

COVID-19

Provincial Guidance on Non-invasive Cardiac Testing

Beginning March 25, 2020 only essential diagnostic testing – laboratory, imaging and cardiac services, should be ordered for both inpatient and outpatient populations. Diagnostic Testing/investigation should only be ordered on patients for whom immediate care management will be guided by it. Routine non-invasive cardiac diagnostic testing should be deferred.

With enhanced visitor precautions in place at acute sites across Manitoba, so too should unnecessary outpatient entry into hospitals be restricted in order to minimize risk to patients, staff and our community.

Based on those considerations the following restrictions on outpatient non-invasive cardiac testing are recommended to take effect March 25, 2020:

Echocardiography

Echocardiography requisitions for both transthoracic (TTE) and transesophageal (TEE) echocardiography are currently triaged as emergent, urgent, or elective. Currently the wait time for elective TTE is ~40 weeks in the WRHA and 20 weeks in PMH. Most TEEs (not associated with an elective cardiac procedure) are emergent or urgent.

All *elective* echocardiography (TTE and TEE) should be deferred at all sites across the province.

Holter Monitoring

The utility of Holter monitoring is limited. All Holter bookings should be canceled. Referring physicians will be contacted and asked to resubmit their requisitions if the patient meets one of the indications listed below.

1. Patients requiring investigation of unexplained stroke
2. Patients requiring investigation of a potentially significant arrhythmia where the symptoms occur at least weekly (palpitations ALONE are not an indication)

Exceptions may be granted if approved by a Cardiac Sciences Physician or Brandon cardiologist.

Note: All subsequent requisitions will also be required to fulfill one of the above indications.

EKG/Stress EKG and Nuclear

Procedures should continue without change. Physicians are advised to follow “Choosing Wisely” recommendations and to refrain from ordering EKGs for low risk patients or those without symptoms.

Outpatient Tests and/or Procedures (Holter, EKG/Stress EKG and Nuclear) should be deferred as follows:

In instances of patients who meet any of the following criteria, outpatient tests and/or procedures should be deferred to comply with the full 14 day self-isolation period and rescheduled on an expedited basis. Criteria include:

Update to Previous Guidance (Updated March 20 & 23, 2020)

- Any patient who has returned to Manitoba from travel, including travel within Canada, should not have their procedure in the first 14 days following their return even if asymptomatic, except in emergency circumstances.
- Any patient who has been in direct contact with a known positive COVID-19 patient should not have their procedure within 14 days of the contact even if asymptomatic, except in emergency circumstances.
- Any patient who has been in direct contact with a person who is undergoing testing for COVID-19 should not have their procedure until the results are confirmed negative even if asymptomatic, except in emergency circumstances.
- Any patient who has an influenza-like illness at the time they show up for their procedure should not have their procedure until they have recovered, except in emergency circumstances;
- Any patient who has an unexplained new cough should have their procedure delayed until it has been investigated, even if they do not have a fever, except in emergency circumstances.

If the symptoms that prompted the requisition for these studies escalate, patients should be referred to an Urgent Care Centre for assessment.

This is an evolving situation. Updates or changes will be communicated as information becomes available.