

The Office of Continuing Medical Education & Professional Development


COVID-19 Rural Update

Rural Videoconference 2019-2020

March 31 2020

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Moderator
Dr. David Topps



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Territorial Acknowledgement



ii' taa'poh'to'p

Source: <https://www.ucalgary.ca/indigenous>

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Faculty/Presenter Disclosure

Faculty Dr. Linda Slocombe

Financial Affiliations

- Senior Medical Director - Provincial Primary Health Care and PHC Integration Network
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Faculty/Presenter Disclosure

Moderator

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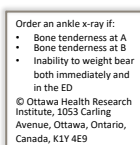
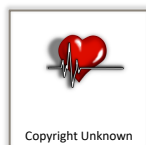
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Learning Objectives


At the end of this session, participants will be able to

- Describe AHS protocols for COVID-19 pandemic
- Describe AHS treatment protocol or recommendation, as well as healthcare providers self-care including PPE
- Recognize COVID-19 symptoms and differentiate it from other flu
- Explain proper testing procedure
- Advise patients on prevention practice

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Alberta Health Services


Rural Videoconference Series: Update on COVID-19

Dr. Linda Slocombe
Senior Medical Director, Primary Health Care
Alberta Health Services (AHS)

March 2020



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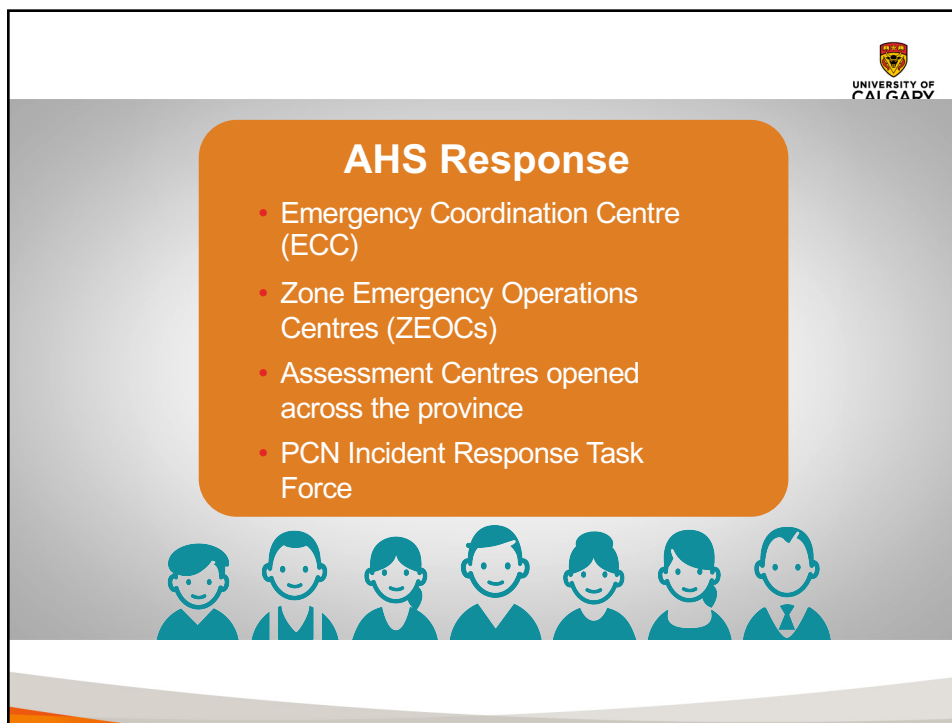


COVID-19 Overview

- Mild to severe respiratory illness with symptoms of fever, cough, and shortness of breath.
- Incubation period for COVID-19 is similar to other novel coronaviruses, between 1 and 14 days.
- Updates and information for the public and healthcare providers available at ahs.ca/covid.

