

### Typical Symptoms - New Onset:

- Fever (>37.8C), chills
- Cough, sore throat
- Shortness of breath/hypoxia
- Clinical/radiologic evidence of pneumonia
- Nausea, vomiting, diarrhea
- Loss of taste or smell

### Atypical Symptoms - New Onset/Unexplained:

- Runny nose, nasal congestion
- Conjunctivitis, croup
- Acute functional decline (eg. delirium, falls)
- Acute cardiac change (eg. tachycardia, hypotension)
- Headaches, fatigue/malaise/myalgia
- Rash/ discoloured toes/ fingers
- Multisystem inflammatory vasculitis in children
- Lethargy, difficulty feeding in infants

### COVID-19 Exposures

- COVID/Respiratory outbreak ward/facility
- Contact with someone with COVID
- Contact with someone undergoing testing for COVID

## How likely is COVID based on a clinical assessment and exposures?

**HIGH LIKELIHOOD:** Either of **1 OR 2** below

- 1) Typical symptoms & **COVID Exposed**
- 2) **Typical Symptoms & no alternate diagnosis**
- 3) **Atypical Symptoms** AND **COVID Exposed**
  - E.g. New Cough with no CXR findings
  - E.g. New Hoarse voice and family member works in LTCF in outbreak

**LOW LIKELIHOOD:**

- **Asymptomatic and testing per testing guidance document (with or without COVID exposure)**
- **Atypical symptoms with no COVID exposures**
- Typical symptoms with another more likely diagnosis
  - E.g. New Fever – w/ UTI on dipstick

**ALL EXPOSED AND/OR SUSPECTED COVID-19 SYMPTOMATIC PATIENTS SHOULD BE ISOLATED**

## Admissions to St. Peter's Hospital

### From Community, LTC or retirement home

- Community: no test on admission  
LTC/RH: test on admission
- Admit to private room, no Droplet/Contact Precautions\*
  - Patient to remain in room
  - Test on day 8 and if negative patient can be moved from private room

### From acute care hospital, asymptomatic with <7 days admission

- Do not test on or before admission
- Admit to private room, no Droplet/Contact Precautions\*
- Patient to remain in room
- Test on day 8 from initial date of acute care admission, if negative patient can be removed from private room

### From acute care hospital, asymptomatic with 7-14 days admission

- Test before admission
- If negative no segregation required, patient can be admitted to semi private or ward room

### From acute care hospital, asymptomatic with >14 days admission

- No need to test on or before admission
- No segregation required, patient can be admitted to semi private or ward room

\*Additional Precautions may be required for other reasons than COVID

## What test should I order?

Patient is asymptomatic, testing to rule out COVID for AGMP, or transfer to LTC

Order: COVID19

Patient is symptomatic, new onset or worsening of fever, cough, SOB

Order: CVIRNPS

## Management of test results

### Confirmed COVID positive:

- Notify physician and leadership for transfer to General Hospital COVID ward
- Remain on Droplet/Contact Precautions
- Place roommates on Droplet/Contact Precautions

### Confirmed COVID negative:

- Review symptoms and test results with ICP prior to discontinuing Additional Precautions