

COVID-19 Pandemic Requisition

Patient's Name & Address (require	d - print clearly)	Patient PHN	Request for Priori	itization -	- STAT T	esting	
		Birthdate	□ ICU	☐ In	patient		Long Term Care
		Gender	☐ Healthcare Worke	_	utbreak vestigation		STAT as per MHO
Outbreak #		☐ Male ☐ Female Collection Date	☐ Post Mortem	☐ S	ymptoms Co	ompatible with	n COVID-19
		D / M / Y	Test Request				
Patient Location/Collection Site:	Address	Collection Time	COVID-19	_	fluenza /B/RSV†		Expanded Respiratory Panel‡
(Doctor/Clinic/Hospital)		Specimen Type Nasopharyngeal Throat/Nares Other: Copy to:	† Influenza testing may not be available outside Influenza season ‡ Expanded Respiratory Panel testing is not available for outpatients outside of declared outbreaks Request for POC testing (specify indication): NOTE: Due to limited supplies, POC is not universally available and may not be performed even if appropriate indication is provided				
Copies to additional physicians or a	assessment site locations.	Public Health Location:					
		Employee Health Location:	Test Indication ☐ Symptomatic	☐ Asym	nptomatic		
			Symptomatic Da	ys with An	y Symptom	ns (including	today):
Location of Collection:	City/Town:		☐ Contact to a Case	Dizzine	ess l	☐ Cough	
☐ COVID Testing/Assessmen	nt Site:	mobile drive-thru	☐ Fatigue	☐ Sore T	hroat	☐ Shortness	of Breath
□ER	☐ Inpatient Ward	☐ Inpatient ICU	☐ Headache	☐ Chills	1	☐ Muscle or	Joint Pain
☐ Physician/NP Clinic	☐ Long Term Care	☐ Patient Home	☐ Diarrhea	☐ Runny	Nose	☐ Nausea or	Vomiting
Other (specify):			☐ Conjunctivitis	☐ Fever	1	☐ Nasal Cor	ngestion
Living Situation			☐ Difficulty Breathing		Loss	of Appetite (or	r Difficulty Feeding)
Private dwelling: lives with others	☐ Congregate housing	☐ No fixed address	Loss Sense of Smel	II/Taste	Other	(specify):	
Occupation			Asymptomatic	_		_	
☐ Healthcare Worker	Other Essential	Other Work	☐ Contact to a Case		Admission LTC or PC	_	Admission to Acute Care
□ None of the above	Service	Outside Home	☐ HCW Working wit Immunocompromi Patients	_	Work Outs the Home	_	High Volume Work Setting
			Immunosuppressi	ive 🗌		mpromised	
			Therapy Community Scree	ening 🔲	Individuals Other (spe		
			·	-			

This requisition is to accompany all specimens sent for COVID-19 testing in Saskatchewan. Testing for COVID-19 and monitoring the characteristics of individuals being tested is an important part of monitoring the outbreak and guiding the provincial testing strategy.

Complete Requisition

Enter Patient, Collection, Specimen, Ordering and Copied To Practitioner Information

Public Health Reporting Locations: (indicate one)

Tubile reality reporting Ecoations: (indicate one)				
Athabasca	Moose Jaw	Rosetown		
Keewatin Yatthe	North Battleford	Saskatoon		
La Ronge	Prince Albert	Swift Current		
Melfort	Regina	Wey burn		
Yorkton	First Nation and Inuit Health Branch (FNIHB)	Northern Inter- Tribal Health Authority (NITHA)		

Employee Health Reporting Locations: (indicate one)

Employee Health Reporting Locations: (indicate one)				
Battleford	Prince Albert	Swift Current		
Melfort	Regina RGH	Weyburn		
Moose Jaw	Rosetown	Yorkton		
Saskatoon SCH/Rural				
Noto:		·		

Note

- Employee Health follow-up for former Keewatin Yatthe, former Mamawetan Churchill River and former Athabasca will be done by La Ronge Public Health
- Employee Health follow-up for NITHA and FNIHB will be done by their respective Public Health agencies.

Acute Care

Background

Previously, testing criteria for COVID-19 in the Saskatchewan Health Authority (SHA) was limited to testing patients with symptoms compatible with COVID-19, those who have been travelling or individuals who have been in close contact with someone who was COVID-19 positive. Additionally, patients who screened positive upon admission (i.e. who were symptomatic or met exposure criteria) were placed on Droplet/Contact Plus precautions. These measures have helped us to prevent the spread of COVID-19 in our facilities and keep our HCWs, visitors and patients safe.