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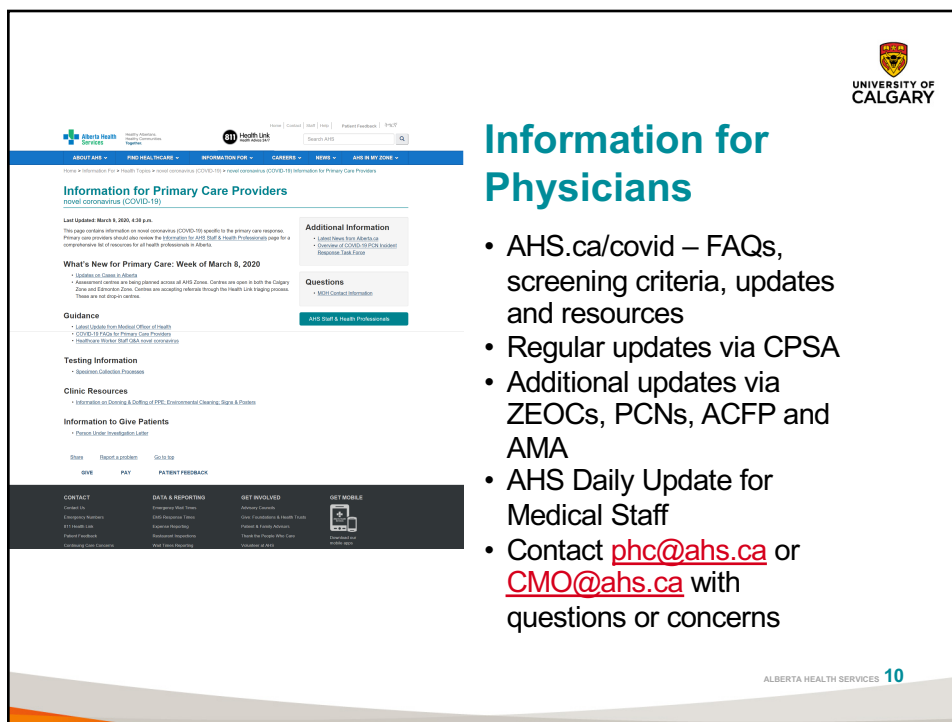


AHS Response

- Emergency Coordination Centre (ECC)
- Zone Emergency Operations Centres (ZEOCs)
- Assessment Centres opened across the province
- PCN Incident Response Task Force

Below the text are seven stylized human icons representing a diverse group of people.

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Information for Physicians

- AHS.ca/covid – FAQs, screening criteria, updates and resources
- Regular updates via CPSA
- Additional updates via ZEOCs, PCNs, ACFP and AMA
- AHS Daily Update for Medical Staff
- Contact phc@ahs.ca or CMO@ahs.ca with questions or concerns

The slide includes a screenshot of the AHS website's 'Information for Primary Care Providers' page, showing sections like 'What's New for Primary Care: Week of March 8, 2020', 'Guidance', 'Testing Information', 'Clinic Resources', and 'Information to Give Patients'.

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Screening Criteria

People with fever and/or a cough, or shortness of breath, or difficulty breathing, are at highest risk of having COVID-19 if they meet any of the following criteria: In the 14 days before illness onset, they:

- Travelled anywhere outside of Canada; or
- Had close contact with a confirmed or probable case of COVID-19; or
- Had close contact with a person with acute respiratory illness who has travelled anywhere outside of Canada within the last 14 days before their illness; or
- Had laboratory exposure to biological material (e.g. primary clinical specimens, virus culture isolates) known to contain COVID-19 virus.

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Healthcare Worker Screening

- [Online Healthcare Worker Self-Assessment tool](#) is now available through ahs.ca/covid.
- Available for AHS and non-AHS physicians
- Reflects the current testing requirements from Alberta Health
- Guidance on when to self-isolate and when to call Health Link for a referral for COVID-19 testing or Workplace Health and Safety (WHS) to address a potential workplace exposure.
- Please only contact Health Link 811 or WHS if your condition worsens.

