

SUBJECT: *Primary Care Office Screening for Novel Coronavirus*

Date: January 30, 2020

Pages: **2 (with two attachments)**

To: **Primary Care Providers, Emergency Departments and Infection Control Practitioners**

From: **Dr. Nicola Mercer, Medical Officer of Health and CEO**

Updated information:

The case definitions for a Person Under Investigation for 2019-nCoV or for a Probable Case for 2019-nCoV have been changed. The most recent case definitions are attached for your information. The most important difference is that the relevant travel history has been expanded to include Hubei Province (which contains the City of Wuhan) in the 14 days before onset of illness.

For patients **without a travel history** in the past 14 days to Hubei Province and **without close contact** with a confirmed or probable case the risk that they have novel coronavirus is extremely low.

A close contact is defined as a person who provided care for the patient, including healthcare workers, family members or other caregivers, or who had other similar close physical contact OR who lived with or otherwise had close prolonged contact with a probable or confirmed case while the case was ill.

If your patient does not meet these case definitions please do not send them to the Emergency Department for testing. They can be seen in your office using routine infection control practices.

Screening procedure:

Phone screen patients for 2019-nCoV prior to their office visit using the revised attached patient screening tool for use within your office.

If a patient presents directly to your office, the patient should:

- Perform hand hygiene at the entrance
- Put on a procedure or surgical mask (not a N95 mask) if symptomatic
- Be screened using the same tool

Infection Prevention and Control:

If a patient in your office **screens positive** they should be placed in a closed room, away from other patients and common areas. Droplet/contact precautions should be used by staff entering the room and providing direct patient care (hand hygiene, gloves, gowns, procedure mask and eye protection).

A Fit tested N95 masks should be worn when conducting a clinical examination and if you are collecting a specimen. The use of N95 is out of an abundance of caution and not because there is any confirmatory evidence that this virus is airborne. The room should be cleaned as per droplet/contact precautions.

Testing and Reporting Information:

All cases that meet the Case Definition for a Person Under Investigation must be reported to WDG Public Health. Please report this to WDGPH at 519-822-2715 x4752 (after hours 1-877-884-8653).

Public Health staff will work with your office to determine if testing is indicated and the most appropriate setting for this testing.

Primary care providers who have access to fit-tested N95 masks and can safely use them in their office setting may conduct clinical examinations and collect specimens on patients who meet the case definition.

If your office wishes to test for novel corona virus please contact WDG Public Health so we can ensure that you have the correct test kits and information on how to send samples for testing.

References

All documents including prior Advisories are at wdgpublichealth.ca/hcpcoronavirus

These include:

- All Physician Advisories related to 2019-nCoV
- Most recent Case Definition
- Screening tool
- Ministry signage in English, French and Chinese
- Ministry guidance document for primary care

For more information, refer to contact or website:

Name/Title: WDG Public Health, Control of Infectious Diseases

Contact: 519-822-2715 or 1-800-265-7293 ext. 4752

www.wdgpublichealth.ca