Principles

Starting June 5, 2020, the SHA will offer testing to <u>all</u> patients for COVID-19 upon admission or in advance of a planned admission to an acute care hospital with an anticipated stay of greater than 24 hours (this includes all expectant mothers entering a facility to give birth). Expanding the testing criteria to include both symptomatic and asymptomatic patients may provide a better understanding of the prevalence of COVID-19 across the province and allow identification asymptomatic or mildly symptomatic patients who may still spread the virus to others. This will be especially important as Saskatchewan begins to lift restrictions and begin resumption of services plans within acute care facilities.

Guidelines

- All patients admitted to an acute care hospital for a stay greater than 24 hours will be offered a test for COVID-19. This includes all expectant mothers entering a health facility to give birth (Refer to <u>CV-19 WS0010 Admission</u>, <u>In-Facility Placement and Discontinuing COVID-19 Precautions</u>).
- All patients will be <u>screened</u> for COVID-19 upon admission.
- The decision to place patients on Droplet/Contact Plus precautions will be based on the results of the
 screening tool. Only patients who screen positive will be placed on Droplet/Contact Plus precautions. Awaiting
 test results is not an indication for precautions. (Refer to CV-19 A0001 Acute Care Placement and Precautions
 Algorithm).
- Patients who are symptomatic or asymptomatic but meet screening criteria, including those who have been travelling or individuals who have been in close contact with someone who was COVID-19 positive should be placed in a private room. If private rooms are limited or unavailable, refer to CV-19 G0047 Interim IPAC
 Guidance for Acute Care Settings for guidance.
- Patients should continue to be monitored for symptoms of COVID-19 for the duration of their hospital stay. A
 negative test result only applies at the time of the test. A patient could develop symptoms and test positive the
 next day, or at any time after the specimen was taken and tested. If symptoms develop, refer to CV-19 A0002
 Modification of Precautions for COVID-19 Negative Inpatient/Residents Algorithm for re-testing instructions.

Resources:

https://www.saskatchewan.ca/government/news-and-media/2020/may/14/covid-19-update-may-14



TESTING FOR INDIVIDUALS WITH NO SYMPTOMS

The Saskatchewan Health Ministry and The Saskatchewan Health Authority (SHA) have expanded who can be tested for COVID-19. We are now able to test people who do not have symptoms. This testing helps contain and delay the spread of COVID-19 within our communities and is an important addition to the Re-Open Saskatchewan Plan. Testing individuals who do not have symptoms ensures that we keep ourselves and our communities healthy as we return to work and play.

FREQUENTLY ASKED QUESTIONS

Now that I have been tested for COVID-19, do I need to be isolated if in a SHA facility or stay home and self-isolate?

- At **HOME**: No, you do not need to self-isolate. You are able to continue your daily routine. If you develop any symptoms that are linked to COVID-19 you should then self-isolate.
- In **SHA FACILITY**: You will be screened prior to your appointment or upon entry which will determine if you need to be isolated or not.

If I develop symptoms at a later time, will I need to be re-tested?

- Yes. A negative test only tells us about the time that the test was done.
 - If you develop symptoms at HOME, you can call 811 or your Family Doctor/Nurse Practitioner to receive a referral for testing.
 - If you develop symptoms at a SHA FACILITY, you will be rescreened and the health care team may recommend re-testing.

Is there a limit to how many times I can be tested?

- Specialists working on provincial testing have identified time periods for how frequently a test should be administered. This frequency may change as more information becomes available.
 - At **HOME**: HealthLine 811 will have the most up to date instructions for frequency. At this time there is no need to be tested more often than every few weeks.
 - o In **SHA FACILITY**: Your health care team will recommend when re-testing should occur.

Where will test results go?

- At HOME: You will be able to check for your results on My Sask Health Record, you will also receive a
 call from either public health, or the physician/nurse practitioner that ordered your test.
- In SHA FACILITY: Your health care team will discuss the test results with you.



What happens if the test is positive?

- At **HOME**: You will be notified of your test results and be provided with more information on what to do, and how to care for yourself.
- In **SHA FACILITY**: You will be placed on precautions and may be placed in a private room. If you are scheduled for a procedure, it may be postponed if non-urgent. Your health care team will provide further guidance.

