

**Acute and Long Term Care COVID-19 Highlights – Provincial**

**Latest update will appear in blue**

Where the term patient is used throughout this document, it shall be interpreted as referring to patient, resident or client unless explicitly stated otherwise.

**Contact Site  
IPC/Designate**

For ALL **ADMITTED** suspected or confirmed cases report to site/region/SDO Infection Control Professional or designate  
After hours, ensure contact information is available specific to your site/region/SDO

**INFECTION PREVENTION & CONTROL MEASURES**

	History Criteria	Signs and Symptoms Criteria
<b>Screening Criteria</b>	<p>Staff asks <b>the following questions</b>:</p> <ul style="list-style-type: none"> <li>In the past 10 days have you tested positive for COVID-19 (either by RAT or PCR)?</li> <li>In the past 14 days have you been exposed to someone that has tested positive for COVID-19 (either by RAT or PCR – lab-based test) or has COVID-19 symptoms?</li> <li>In the past 14 days have you travelled internationally while not fully vaccinated?</li> </ul>	<p>ONE symptom in Category A OR TWO or more symptoms in Category B*</p> <p><b>A:</b> Fever&gt;38 or subjective fever/chills; cough; sore throat/hoarse voice; shortness of breath/breathing difficulty, loss of taste or smell; vomiting or diarrhea for more than 24 hours</p> <p><b>B:</b> runny nose; muscle aches; fatigue; conjunctivitis; headache; skin rash of unknown cause; nausea or loss of appetite; poor feeding (in an infant)</p>
	* if 1 Category B symptom –implement Droplet/Contact Precautions. If AGMP, per <a href="#">Shared Health protocol</a> . Test for COVID-19.	
<b>Source Control</b>	<ul style="list-style-type: none"> <li>Signage at entrances</li> <li>Hand hygiene (HH) and respiratory etiquette</li> <li>Apply medical mask on patient and accompanying persons immediately</li> <li>Separate waiting areas for persons with potential infection if unable to immediately isolate</li> </ul>	
<b>Additional Precautions &amp; Personal Protective Equipment (PPE)</b>	<ul style="list-style-type: none"> <li><a href="#">Droplet/Contact Precautions with Airborne Precautions</a> for <a href="#">aerosol-generating medical procedures (AGMPs) for COVID Suspect and Positive patients</a></li> <li>Post appropriate <a href="#">signage</a> on room door</li> <li>Implement <a href="#">Personal Protective Equipment Supply Management and Stewardship Planning and Guidance Framework</a> principles and recommendations as appropriate for setting and services provided</li> <li>Dedicate patient equipment. If not able to dedicate, clean/disinfect after use</li> </ul>	
<b>Patient Accommodation</b>	<ul style="list-style-type: none"> <li>Single room. If cohorting necessary, consult IP&amp;C; only possible for COVID-positive, including variants of concern (VOC)</li> <li>For AGMPs if no AIIR, close door to single room</li> </ul>	
<b>Testing</b>	<ul style="list-style-type: none"> <li>If symptomatic, <a href="#">collect 1 nasopharyngeal (NP) swab</a> placed in viral transport medium or NP aspirate in addition to routine investigations; video <a href="https://vimeo.com/398627117/e35232c036">https://vimeo.com/398627117/e35232c036</a></li> <li>Include travel history or other relevant screening criteria, relevant symptoms, and request for COVID-19 on requisition</li> <li>More severely ill patients may require deep lung specimens be submitted, such as sputum, ETT secretions or broncho-alveolar lavage specimens</li> </ul>	
<b>Patient Transport</b>	<ul style="list-style-type: none"> <li>Transport out of the isolation room for medically essential purposes only</li> <li>Notify Patient Transport Services and receiving department regarding Additional Precautions required in advance of transport</li> <li>Patient applies medical mask and performs Hand Hygiene</li> </ul>	
<b>Patient Items</b>	<ul style="list-style-type: none"> <li>Ensure items dropped off for patients are dedicated to the intended patient only and not shared amongst patients</li> <li>Newspapers and books are allowed but must be single-use for Orange and Red zones <ul style="list-style-type: none"> <li>Green Zones: if not possible to achieve single use, reuse no sooner than the following day may be considered if not visibly soiled, and if stored at least overnight in a clean, dry, and secure space (without being handled during that time)</li> </ul> </li> <li>Ensure hand hygiene before and after interaction with items</li> </ul>	
