

# A Health System Perspective on Changes to the Diagnostic Process During the COVID-19 Pandemic

Nicole M. Franks, MD, FACEP

Professor of Emergency Medicine – Emory University School of Medicine

Chief Quality Officer – Emory University Hospital Midtown

Atlanta, Georgia



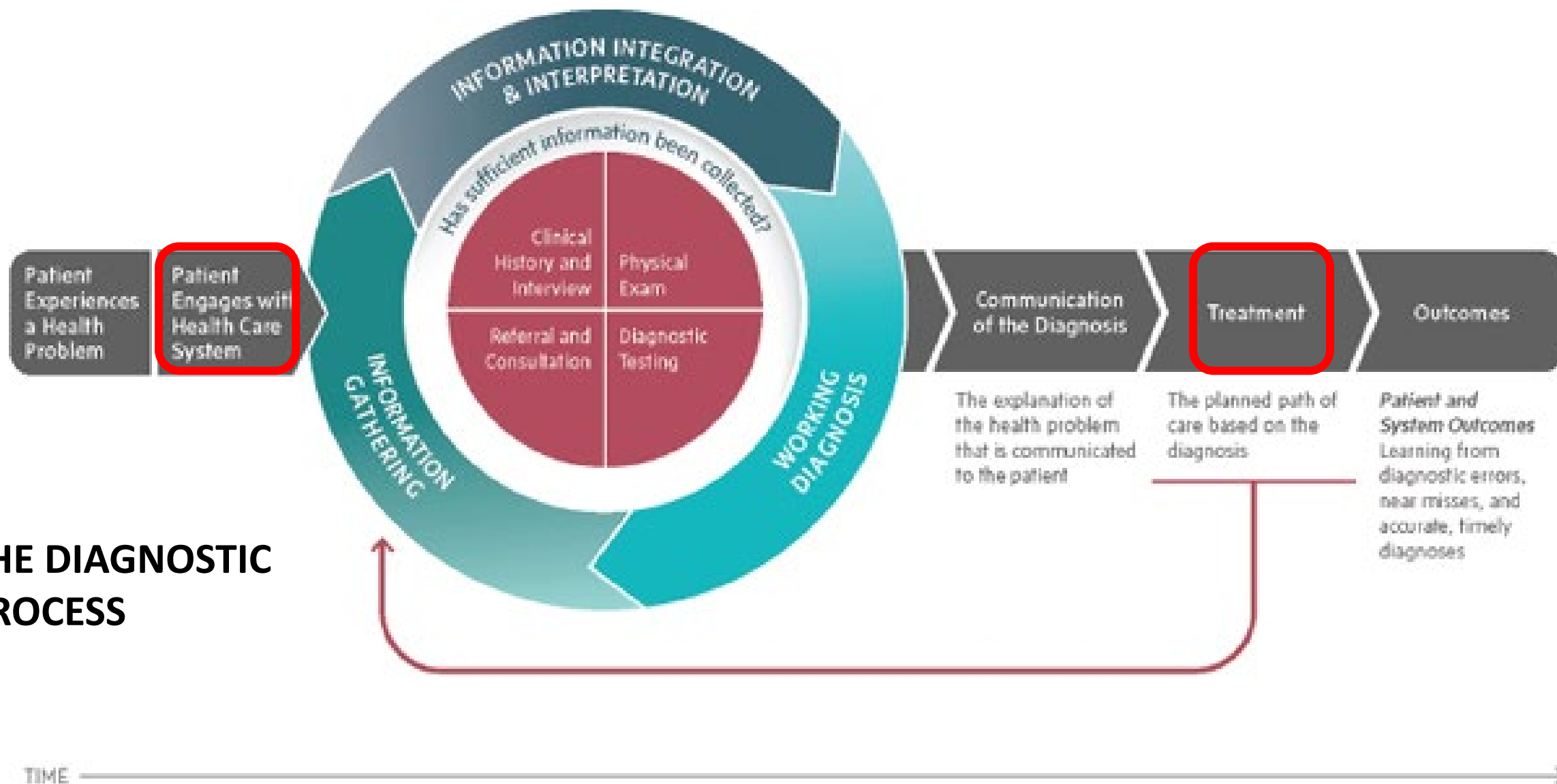
---

