Many post-COVID conditions can be diagnosed clinically based on history and findings on physical examination. Others might require directed diagnostic testing with the understanding that such clinical assessments may be uninformative and that potential harms could arise from excessive testing such as the increased risk for incidental findings, anxiety about abnormal results that do not have clinical significance, imaging-related radiation exposure, and cost. For most patients with possible post-COVID conditions, healthcare professionals might choose a conservative diagnostic approach in the first 4 to 12 weeks following SARS-CoV-2 infection. Laboratory and imaging studies can often be normal or nondiagnostic in patients experiencing post-COVID conditions and symptoms may improve or resolve during the first few months after acute infection in some patients, further supporting an initial conservative approach to diagnostic testing. However, workup and testing should not be delayed when there are signs and symptoms of urgent and potentially life-threatening clinical conditions (e.g., pulmonary embolism, myocardial infarction, pericarditis with effusion, stroke, renal failure). Symptoms that persist beyond three months should prompt further evaluation.

Most post-COVID conditions can be diagnosed and managed by primary care providers, and a patient-centered medical home model could be helpful, with coordinated comprehensive care and open communication among a core group of specialty care providers and support services (e.g., occupational therapy, physical therapy, social work) to maximize functional improvement and rehabilitation efforts. Healthcare professionals may also consider referral to multidisciplinary post-COVID care centers, where available, for additional care considerations. Multidisciplinary post-COVID care centers based in a single physical location can provide a comprehensive and coordinated treatment approach to COVID-19 aftercare. Based on clinical evaluation and response to treatment, healthcare professionals might consider using a stepwise approach to other specialist referrals. Healthcare professionals should be mindful of the additional burden (e.g., financial, time, and psychological burden) multiple specialist visits may place on patients and the possibility of fragmented care that can increase the risk of contradictory medical advice.

Approaches that incorporate telemedicine, including phone calls and virtual visits, can be helpful for ongoing follow-up and might lessen the burden on patients with limited energy from post-COVID conditions or who have other concerns about in-person visits. Although an in-person initial assessment might be ideal, under some circumstances it may not be possible. Evaluation and care should not be delayed if only telemedicine options are available.

Effective Post-COVID Care Might Include:

- Providing holistic patient-centered management approaches to improve patient quality of life and function and partnering with patients to identify achievable health goals.
- Facilitating standardized, trauma-informed approaches to assessing symptoms and conditions [https://www.cdc.gov/cpr/infographics/6_principles_trauma_info.htm](https://www.cdc.gov/cpr/infographics/6_principles_trauma_info.htm)
- Setting expectations with patients and their families that outcomes from post-COVID conditions differ among patients. Some patients may experience symptom improvement within the first three months, whereas others may continue to experience prolonged symptoms.

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.
• Continuing follow-up over the course of illness, with considerations of broadening the testing and management approach over time if symptoms do not improve or resolve, while remaining transparent that there is much more to learn about post-COVID conditions.

• Establishing partnerships with specialists for physical and mental health care, when needed, which may include comprehensive rehabilitation services.

• Connecting patients to social services when available, including assistance for other hardships (i.e., financial, family illness, bereavement, caregiving) and resources on disability and reasonable accommodations for work or school, and connections to patient support groups.

Overall, it is important for healthcare professionals to listen to and validate patients’ experiences, recognizing that diagnostic testing results may be within normal ranges even for patients whose symptoms and conditions negatively impact their quality of life, functioning (i.e., with activities of daily living), and ability to return to school or work.


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