**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 |
| **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. |