<b>Contact Management</b>	Refer to <a href="#">Updated IP&amp;C COVID-19 Contact Management in Acute and LTC Facilities</a>	
<b>Discontinuation of Precautions</b>	<p><b>COVID POSITIVE</b></p> <ul style="list-style-type: none"> <li>To discontinue precautions for a patient who is COVID-19 positive consult IP&amp;C/designate: 10 days from symptom onset and 72 hours while asymptomatic must have passed, whichever is longer.</li> <li>If client is in the ICU, was in the ICU and/or required Optiflow – refer to SDP for further guidance.</li> <li>Where patients with confirmed COVID-19 infection have been cohorted and one has recovered, this patient may be moved into the Green Zone as required</li> </ul> <p><b>COVID SUSPECT</b></p> <ul style="list-style-type: none"> <li>To discontinue precautions for an asymptomatic COVID-19 suspect patient with a known exposure history, consult IP&amp;C/designate. If symptoms develop, collect nasopharyngeal specimen for PCR testing. If positive, follow protocols for positive patient management (10 days from symptom onset and 72 hours while asymptomatic). If negative, continue to isolate for the remainder of 10 days and until symptoms resolve.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Where there are negative COVID-19 test results in a patient that does not meet the 'exposure' criteria or 'History' criteria (see sections above) in patients with respiratory symptoms:             <ul style="list-style-type: none"> <li>○ Consult IP&amp;C/designate. Patient management maybe adjusted to follow seasonal viral respiratory management protocols (i.e., droplet/contact precautions and discontinuation of precautions when symptom(s) resolve)</li> <li>○ Decisions are based on relevant epidemiological data (i.e., known COVID-19 case(s) in a facility, community or congregated/work setting, or outbreaks). Those with known exposure history (contact, travel, or lab exposure) would not change additional precautions, regardless of swab results</li> </ul> </li> </ul>
<b>Discharge</b>	<ul style="list-style-type: none"> <li>• Follow <a href="#">Discharge Transport - COVID-19 Positive or Suspect (Acute Care)</a> processes for patients who are COVID positive or suspect</li> </ul>
<b>Visitor Management</b>	<ul style="list-style-type: none"> <li>• Visitor access is limited. Explore alternate mechanisms for interactions between patients and other individuals (e.g., video call on cell phones or tablets)</li> <li>• Follow Shared Health <a href="#">Expanded Visitor Access Acute and Long Term Care</a></li> <li>• Visitors must follow hand hygiene, physical distancing, respiratory hygiene, and PPE recommendations as outlined</li> <li>• Screen and manage visitors as a suspect if they have signs and symptoms and/or exposure criteria consistent with COVID-19 infection</li> <li>• Instruct visitors to speak with a nurse or physician before entering the room to assess risk to the visitor's health and ability to adhere to Routine Practices and Additional Precautions</li> <li>• Provide visitors with instructions on and supervision with appropriate use of PPE for Droplet/Contact precautions with Airborne Precautions for AGMPs; visitors should not be present during AGMPs</li> </ul>

**Change tracker:**

- June 28, 2022: Updates to testing requisition information and contact tracing / management
- June 2, 2022: Removed testing of new admissions; changed to testing of symptomatic individuals only.
- March 21, 2022: Updated screening criteria to align with latest changes to public health orders.
- March 1, 2022: Change of isolation time from 14 days to 10. Removal of questions regarding vaccination status
- Dec. 6, 2021: Updated Exposure section with return from international travel to countries requiring self-isolation/quarantine.
- Oct. 13, 2021: Changed the period of time a patient is considered recovered from 90 to 180 days following the date of the positive COVID test.
- Aug. 18, 2021: Added clarification re: 1 category B symptom; LTC and Acute combined into one document; duration of precautions updated; screening criteria updated; fully vaccinated info added.
- Feb. 18, 2021: Changed definition of prolonged exposure from 15 minutes to 10 minutes.
- Jan. 29, 2021: Updated exposure criteria to include travel to anywhere outside Manitoba.