COVID-19 Highlights – Winnipeg

For ALL ADMITTED suspected or confirmed cases report to site Infection Control Professional or designate. After hours leave a voice message for follow up and if urgent, contact IP&C designate:
- Children's Hospital - Pediatric ID: 204-787-2071
- St. Boniface Hospital – Dr. Evelyn Lo: 204-237-2053
- HSC and all other sites - Dr. John Embil: 204-787-2071

**GENERAL INFORMATION**

**Screening**
Staff asks in the past 14 days have you:
- Returned from travel, including outside Manitoba (not including Nunavut or NW Ontario) OR
- Had exposure* to a confirmed (presumptive positive) case of COVID-19; OR
- Had a Lab exposure working directly with biological specimens that contain COVID-19 OR
- Are you a symptomatic worker or volunteer in essential services+, including health care worker or first responder**?
- Are you a symptomatic resident or worker in a remote or isolated community or congregate setting such as a correctional facility, shelter, LTC or residential facility, or remote work camp?
- Are you symptomatic and do you live with a health care worker, first responder or worker in a congregate setting such as correctional facility, shelter, long-term care facility or residential facility?

* Exposure includes attendance at large group settings where someone has been confirmed to have COVID-19. Health-care provider should confirm setting and how individual was notified.

** First responders include police, firefighters and paramedics.

+ Essential services are those workplaces permitted to remain open during the shutdown of non-essential workplaces mandated by Public Health orders.

Screening criteria are intended to supplement clinical judgement, not supersede it.

**Signs & Symptoms**
- Cough, fever, difficulty breathing, sore throat, runny nose, malaise, headache, muscle aches, hoarse voice, fatigue, loss of taste or smell, nausea, vomiting or diarrhea for more than 24 hours, poor feeding (infant)

**INFECTION PREVENTION & CONTROL MEASURES**

**Patients with signs/symptoms (Source Control)**
- Signage at entrances
- Hand hygiene (HH) and respiratory etiquette
- Apply mask on patient and accompanying persons immediately
- Separate waiting areas for persons with potential infection if unable to immediately isolate

**Additional Precautions & Personal Protective Equipment (PPE)**
- Enhanced Droplet/Contact Precautions
- Post appropriate signage on room door
- Follow universal PPE guidance
- Dedicate patient equipment

**Patient Accommodation**
- Single room. If cohorting needed, consult IP&C; only possible for confirmed infection
- For AGMPs if no AIIR, close door to single room

**Testing**
ONLY SYMPTOMATIC PEOPLE WHO MEET SCREENING CRITERIA
- Collect 1 nasopharyngeal (NP) swab placed in viral transport medium or NP aspirate in addition to routine investigations; video: https://vimeo.com/398627117/e35232c036
- Include travel history, relevant symptoms, and request for COVID-19 on CPL requisition
- Clearly identify on the requisition if the patient is an inpatient, a health-care worker or a resident of a remote/isolated community or congregate setting
- More severely ill patients may also require deep lung specimens be submitted, such as sputum, ETT secretions or broncho-alveolar lavage specimens

**Patient Transport**
- Transport out of the isolation room for medically essential purposes only
- Notify Patient Transport Services and receiving department regarding Enhanced Droplet/Contact Precautions in advance of transport
- Patient applies mask and performs HH

**Patient Items**
- Ensure items dropped off for patients are able to be cleaned and disinfected

**Discontinuation of Precautions**
- To discontinue precautions for a COVID19 positive patient consult IP&C/designate. 14 days from symptom onset and 72 hours while asymptomatic must have passed, whichever is longer
- COVID19 positive patients may be discharged home positive; they do not have to stay in a facility
- Where there are negative COVID-19 test results in the following patients with respiratory symptoms:
  - Symptomatic health-care worker or first responder, including volunteer first responder (respiratory symptoms), OR
  - Symptomatic resident or worker in a remote or isolated community or congregate setting, such as a correctional facility, shelter, long term care or residential facility, or a remote work camp
  - Consult IP&C. Patient management maybe adjusted to follow seasonal viral
Respiratory management protocols (i.e., droplet/contact precautions and discontinuation of precautions when symptom resolve)
- Decisions are based on relevant epidemiological data (i.e., known COVID19 case(s) in the 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.

**Discharge**
- Fax WRHA Population and Public Health at (204) 940-2690 with the COVID19 positive patient demographic information (name, date of birth, PHIN) as well as contact information (phone numbers and address). Provide patient with appropriate Public Health fact sheets, available at Public Health resources on [https://sharedhealthmb.ca/covid19/providers/](https://sharedhealthmb.ca/covid19/providers/)

**Visitor Management**
- Visitor access is not permitted. Exception can be considered as outlined in the algorithm process for managing visitors who present to points of entry
- Explore alternate mechanisms for interactions between patients and other individuals (e.g., video call on cell phones or tablets)
- All visitors must be screened for signs/symptoms of COVID prior to entry. The following people are not permitted entry
  - Someone who answers ‘yes’ to any screening criteria
  - Someone who has signs/symptoms consistent with COVID infection
  - Someone who has tested positive (until medically cleared)
- 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
- Provide visitors with instructions on and supervision with appropriate use of PPE for Enhanced Droplet/Contact precautions; visitors should not be present during AGMPs

**Social Distancing**
- Reduce close contact between people to try to stop progression of virus transmission:
  - Minimize prolonged (more than 10 minutes), close (less than 2 metre) contact with others
  - Avoid greetings that involve touching, including handshakes and hugs
  - Frequent disinfection of regularly used surfaces, electronics and other personal belongings