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NSHA INTERDISCIPLINARY CLINICAL IWK CLINICAL MANUAL

Care Directive

Title:	Screening for COVID-19 by Swab Collection	Number:	NSHA CD-CL-001 IWK CL-790
Sponsor:	NSHA Senior Director, IPPL IWK Director Nursing and Professional Practice	Page:	1 of 5
Approved by:	NSHA HAMAC IWK Policy and Practice Committee	Approval Date:	March 12, 2020
		Effective Date:	March 13, 2020
Applies to:	NSHA and IWK: RNs, LPNs, ACPs and CCPs IWK only: RRTs, PTs		

This Care Directive Applies Only to COVID-19 Primary Assessment Centres

Do Not Implement This Care Directive when the following exclusion criteria exist:

1. Self-referred patients who **do not** meet screening criteria (refer to [policy statement #4](#)).
2. Adult and pediatric red flags +/- risk factors requires consultation. NSHA PAC: Contact Primary Assessment Site Support Physician (PASS Physician) (902-473-2220). NSHA CZ [procedure 7.3](#). IWK Assessment Site: Contact physician-on-call.
 - 2.1. Swab only if directed. If required, ensure transport as per local protocol or activate EHS. In the event of transfer, ensure swab collection status is communicated to receiving department/unit/assessment centre.

Adult Red Flags		Pregnancy Red Flags	
• Heart rate greater than 110	• New confusion	• Heart rate greater than 120 or less than 50	• Hemoptysis
• Respiration rate greater than 30	• New dizziness/ • pre-syncope	• Respiration rate equal to or greater than 30 or less than 10	• Dizziness/Dehydration
• Systolic BP less than 95 mmHg	• Chest Pain	• Systolic BP less than 90 mmHg	• Increased work of breathing (WOB)/Unable to complete sentences
• SpO2 less than 92% on room air		• SpO2 less than 94% on room air	• Altered Level of Consciousness

Pediatric Red Flag Vitals (If greater than 10 years use adult values)			
Peds (age)	HR bpm	Respiratory Rate	Red Flags All Ages
0-1 month	Greater than 180	Greater than 60	<ul style="list-style-type: none"> • Lethargy or extreme irritability • Increased work of breathing • SpO2 less than 96% • Pallor or cyanosis
1 month - 1 year	Greater than 160	Greater than 60	
1-4 years	Greater than 145	Greater than 50	
4-10 years	Greater than 125	Greater than 30	

PURPOSE

This care directive provides the conditions under which the Registered Nurse (RN), Licensed Practice Nurse (LPN), Advanced and Critical Care Paramedics (ACP and CCP), IWK Registered Respiratory Therapist (RRT) and IWK Physiotherapist (PT) can assess, swab and release, patients presenting with concern of COVID-19 / SARS-CoV-2 infection.

POLICY

1. The LPN, ACP/CCP, IWK RRT and/or IWK PT is not authorized to autonomously implement this CD.
 - 1.1. The LPN, ACP/CCP, IWK RRT and/or IWK PT will determine appropriateness in collaboration with the RN, or Authorized Prescriber (AP).
2. The RN, and the LPN, ACP/CCP, IWK RRT, IWK PT in collaboration with the RN, is authorized to collect a nasopharyngeal/throat swab on the patient and release the patient post-education.
3. All patients referred to the primary assessment centre must be swabbed, regardless of screening criteria.
 - 3.1. Self-referred patients must meet screening criteria for swabbing.

Screening Criteria

4. The self-referred patient must present with at least ONE of the two screening symptoms below:
 - Measured temperature (at home or assessment centre) of greater than 38.0 °C.
 - History of new or worsening cough.
 - 4.1. Although the following risk factors do not impact the decision to swab, inquire and document:
 - Travel outside of Nova Scotia within the past 14 days.
 - Location
 - Contact with a known or suspected case (symptomatic person) within the past 14 days (includes a person with symptoms who has travelled outside Nova Scotia in the past 14 days).
5. If the self-referred patient does **NOT** meet the above screening criteria they do NOT require a swab at this time.
6. The name of the AP must be included on the lab requisition for COVID-19.
 - 6.1. Dr. Gaynor Watson-Creed, Deputy Chief Medical Officer of Health is the AP for Primary Assessment Centres only.