What happens if I choose not to have the test?

- You may decide not to proceed with the test. It is encouraged that you have a conversation with your care provider or health professional prior to making a decision.
- As with any test, it is voluntary. Testing cannot be made mandatory by anyone, including your employer.

How can I protect myself?

- Currently, there is no approved vaccine that protects people against coronaviruses.
- As respiratory illness, the best method to protect yourself against COVID-19 is to practise every day
 preventative actions, including:
 - Sneeze or cough into a tissue. It a tissue is not available, cough or sneeze into the bend of your elbow.
 - Wash your hands often with soap and water; if soap and water are not available, use an alcohol- based hand sanitizer.
 - o Avoid touching your eyes, nose and mouth with unwashed hands.
 - Maintain safe food practices.
 - Avoid close contact with people who are sick.
 - Avoid unnecessary travel to affected areas.
 - Avoid large crowds and practise social distancing (do not shake hands, hug or kiss).

Refer to saskatchewan.ca/COVID19 for more information related to COVID-19



Saskatchewan Health Authority	Title: COVID-19 Negative Result Notification Role performing Activity: Designated Health Care Workers		
	Location: Saskatchewan Health Authority	Department/Unit: Public Health, OH&S, IPAC	
WORK	Document Owner: Primary Care	Date Prepared: April 6, 2020	
STANDARD	Last Revision: June 10, 2020	Date Approved: May 20, 2020	
	Related Policies/Documentation		

Work Standard Summary:

This Work Standard outlines the steps for assigned health care workers to notify clients with a negative COVID-19 laboratory result. Registered Nurses (RNs) in Occupational Health and Public Health are authorized to interpret COVID-19 lab results under the RNSP Medical Directive COVID-19 Medical Directive – Interpretation and Notification of COVID-19 Test Results and assign follow- up notification to other health care workers within a collaborative work environment. The Saskatchewan CD Manual COVID-19 chapter should be referenced for the most current recommendations.

	Essential Tasks:
1.	Designated HCWs are assigned the task of providing negative COVID-19 laboratory test results by authorized RNs.
2.	HCW is provided negative COVID-19 laboratory reports.
3.	Call client and follow the COVID-19 Negative Notification Script (See Appendix A). Always confirm client identification with minimum of two client identifiers (Name, DOB, HSN).
4.	Notify client of negative COVID-19 laboratory result.
5.	Determine follow-up based on <i>COVID-19 Negative Result Notification & Follow-Up Algorithm</i> (see Appendix B) and refer clients to saskatchewan.ca/coronavirus website for self-isolation and self-monitoring information as needed:
	i. If international travel was 14 days prior to symptom onset, and symptoms persist, continue to self-isolate until symptoms have significantly resolved for greater than 48 hours AND 14 days have passed since return to Saskatchewan, whichever is later. Advise client to call Healthline 811 if symptoms worsen or new symptoms emerge.

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ii. If international travel was 14 days prior to symptom onset, and symptoms have resolved, then continue to self-isolate until 14 days after return to Saskatchewan, or 48 hours after symptoms resolved, whichever is later. Self-monitor for return of, or onset of new symptoms. Advise client to call Healthline 811 if new onset of symptoms. iii. If no international travel 14 days prior to symptom onset and symptoms still persist, continue self-isolation until symptoms resolve for greater than 48 hours. If client is under mandatory self-isolation*, continue to self-isolate until 14 days after last exposure AND 48 hours after symptoms

iv. If *no international travel* 14 days prior to symptom onset *and* **symptoms have resolved** for greater than 48 hours **OR** client was tested without symptoms, self-isolation is no longer required. If client is under mandatory self-isolation*, continue to self-isolate until 14 days after last exposure AND 48 hours after symptoms resolved, **whichever is later.** Self-monitor for return of or onset of new symptoms. Advise client to contact Healthline 811 if new onset of symptoms.

resolved, whichever is later. Advise client to contact Healthline 811 if new symptom onset or

