

Core brief

Daily COVID-19 update (05 May 2020, 10.30am)

Topics in this Core Brief:

- Introducing self-referral to testing for NHSGGC health and social care staff with COVID-19 symptoms
- Collecting data on incidence of venous thromboembolism (VTE) in COVID-19 positive patients
- Updated clinical FAQs

Introducing self-referral to testing for NHSGGC health and social care staff with COVID-19 symptoms

Health and social care staff in Greater Glasgow and Clyde, including GPs and dentists, community pharmacists and care home staff who have symptoms (fever of ≥ 37.8 C or new persistent cough) can now arrange testing directly, for either themselves, or household members with symptoms, using a new self-referral e-form.

The introduction of **self-referral** will help staff to quickly and easily access NHSGGC staff testing centres within the first 5 days of symptoms. [Staff Testing Self-Referral Form](#)

While waiting for appointments and test results, staff and household contacts should follow guidance on self-isolation available from NHS Inform - <https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19#>

For further background information on COVID-19 Testing including what to do when you receive your results go to www.nhsggc.org.uk/covid19/stafftesting

Please help – NHSGGC is collecting data on incidence of venous thromboembolism (VTE) in COVID-19 positive patients

Clinicians can now report a new diagnosis of VTE in COVID positive patients by emailing the following address CovidVTE@ggc.scot.nhs.uk

Which VTEs should be reported?

- Any VTE diagnosed during a patient's inpatient stay with COVID-19, and up to 90 days following discharge from hospital.
- Any VTE diagnosed in a patient referred up to ambulatory care services who has recent symptoms consistent with COVID.

What you need to do:

Email COVIDVTE@ggc.scot.nhs.uk with the following information in the body of the email;

- o Patient's CHI
- o Date of admission (if applicable)
- o Date of VTE diagnosis
- o Thromboprophylaxis (if applicable) – date started, dose given

The VTE should be objectively diagnosed using imaging. However, it is appreciated that sometimes this is not possible due to the patient being critically unwell. On these occasions the clinician should state in the email what clinical information led to the diagnosis of VTE.

Multiple reporting of the same VTE event will be accounted for using CHI and date of VTE diagnosis. So don't worry about incidents being reported more than once. If in doubt – report!

For answers to your questions regarding the prevention and management of VTE and the safe use of anticoagulation, use: <http://www.staffnet.ggc.scot.nhs.uk/Acute/VT/Pages/VTDTandP.aspx>

Updated clinical FAQs

The COVID-19 Frequently Asked Questions guidance prepared by the Infectious Diseases Team for clinical staff has been updated on the Coronavirus Information Hub, found [on the front page of StaffNet](#). The latest guidance is published today 05 May 2020.

Please keep up-to-date with the latest guidance on our dedicated web pages at: www.nhsggc.org.uk/covid19. If you have any questions about the current situation please check the [FAQs](#) first. If you have any further questions, please email: staff.covid19@ggc.scot.nhs.uk

Staff are reminded to make sure their [personal contact details are up to date on eESS](#).

Are your contact details up-to-date? [Click here](#) to check