QEII COVID Pathways

All of the NSHA COVID pathways describe the principles guiding care across the province and require adaptation to the local context of each facility. This document describes the operationalization of the provincial pathways at the QEII site.

Most patients with acute respiratory illness will be assessed in a Secondary Assessment Centre (SAC), with some being seen in the emergency department given their severity or complexity of illness. As the Community COVID Team becomes active, some parents may also be admitted directly from the community.

Based on the history and clinical features, the patients will be assigned to one of the following Zones:

**BLUE ZONE – 8.3 Known or Suspect Side**
- Requires droplet / contact precautions.
- If aerosol generating medical procedure, requires airborne precautions.
- If swab negative but high clinical suspicion or characteristic CXR, keep in BLUE ZONE and repeat swab in 48-72h.
- If swab negative, transfer to GREEN ZONE within 2 hours if low clinical suspicion for COVID.

**YELLOW ZONE – 8.4 “ILI cohort” if symptomatic OR Any Floor if asymptomatic with exposure risk**
- Patient who resides within a known community cluster requires droplet / contact precautions (and airborne precautions for AGMP) until swab negative then can be transferred to GREEN ZONE.
- Patient who has an exposure to a known or suspected COVID case or resides within a facility cluster requires droplet / contact precautions (and airborne precautions for AGMP) for 14 days after last exposure.
- If swab returns positive on either of the two patient categories above, transfer to BLUE ZONE within 2 hours.

**GREEN ZONE – regular ward anywhere in hospital**
- Contact/droplet pending swab result; if result negative stop contact/droplet precautions If swab returns positive, transfer to BLUE ZONE within 2 hours.