PROCEDURE

Screening

1. Assess self-referred patient for screening criteria.
 - 1.1. If referred to the centre, collect specimen regardless of whether or not they meet screening criteria.
2. In addition to Routine Practices, initiate:
 - 2.1. For NSHA: [NSHA IPC-RP-015 Droplet Precautions](#) and [NSHA IPC-RP-010 Contact Precautions](#).
 - 2.2. For IWK: [IWK 301.2 Application of Additional Precautions](#)
3. Nasopharyngeal swabs are the preferred sample choice. For NSHA, refer to [IPC-SC-001 Nasopharyngeal Swab Collection and Screening for Respiratory Illness](#). For IWK, refer to local processes.
 - Throat and nares collection is the alternate choice. Refer to [Instructions for the alternate collection of Throat and Nares for COVID-19 testing 2020-03-19](#).

NOTE: If collection supplies are low or unavailable, contact the lab for further direction and refer to the **Laboratory Updates** on the [NSHA Coronavirus Intranet Page](#).

4. Ordering and requisition requirements:
 - 4.1. Complete Microbiology requisition or for Meditech Order Entry, follow [NSHA Ordering and Labeling COVID-19 Samples at Primary Assessment Sites](#) and IWK procedure as posted.
 - 4.2. Include the name of the AP (Dr. Gaynor Watson-Creed) on the lab requisition; for review and follow-up.
 - 4.3. Ensure the top of the specimen container is tightened and that the requisition is not placed in the bag with the specimen.
 - 4.4. Send swabs promptly to the local laboratory.
 - 4.4.1. For assessment centres that require off-site transport to the local laboratory, follow [packing instructions](#).
 - 4.4.2. All swabs will be transported to the Central Zone Laboratory at the QEII Health Sciences Centre.

Document

5. Use [COVID-19 Assessment Chart](#).
 - 5.1. If additional documentation is required then follow site procedure to ensure documentation is completed and properly labelled.

Release

6. Release and educate the patient as per [COVID-19 Assessment Chart](#).

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- 6.1. Provide [Patient Information Sheet](#).
7. Refer to [flow sheet for patient disposition in the COVID-19 Assessment Chart](#). Options for release:
 - 7.1. If self-referred patient does not meet screening criteria, send patient home.
 - 7.2. If patient referred or meets screening criteria and has no red flags and +/- risk factors, swab and send patient home to self-isolate until contacted with results and are advised of next steps. Instruct patient to seek medical attention if symptoms worsen.
 - 7.3. Adult and pediatric red flags +/- risk factors requires consultation.
 - NSHA Primary Assessment Centres: Contact the Primary Assessment Site Support Physician (PASS Physician) (902-473-2220).
 - Central Zone:
 - For pregnant patients greater than 20 weeks gestation, the PASS physician is to contact the IWK ELAU.
 - For pediatric patients, the PASS physician is to contact the IWK ERP.
 - IWK Assessment Site: Contact physician-on-call.

REFERENCES

- Martinello, N., Bhandari, A., Santos, J, & Dinh, T. (2017). *The role of physiotherapy in Canada: Contributing to a stronger health care system*. The Conference Board of Canada. Retrieved from https://physiotherapy.ca/sites/default/files/8648_role-of-physiotherapy_rpt.pdf
- The National Alliance of Respiratory Therapy Regulatory Bodies. (2016). National competency framework for the profession of respiratory therapy 2016-2021. Retrieved from https://www.csrt.com/wp-content/uploads/EN_Framework_2016_NARTRB_NCF_Part1.pdf

RELATED DOCUMENTS

[Coronavirus Disease \(COVID-19\)](#)

[Novel Coronavirus - lab testing](#)

[COVID-19 Primary Assessment Chart](#)

[NSHA Ordering and Labeling COVID-19 Samples at Primary Assessment Sites](#)

[Procedure for Sampling Covid-19 Using HOLOGIC Swabs](#)

[Instructions for the alternate collection of Throat and Nares for COVID-19 testing 2020-03-19](#)

Policies

[IWK 501.1 Outbreak Management Policy](#)

[IWK 201.1 Application of Routine Practices](#)

[IWK 301.2 Application of Additional Precautions](#)

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[NSHA IPC-CD-001 Outbreak Management](#)

[NSHA IPC-CD-030 Reporting Notifiable Diseases and Conditions](#)

[NSHA IPC-SC-001 Nasopharyngeal Swab Collection and Screening for Respiratory Illness](#)

DISTRICT HEALTH AUTHORITY/IWK POLICIES BEING REPLACED

N/A

VERSION HISTORY

Major Revisions (e.g. Standard 4 year review)	Minor Revisions (e.g. spelling correction, wording changes, etc.)
March 13, 2020 New	March 24, 2020
	March 26, 2020
	March 27, 2020