**Emergency Department Pulse Oximeter Distribution Guidelines**

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| **Recommended Patients for Take-Home Pulse Oximeters** |
| Following DOHMH recommendations, take-home pulse oximeters should generally be reserved for **the following patient groups**:* Age 65 years or older
* Underlying health conditions that increase the risk of severe illness, including:
* Active or recent cancer
* Chronic kidney disease
* COPD/emphysema
* Immunocompromised state
* Heart conditions (e.g., CHF, advanced CAD)
* Type 2 diabetes mellitus
* Sickle cell disease
* Active or longstanding tobacco use
* Obesity
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| **Monitoring Recommendations after Discharge**  |
| **Recommended:** * Prior to discharge, patients should be encouraged to sign up for the **COVID-19 oxygen monitoring program**, a text-message program that assesses patient symptoms and/or pulse oximetry readings and provides catered guidance based on patient responses
* Program is **free**, available in **14 languages**, and lasts 14 days (or until opt-out)
* Patients with mild or borderline hypoxia are directed to **virtual ExpressCare**
* Two options for enrollment:
1. Patient **texts “COVID” to 89888** (first message prompts language selection)
2. Provider completes **“COVID Home Monitoring” enrollment form** on Epic banner

**Additional options:*** All patients with suspected COVID-19 infection should be provided information about obtaining **virtual ExpressCare** evaluation by phone or video after discharge.
* Patients may access on-demand urgent care services at [www.ExpressCare.nyc](http://www.ExpressCare.nyc)
* COVID-19 home monitoring program (above) provides daily reminders of this service
* EDs may develop additional methods to provide patient follow-up, including through use of dedicated follow-up staff. Discuss options with your facility ED leadership.
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