
Government of



Department of Health & Wellness

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To: Physicians, Nurse Practitioners, Administrators

From: Dr. Heather Morrison, CPHO
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Subject: Changes to Testing Technique and Updated Testing Guidance for COVID-19

The following provides CURRENT AND **NEW CRITERIA (in bold)** for testing for COVID-19 for both routine and stat purposes; **there is also a mid-turbinate collection information provided as an appendix for community use.**

Emergency Department

- Any person presenting with new onset of fever without an alternative explanation or new or worsening cough, sore throat, rhinitis, marked fatigue, shortness of breath, chills, headache, myalgia, or acute loss of sense of smell or taste without an alternative explanation should be tested.
- **Patients on self-isolation and undergoing a surgical procedure requiring or may require general anesthetic.**

Community Clinics

- Any person presenting with new onset of fever without an alternative explanation or new or worsening cough, sore throat, rhinitis, marked fatigue, shortness of breath, chills, headache, myalgia, or acute loss of sense of smell or taste without an alternative explanation should be tested.
- Any person who was in close contact with (1) a symptomatic case starting 48 hours prior to the case developing symptoms or (2) a laboratory confirmed asymptomatic case starting 48 hours prior to the day their positive specimen was collected, should be tested 7 days after their last exposure to the case.

Cough and fever clinics are available to provide assessment, alternative explanation for symptoms and symptom management. All clients of the cough and fever clinic as well as swabbing clinics are being tested.

Testing and assessment clinics are available in Charlottetown and Summerside. These can be accessed through 811 or referred by a health care provider (email: Coughandfeverclinic@gov.pe.ca).

Admitted patients

- Any person hospitalized > 48hrs with influenza-like-illness (ILI; fever without an alternate explanation and new or worsening cough, sore throat, joint pain, muscle aches, fatigue).
- Any person admitted to the ICU with a respiratory symptom (if there is a strong non-viral alternative diagnosis contact the medical microbiologist).
- **Patients that would otherwise be on self-isolation and undergoing a surgical procedure requiring or may require general anesthetic.**
- Inpatients at Hillsborough Hospital, Provincial Addiction Treatment Facility, and Prince County Hospital Inpatient Psychiatry Unit should be tested on admission (routine test unless symptomatic; if symptomatic for COVID-19, Stat test).

Health Care Providers (HCP)

- Any current health care worker with a new cough and/or fever, sore throat, rhinitis, marked fatigue, shortness of breath, chills, headache, myalgia, or acute loss of sense of smell or taste without an alternative explanation should be tested.
- Locums and other HCPs arriving from out of province must be tested prior to working; may qualify for Stat testing (As directed by CPHO).
- Weekly testing of LTC staff (public and private) who work in more than one healthcare site, **regardless of how frequent they work in LTC (e.g., staff member who works in LTC once a month would require testing every 7 days). For staff with very infrequent visits (i.e., less than monthly), an alternate approach is to test between 48 and 96 hours prior to working and test again at 7 days. For unscheduled/urgent work, staff can be tested after their work shift and again at 7 days**
- Weekly testing of Microbiology staff at the QEH.

Health Care Workers can be assessed for testing by calling: 1-855-354-4358.

Long-term Care/Community Care/Palliative Care Facilities – Residents

- Test residents of Long-term Care facility 24-48 before transfer/admission to the facility; if negative on initial test, test again at 7 days post admission; **test again at day 10 and day 14 post admission.**
- Test residents of Community Care or Palliative Care facility 24-48 before transfer/admission to the facility; if negative on initial test, test again at 7 days post admission.
- Due to an inability to comply with isolation requirements, patients or residents with dementia who are being admitted or readmitted to a LTC facility may be tested an additional time (i.e., on admission, at 3 or 4 days, and at 7, **10, and 14 days**).

Inter-Facility Transfers

- Asymptomatic transfers to other acute care facilities (excluding LTC and CCF) do not require testing at this time, as there is no documented community transmission or reservoir in PEI hospitals.
- **Testing can be provided for anyone who requires a test prior to procedure/surgery/ etc. at an out-of-province facility.**
- Inpatients returning from OOP facilities require routine testing on arrival; test again at 7 days post admission.

Long-term Care/Community Care Facilities – Non-Essential Service Providers

- **Weekly testing of non-essential service providers (e.g., hairdressers, foot care worker, seamstress, etc.) in Community Care and Long Term Care facilities.**

Correctional Facility Admissions

- Test (routine testing) on admission to the facility (if had not already tested in past 48 hours); if negative on initial test, test again at 7 days post admission.

