lab requisition for ALT and Cr/GFR (if not done for > 2 yrs)</p> <p>To learn more about COVID-19, patient handouts are available on BCCDC</p>
CAUTION	Follow these steps when you think you have COVID-19
<p>You have any of these:</p> <ul style="list-style-type: none"> Fever or chills Cough Loss of sense of smell or taste Difficulty breathing Sore throat Loss of appetite Runny nose Sneezing Extreme fatigue or tiredness Headache Body aches Nausea or vomiting Diarrhea 	<p><input type="checkbox"/> Using a rapid antigen test, perform a test for COVID-19.</p> <p><input type="checkbox"/> If your rapid test is negative and you continue to feel unwell:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Repeat a rapid antigen test the next day (for up to 5 days since your symptoms started). <input type="checkbox"/> Or contact your doctor, nurse practitioner, or 8-1-1 who will decide whether a PCR test or further in-person assessment is required. <p><input type="checkbox"/> If rapid antigen test or PCR is positive:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Contact your doctor or nurse practitioner to discuss and initiate the treatment plan above. Alert them of any new medication(s) you are taking since this action plan was completed. <input type="checkbox"/> Have your Paxlovid prescription sent to a local pharmacy (select location). You should wear a mask or have a relative/friend fill the prescription for you. <input type="checkbox"/> Refer to the self-isolation guide for how long to isolate (depends on age and vaccination status). <input type="checkbox"/> Refer to this guide on how you can safely manage symptoms with home treatments. <p><input type="checkbox"/> If rapid antigen test or PCR is negative and you are feeling worse, contact doctor or nurse practitioner to let them know.</p>
DANGER	Follow these steps when you have SEVERE COVID-19
<p>You</p> <ul style="list-style-type: none"> Find it hard to breathe Have chest pain Can't drink anything Feel very sick or confused 	<p><input type="checkbox"/> Seek medical attention right away. Call 911 or go to your local emergency.</p>