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Testing

Testing is prioritized for:

- People who are hospitalized with respiratory illness
- Residents of Continuing Care and other similar facilities
- People who returned from travelling outside Canada between March 8 and March 12 (before self-isolation protocols were in place)
- Healthcare workers with respiratory symptoms
- For the latest testing information, visit ahs.ca/covid

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Testing

- Nasopharyngeal (NP) swab under strict droplet and contact precautions.
- N95 masks are only required for aerosol-generating medical procedures, not NP tests.

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Guidance: 3 Scenarios

1 Patient meets screening criteria and wants to visit the clinic:

- Patient should not visit a hospital, physician's office, lab or healthcare facility
- Patient should take the online COVID-19 self-assessment
- Patients should then call Health Link (811) if instructed to

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Guidance: 3 Scenarios

2 Patient has ILI symptoms but does not meet screening criteria:

- Patient MUST self-isolate for 14 days
- Patients should call their family physician or 811 if their symptoms worsen
- Call 911 if they are seriously ill and need immediate medical attention

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Guidance: 3 Scenarios

3 Patient has ILI, doesn't meet the screening criteria, but needs to be seen for another issue

- Determine the patient doesn't need COVID-19 testing
- Consider if virtual care is an option with your family physician
- If this is not an option and your clinic has contact/droplet PPE, you can advise them to come into your office and immediately wear a mask.

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Safety Precautions

- If your patient meets high risk screening criteria:
 - Have them wear a procedure mask immediately
 - Isolate patient from other care areas
 - Should not visit any other healthcare facilities
 - Clinicians should don appropriate PPE
 - Self-isolation
 - Review FAQs for additional cleaning and sanitation options for clinic space

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Personal Protective Equipment

- Protective measures are the same as Influenza-like illness (ILI).
- Contact & droplet personal protective equipment: Gloves, gown, procedure mask and eye protection
- An N95 mask is required only if Aerosol Generating Medical Procedures (AGMP) is required.
- An NP swab is not an AGMP.

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Personal Protective Equipment



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Personal Protective Equipment

- AHS distributing PPE to PCN and non-PCN primary care clinics.
- Distribution to clinics coordinated by PCNs
- 7 PCN distribution hubs for non-PCN clinics

| | |
|---------------|--------------------|
| Grand Prairie | Calgary Foothills |
| Wood Buffalo | Edmonton Southside |
| Red Deer | Palliser |
| Chinook | |

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Virtual Care

CPSA advises virtual care can be used for:

- Screening
- Care for patients with suspected COVID-19
- Care for regular patients for the following:
 - To avoid unnecessary trips to the office
 - To manage patients with chronic disease
 - To manage other acute illness that may not require a physical exam

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Virtual Care

Getting started with virtual care

- Obtain patient email and/or mobile numbers
- Inform patients
- Obtain patient consent
- Update patient chart

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Virtual Care

Billing Codes:

| | |
|-------------------------|---|
| <u>03.05JR</u> | Physician Telephone Call Directly to Patient to Discuss Test Results. |
| <u>03.01S</u> | Physician to Patient Secure Electronic Communication. |
| <u>03.01T</u> | Physician to Patient Secure Videoconference. |
| <u>**03.01AD</u> | Advice to Patient or their Agent via Telephone, Email and Videoconference including Virtual Care during a Viral Epidemic. |

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Virtual Care


Resources and options:

AMA:
<https://www.albertadoctors.org/leaders-partners/ehealth/virtual-care>

CPSA:
http://www.cpsa.ca/wp-content/uploads/2020/03/AP_COVID-19-Virtual-Care.pdf

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Additional Resources

- Ahs.ca/covid – screening criteria, IPC information, FAQs and other updates.
- Medical Officers of Health available for consultation contact your [Zone Medical Officer of Health](#) on call.
- Questions? phc@ahs.ca

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