**Department of  
Emergency Medicine**

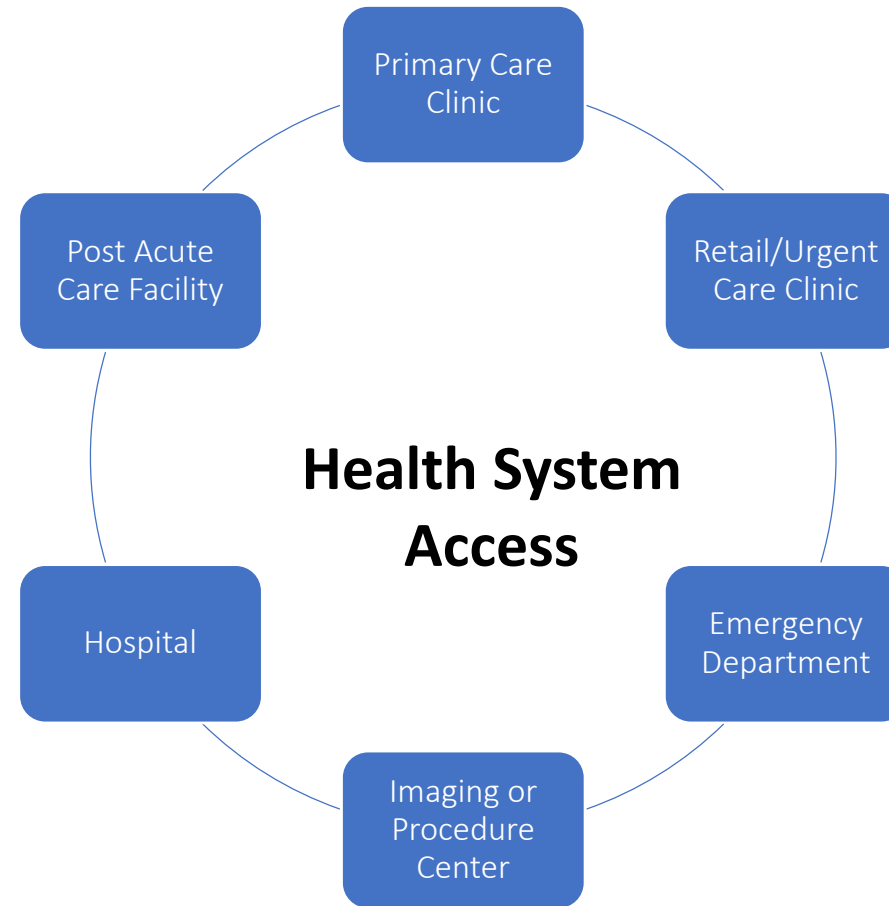


# TRIAGE

## THE DIAGNOSTIC PROCESS



# Pre-COVID-19 TRIAGE



Value = Highest Quality/Lowest Cost

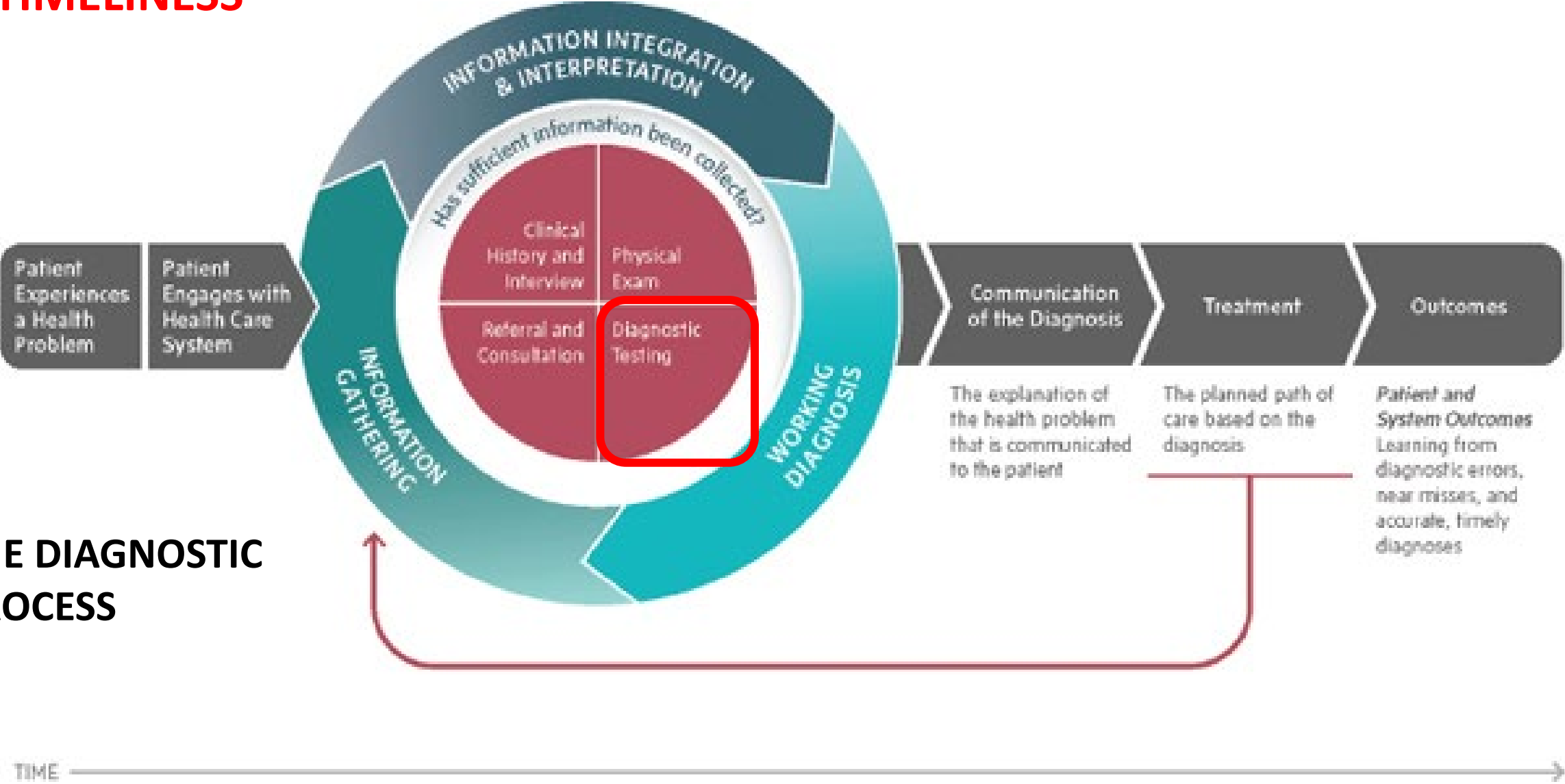
# COVID –19 PANDEMIC

## APPLYING MASS CASUALTY EVENT TRIAGE

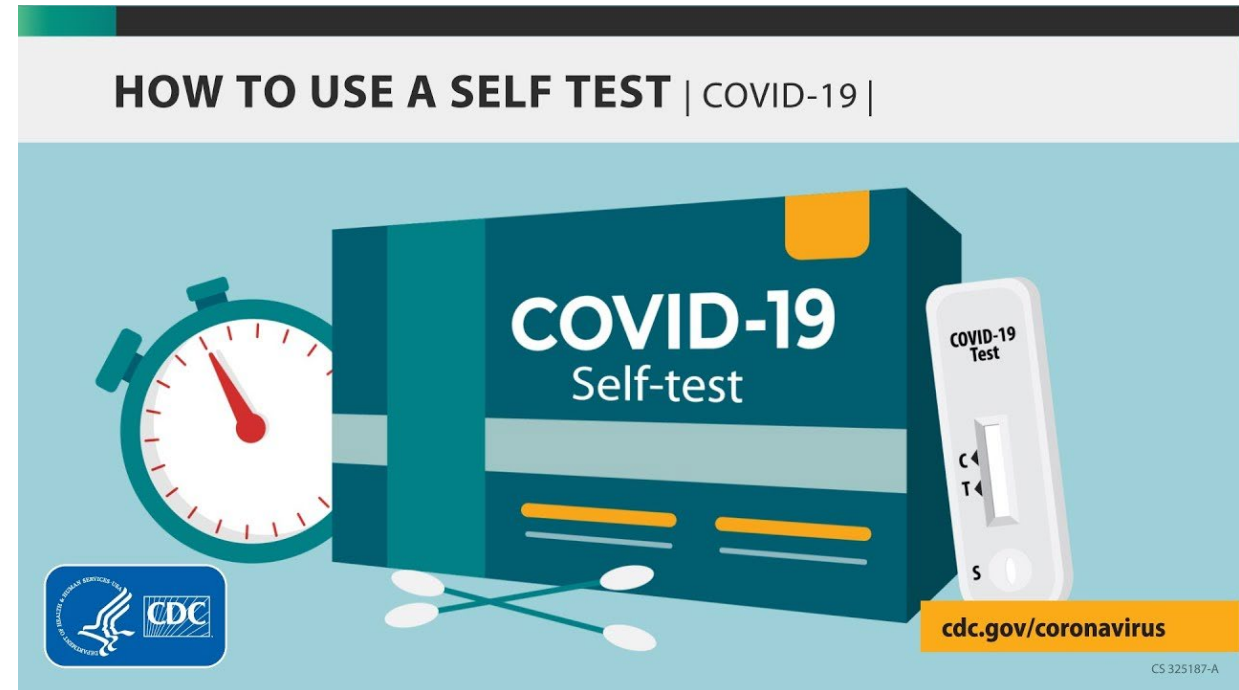
MASS CASUALTY TRIAGE	ACCESSING HEALTHCARE	RESOURCE AVAILABILITY
IMMEDIATE	Acute Care: Go to the ED/Hospital	Low – Life Value?
DELAYED	Chronic Care: Call MD - Telehealth	Medium - Allocations
MINOR	Just Worried: Website Guidelines	High – All Benefit
NOT SALVAGEABLE (DECEASED)	Well – Safe to Wait	None – Moral Injury