- v. If client is a HCW and testing was performed greater than 48 hours after symptom onset and symptoms persist, continue to self-isolate until symptoms have significantly resolved for greater than 48 hours. Repeat testing required if symptoms persist for greater than 7 days and/or if symptoms worsen. If HCW is also under mandatory self-isolation*, self-isolation and self-monitoring is required for 14 days after exposure, whichever is later. SHA HCWs to contact OHS at COVID-19 HCW Hotline (1-888-233-4403) for further direction. Non-SHA HCWs to contact their employer for further direction.
- vi. If client is a HCW and testing was performed greater than 48 hours after symptom onset and symptoms have resolved for greater than 48 hours OR client was tested without symptoms, self-isolation no longer required. Self-monitor for return of or onset of new symptoms. If HCW is also under mandatory self-isolation*, self-isolation and self-monitoring required for 14 days after exposure, whichever is later. SHA HCWs to contact OHS at COVID-19 HCW Hotline (1-888-233-4403) for further direction. Non-SHA HCWs to contact their employer for further direction.
- vii. If *client is a HCW* and was symptomatic, if testing was performed <u>less than 48 hours after symptom onset</u>, a second test is required. Complete a referral for testing at COVID-19 Testing site (See list of <u>Testing sites in SK</u>). SHA HCWs to contact OHS at COVID-19 HCW Hotline (1-888-233-4403) for further direction. Non-SHA HCWs to contact their employer for further direction.

6. Document completion of negative result notification as per local processes.

symptoms worsen.

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*Mandatory self-isolation is required by public health for the following circumstances:

- Identified as having close contact with a known positive COVID-19 case
- Identified as having non-close contact with a known positive COVID-19 case and have become symptomatic
- International travel within the last 14 days
- Identified to have worked in or visited a high risk community or facility (as per MHO and/or public health order)
- Attendance at mass gathering (as per MHO and/or public health order)

Supplies:

- Client Laboratory Result
- COVID-19 Negative Notification Script
- COVID-19 Negative Results Notification & Follow-Up Algorithm
- Telephone
- Data Worksheet or Electronic Database for entry (if applicable)

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Appendix A - COVID-19 Negative Notification Script



Public Health Nurses (PHNs), Nurse Practitioners, Physicians and other HCWs authorized within the Saskatchewan Health Authority (SHA) can communicate **negative** COVID-19 results to clients. Clients who test positive for COVID-19 will be contacted by a Communicable Disease PHN or Occupational Health Nurse (for SHA Affiliated HCWs).

Before each call ensure you have the following:

- Client Lab Report
- Documentation tool (as per local process, if applicable)

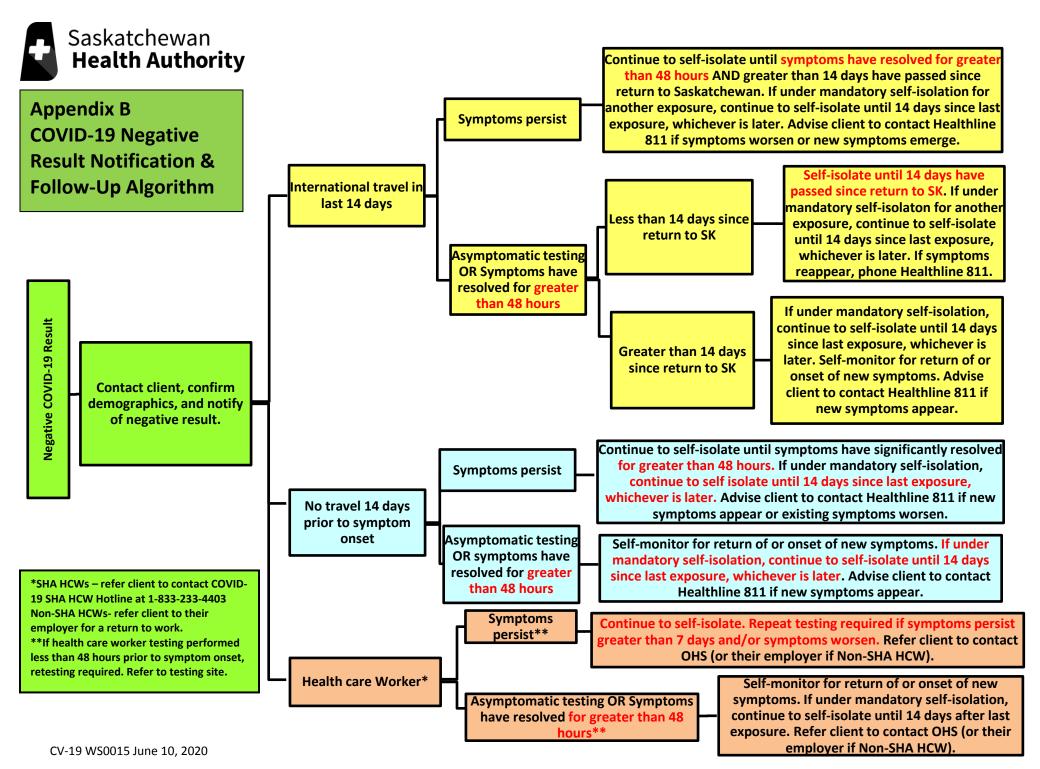
Call client:

- 1. If the client doesn't answer, leave a message if able: My name is [your full name]. I am calling from the Saskatchewan Health Authority. Could you please return my call at [306-XXX-XXXX]. Thank you.
- 2. If the client answers: Hello, this is [your name] calling from the [department] in [location]. Is this [client first name]?
- 3. I have some important health information to discuss with you, but before I share this information I need to confirm your identity. Could you please confirm your:

Two client demographic identifiers are required

- a. First and last name, and
- b. Date of Birth, or
- c. Saskatchewan health services number (HSN)
- 4. Thank you. Our records indicate that you were tested for COCID-19 on [date]. Is this correct?
 - a. If correct, proceed to advise the client ... I am calling to inform you that your lab test for COVID-19 is negative.
- 5. Ask the following questions:
 - a. Did you return from international travel outside of Canada in the last 14 days?
 - b. Do you have symptoms of COVID-19? (Full list of symptoms available in the Saskatchewan CD Manual).
 - c. Were you placed under mandatory self-isolation for 14 days by the Public Health Department (e.g. identified to have close contact with someone who is positive for COVID-19)?
 - d. Are you a health care worker? If yes, are you employed by the SHA?
- 6. Refer to the COVID-19 Negative Result Notification and Follow-Up Algorithm to (Appendix B) to determine requirements for self-isolation, self-monitoring and any additional follow-up. Provide recommended actions to client. (Refer client to Ministry of Health COVID-19 website for information on self-isolation and self-monitoring as needed).
- 7. Reinforce teaching on self-isolation and self-monitoring as required.
- 8. Confirm the client understands the information you have provided. This can be achieved by asking the client to repeat back the information. (e.g. "My test is negative. Because I am still symptomatic, I need to self-isolate until [date]. If my symptoms worsen, I need to call 811.")
- 9. Do you have any questions for me? [Answer questions]. If you think of any other questions don't hesitate to call the Healthline at 811. Thank you for taking the time to speak with me today.

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Saskatchewan Health Authority	Title: Completing Requisitions for COVID-19 Testing Requests Role performing Activity: Health Care Worker Document #: PROV-16 Version: 3		
1440014	Location: SHA	Department/Unit: Laboratory Medicine	
WORK	Document Owner: Nicole Cox	Date Prepared: 31 March 2020	
STANDARD	Last Revision: May 28 2020	Date Approved: May 28 2020	
	Related Policies/Documentation SHA Daily Rounds		

Work Standard Summary: Summary of process for completing COVID-19 Pandemic Requisition for specimens submitted for COVID-19 testing to ensure timely processing, testing and report distribution.

Note: The health care provider <u>must</u> direct 'copies to' appropriate Public Health and Employee Health reporting locations.

		Essential Tasks:
1.	Patient registered in former he	ealth region Registration System (SER or WINCIS)
2.	requisition.	Requisition for specimen testing for COVID. Complete ALL areas of the company all specimens sent for COVID-19 testing in Saskatchewan.
3.	Patient information	 First and last name Complete address including postal code (required for MHO) Phone number PHN/HSN (if other than Saskatchewan, identify province code) Birthdate Gender Note: HIS or LIS generated labels may be applied to requisitions providing all the above information is included.
4.	Collection information	 Outbreak # when applicable Specimen collection date and time
5.	Location/Collection Site	 Patient location if in acute care or location the patient sample was collected Assessment site locations Insert specific site name/location
6.	Specimen information	Select specimen type