Essential Workers with Out-of-Province Travel

- PEI residents who are essential workers and travel out of province frequently (are home less than 14 days between work periods) can be tested upon their arrival in PEI, and 7 days if still on PEI, but no more than weekly unless symptoms occur.
- PEI residents who are essential workers and travel out of province for work but are home more than 14 days between work periods can be tested on arrival and again at 7 days post-arrival (or sooner if symptoms occur).
- Essential workers include, but are not limited to, construction workers, healthcare providers, those employed in the transportation of goods and services, child protection staff, workers in the energy sector, fisheries, agriculture, etc.

Temporary Foreign Workers

- Test temporary foreign workers between Day 10 and 12 of self-isolation.

Summer Residents / Family Support

- Test summer residents arriving from out of province between Day 9 and 12 of self-isolation.
- **Family members arriving from out of province to provide support to PEI residents may be considered for testing on a cases-by-case basis.**

International Travelers

- Test between Day 10 and 12 after arriving in PEI.

Screeners at Points of Entry

- Weekly testing for personnel screening travelers at points of entry (bridge, airport, and ferry terminals).

Postmortem

- Test upon autopsy

Testing Outside of Guidelines

- Contact the CPHO on call for consideration of testing outside of guidelines for outpatients, including any patients under the care of an ER physician.
- Contact the microbiologist on call for inpatients.

STAT TESTING

Routine testing for COVID-19 is offered multiple times per day with turnaround times between **6 and 24** hours upon receipt to the QEH Laboratory. The request for Stat testing must meet PEI guidance or be directed by the Chief Public Health Office or the Medical Microbiologist.

The following would be considered for Stat (vs routine) testing:

- ER for admitted patients at QEH, PCH, KCMH, Western Hospital that meet routine criteria.
- Patients admitted to the ICU or require critical care in the ED, all Code Blue cases.
- Symptomatic admissions to Labor and Delivery
- Symptomatic admissions to Hillsborough Hospital, Provincial Addiction Treatment Facility, and Prince County Hospital Inpatient Psychiatry Unit
- Symptomatic resident of long-term care (LTC)
- Symptomatic pediatric patients admitted to hospital
- Offenders with symptoms transported by police officers
- Requests approved by CPHO or the microbiologist on call (see Cases off Guidelines above)

All Stat microbiology requests require a phone call to the receiving laboratory. When ordering the test, information provided on the requisition will assist in clarifying if the test meets guidelines or has been previously approved. Microbiologist on call will review these documents and may contact the ordering provider or service as necessary.

For on Guidelines or CPHO/Microbiologist on call approved Stat testing call:

Time	QEH Microbiology Testing	PCH Main Lab
8 am – 4 pm	894-2312	438-4285
4pm – 11:30	2111 (ask for Microbiology tech)	438-4285
11:30 pm – 8 am	2111 (ask for Hematology tech)	438-4285

The Chief/Deputy Public Health Officers may be reached at 902-629-9624 on-call.

The Medical Microbiologist as noted above may be reached through locating or through 902-894-2515.

Thank you all for your cooperation and dedication to all Islanders in these challenging times.

Please let us know if you have any questions or clarifications.

Appendix: CHANGES TO COLLECTION TECHNIQUE IN THE COMMUNITY

Mid-turbinate (+/- throat) collection for:

- Testing in the community for those over age 12.
- Equivalent to NP Collection for COVID-19 virus and less invasive, can use multiple swab types. (Currently it is the traditional NP swab)

Mid-turbinate swab collection method:

- If the patient has a sore throat, fever, or cough, the same swab will be used on the throat before being applied to both nares (this is done to increase yield)
- After blowing nose, both nares are to be sampled with the same swab
- Advance 2-3 cm into the mid-turbinate at an angle of approximately 45 degrees until resistance is felt (see picture)
- Spin swab three (3) times in the mid-turbinate space



Nasopharyngeal (NP) collection for:

- Admitted patients
- Patients presenting to the ER
- Patients ≤ 12 years old
- Those patients/residents unable collect a throat swab when a throat swab is indicated (i.e., patient has a sore throat, fever, or cough)

Nasopharyngeal (NP) swab collection method:

- Insert swab $\frac{1}{2}$ to $\frac{3}{4}$ the length of the angle from nose to earlobe (no more than $\frac{3}{4}$) along the floor of the nasal passage; stop if resistance is felt
- Spin swab three (3) times in posterior pharynx (no need to let swab soak for 5-10 seconds)

Please note: NP and Mid-turbinate swabs are contraindicated if the patient has nasal septum implants or cancer, the alternative collection in the community is throat alone.

For further assistance on swabbing technique(s), please contact the Medical Microbiologist.