# TIMELINESS

## THE DIAGNOSTIC PROCESS

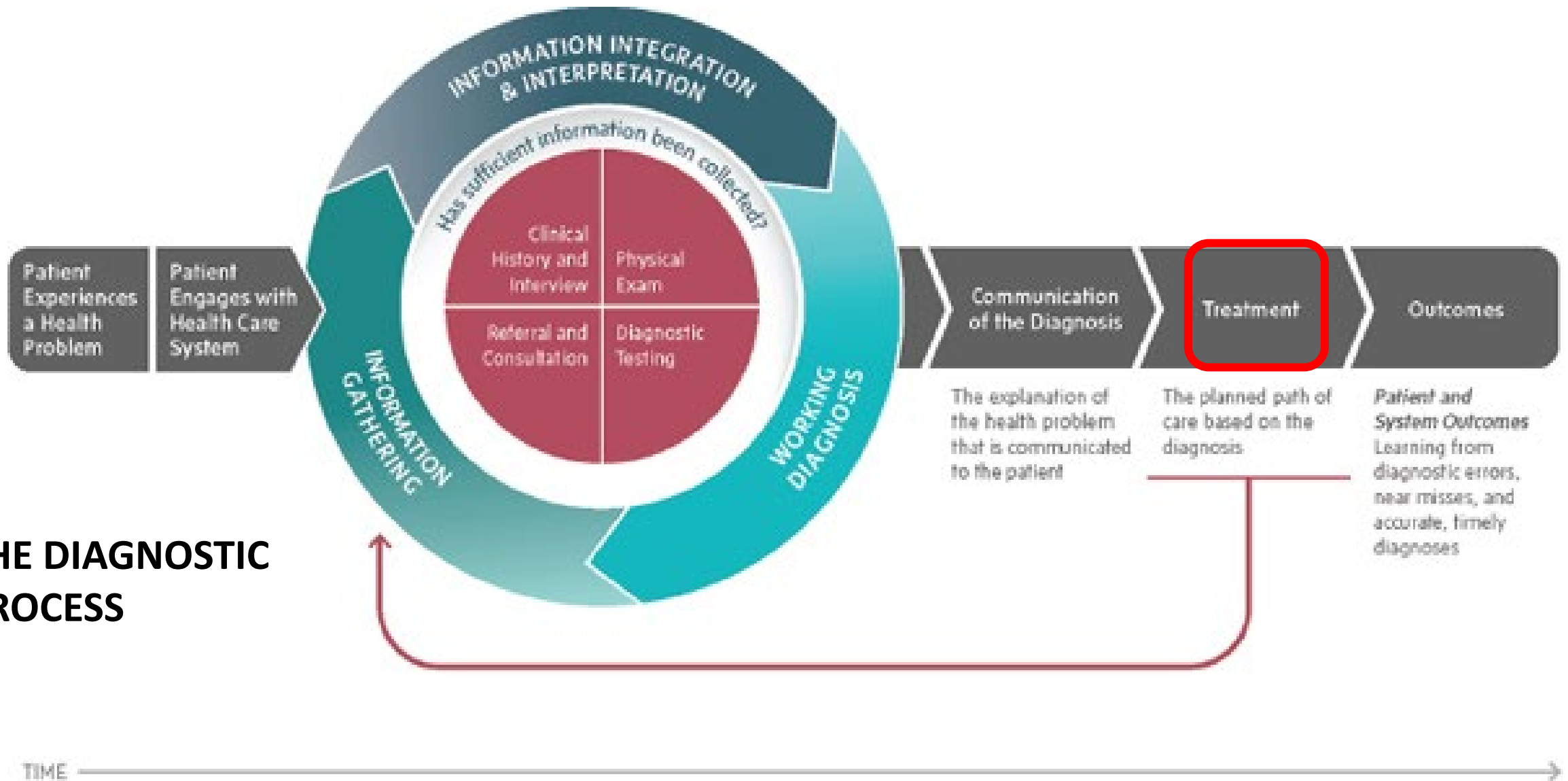


# COVID Testing Challenges



# TAPPING OUT

## THE DIAGNOSTIC PROCESS



# Healthcare Workforce Challenges

**There is a  
difference between  
giving up and knowing  
when you had  
enough.**

Quotesgram



Forbes.com