7.	Ordering information	 Ordering physician/health care provider OR assessment site locations Physician/health care provider Full name (example John H Smith) Complete address including postal code Phone number Validated fax number
8.	Copies to Practitioner information	 Copies to additional physicians Full name (example Justin H Smith) Complete address including postal code Validated fax number For Public Health reporting Insert appropriate location name from Appendix A For Employee Health reporting (SHA employees ONLY) Insert appropriate location name from Appendix B To direct a copy to the COVID assessment site Insert specific site name / location
9.	Location of Selection	 Location of specimen collection Provide the City/town Select the Site (eg. testing/assessment site, ER, patient home etc.)
10.	Living Situation	Select appropriate checkbox
11.	Occupation	Select appropriate checkbox
12.	Request for Prioritization/ STAT testing	If appropriate, select the STAT category
13.	Test Request	Mark the tests requested
14.	Request for POC testing	Current accepted indications for POC testing are available on <u>www.saskatchewan.ca/COVID</u> website
15.	Test Indication	 Identify whether patient is symptomatic or asymptomatic Symptomatic – check all symptoms and indicate duration on second page Asymptomatic – select appropriate option(s) on second page

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Appendix A: Public Health reporting locations

Public Health – Athabasca	
Public Health – Keewatin Yatthe	
Public Health – La Ronge	
Public Health – Melfort	
Public Health – Moose Jaw	
Public Health – North Battleford	

Public Health – Prince Albert
Public Health – Regina
Public Health – Rosetown
Public Health – Saskatoon
Public Health – Swift Current
Public Health – Weyburn
Public Health – Yorkton
First Nation and Inuit Health Branch (FNIBH)
Northern Inter-Tribal Health Authority (NITHA)

Appendix B: Employee Health reporting locations (SHA employees ONLY)

Employee Health – Battleford
Employee Health – Melfort
Employee Health – Moose Jaw
Employee Health – Prince Albert
Employee Health – Regina RGH
Employee Health – Rosetown
Employee Health – Saskatoon SCH/Rural
Employee Health – Swift Current
Employee Health – Weyburn
Employee Health – Yorkton

Note:

- Former Keewatin Yatthe, former Mamawetan Churchill River and former Athabasca Employee Health follow-up done by Public Health La Ronge.
- Northern Inter-Tribal Health Authority and First Nation and Inuit Health Branch Employee Health follow-up done by their respective Public Health agencies.

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COVID-19 testing in Asymptomatic Cancer Patients Receiving Cancer treatment

Based on the announcement from the Ministry of Health last week, asymptomatic cancer patients on treatment are now eligible to be tested for COVID-19. In order to facilitate this testing, the SCA will phase in, starting this week (week 1), testing for asymptomatic cancer patients on treatment as follows:

- Week 1: Testing for asymptomatic patients from "areas of concern"
 - As per the SHA outpatient screening guidelines, this test is required for these patients coming to any outpatient facility.
- Week 2: Malignant Hematology
- Week 3: Lung Cancer
- Week 4: pause and review processes and outcomes
- Week 5: Head and Neck and CNS
- Week 6: Colorectal

Testing will be done 72 hours prior to each chemotherapy cycle x 6 cycles. This will be re-evaluated over time and may be adjusted given the prevalence of COVID in Saskatchewan.

Testing will also be offered to for each patient in the applicable disease site group starting radiation just prior to their CT Simulation

Testing for asymptomatic patients (outside of the "areas of concern") is not mandatory but is recommended based on the information below. Treatment will not be delayed or withheld if patients decline testing.

Testing will begin with the disease site group phased in approach for patients AFTER a discussion with the MRP/Clinical Associate just prior to their next cycle of systemic therapy or during the discussion to start a new radiation treatment.

The following is an exerpt from CAPCA (Canadian Association of Cancer Agencies) on asymptomatic testing based on a document produced by Ontario on asymptomatic testing in certain patient populations.

Identifying COVID-19 infected patients is key to risk stratification for treatment decision-making. As asymptomatic patients are often highly infectious in 2-3 days prior to onset of symptoms (Xi H et al), testing would inform the decision to treat or defer, and this

can reduce potential complications in patients and reduce infecting other patients and staff in the department.

Rationale for Recommendations

a) Increased risk for cancer patients

Ontario Health (Cancer Care Ontario) recognizes the significant risk that the COVID-19 virus poses to immunocompromised patients, including those receiving cancer treatment, as well as the risk of further transmission to others caring for this patient population. This is supported by several findings to date, including:

- In Wuhan, China, Yu et al. (2020) reported that infection rates in cancer patients were more than double the cumulative incidence of all diagnosed COVID-19 cases.
- In Italy, Onder et al. (2020) reported than an estimated 20.3% of COVID-19-related deaths occurred in patients with active cancer.
- Liang et al. (2020) reported COVID-infected cancer patients were observed to have a higher risk of severe events (admission to ICU requiring invasive ventilation, or death) than patients without cancer
- Williams et al. (2020) developed a simple model to estimate the potential harms in patients undergoing chemotherapy during COVID-19. They estimated that the risk of dying is approximately two-fold within the same ages by decade. For example, the absolute mortality increases from 3.3% to 7.9% in the age 60-69 year age group, and from 8.5% to 17% in the age 70-79 year age group in COVIDinfected cancer patients undergoing chemotherapy.

The purpose of testing asymptomatic cancer patients is to identify patients who are COVID-19 positive prior to starting on immunosuppressive cancer treatment. If a patient tests positive, then treatment will almost certainly be deferred (exception is most Priority A cases) until they are cleared by the local Infection Control staff. Proceeding with cancer treatment in patients who are COVID-19 positive exposes patients to developing life threatening complications from a COVID-19 infection. In these cases, treatment should not proceed except in very unusual circumstances where the risks of delay in initiating treatment outweighs the risk of an overwhelming COVID-19 infection developing while on treatment. It is recognized that testing at a moment in time does not ensure that a patient will not subsequently test positive for COVID-19. However, it will allow the patient and oncologist to make the best decision regarding timing of therapy given the benefits of treatment, balanced with the risks of infection. The guidelines outline a pragmatic approach to testing and are felt to be appropriate for this point in the pandemic. As the prevalence of COVID-19 decreases in the community this will be revisited, and the approach revised as required.



Title: Receiving Physician and Third Party Testing Requests

Role performing Activity: Testing Sites

WORK STANDARD

Location: Covid – 19 Testing Centres	Department/Unit: Emergency Command – Covid 19
Document Owner: COVID-19 SHA EOC	Date Prepared: 3/24/2020
Last Revision: 05/25/2020	Date Approved: 05/25/2020

Related Policies/Documentation: 5.4.20 Testing and Assessment Site Memo

Work Standard Summary:

Essential Tasks:

1.

Physicians or Third Parties requesting testing at SHA Official Covid-19 Testing Sites will email, fax, or call the individual site that they wish to refer an individual to.

Obtain the following information:

Patient name, birth date, PHN, patient contact information and referrer contact information

2.

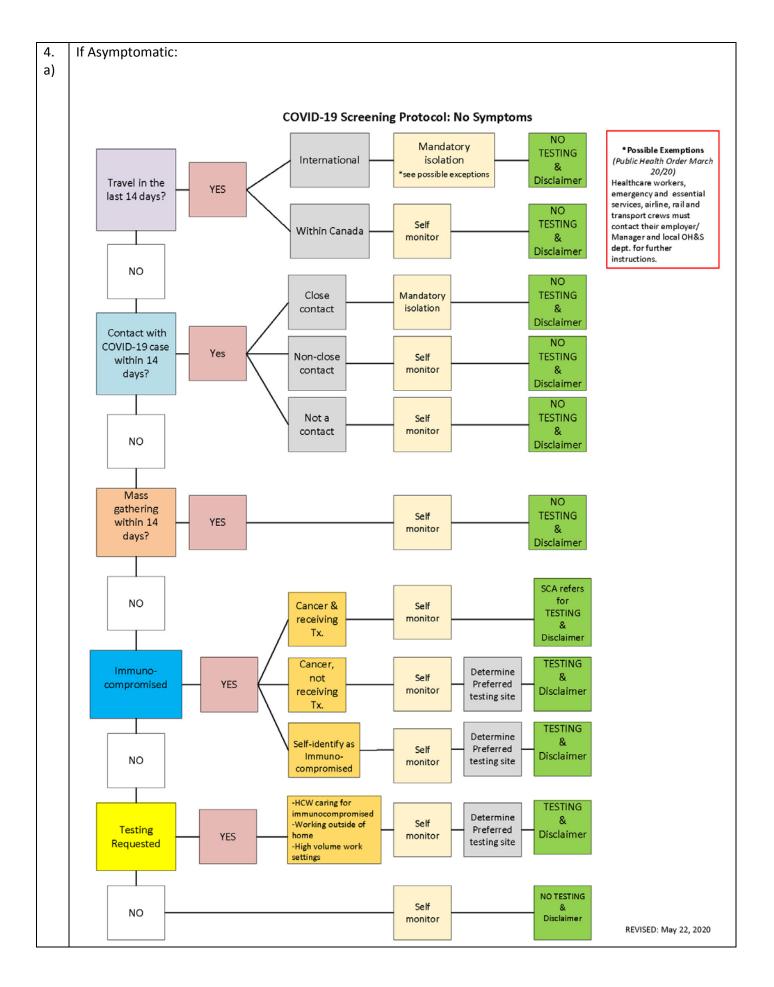
Test site contacts individual to book appointment - determine if individuals are appropriate for testing site by using the algorithms below based on asymptomatic or symptomatic presentation.

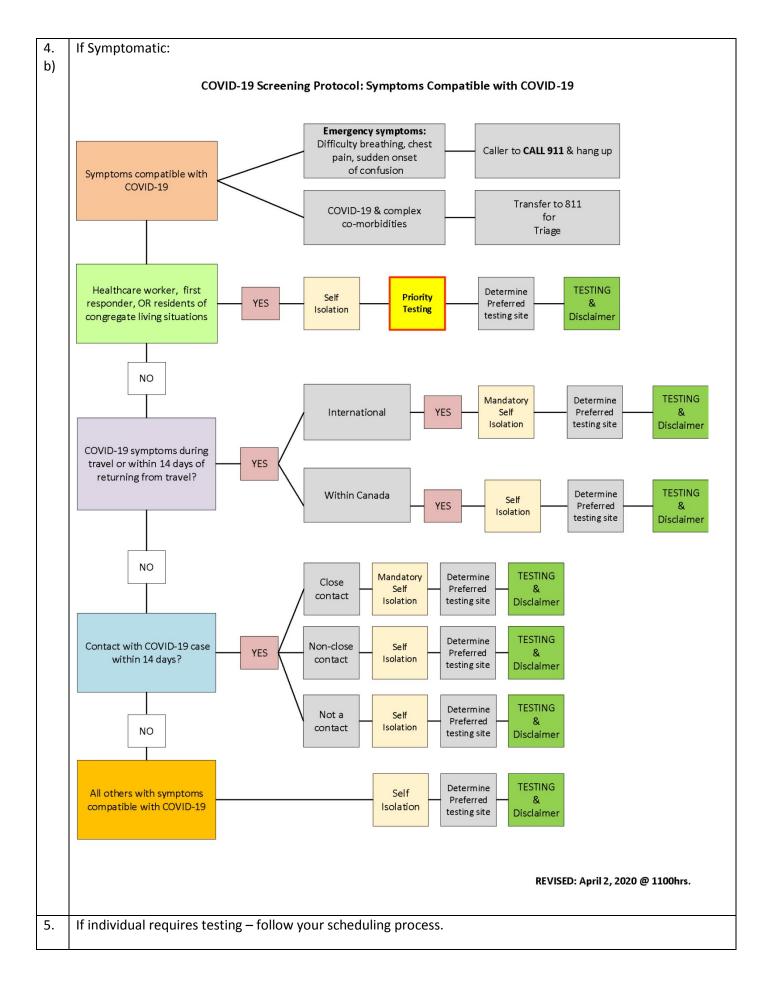
<u>Additional Possible Exemptions to the No-Symptom – No Testing</u>: Individuals who may be at high risk within a particular community who have been notified by public health; individuals being admitted or re-admitted to long-term care, or personal care homes; all residents and staff in long-term care and personal care homes upon notification of a COVID-19 positive resident or staff member.

3. Please note the Disclaimer scripts on booking

<u>No Symptoms & No Testing</u> – If you develop symptoms compatible with Covid19 including fever, cough, headache, aches and pains, sore throat, chills, runny nose, loss of sense of taste or smell, shortness of breath or difficulty breathing.

<u>Symptoms & Testing Booked</u> –Call 911 if you experience any more serious symptoms including Difficulty breathing, chest pain or confusion.





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Employee Health – Prince Albert
Employee Health – Regina RGH
Employee Health – Rosetown
Employee Health – Saskatoon SCH/Rural
Employee Health – Swift Current
Employee Health – Weyburn
Employee Health – Yorkton

Note:

- Former Keewatin Yatthe, former Mamawetan Churchill River and former Athabasca Employee Health follow-up done by Public Health La Ronge.
- Northern Inter-Tribal Health Authority and First Nation and Inuit Health Branch Employee Health follow-up done by their respective Public Health agencies.

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