

## <u>COVID-19 Testing Inpatients for COVID-19 – Guideline</u> *Updated on April 15, 2020*

On April 8, 2020 the Ministry of Health provided a document on testing criteria with a main focus on hospital inpatients, long-term care (LTC) and healthcare workers. These testing criteria have been updated on April 15, 2020 providing changes that include ensuring testing prior to return to facilities is resulted as well as recommendations for newborns of a mother that is suspect or confirmed COVID.

SMH Recommendations for Testing Patients (admitted from LTC, retirement homes and other institutional settings):

- All patients that are admitted from LTC, Retirement Homes and other institutional settings (mental health institutions, group homes and homeless shelters) that exhibit symptoms should be isolated and swabbed; including those with atypical symptoms.
- All patients that are admitted from an institution that is on respiratory outbreak should be immediately isolated and swabbed.
- All inpatients that are being discharged to a LTC home, Retirement Home, Hospice or at the request of the receiving facility may be completed and resulted prior to discharge.

## SMH Testing of Newborns to Mothers with Suspect or Confirmed COVID-19

• All newborns that are born to mothers with suspect or confirmed COVID at the time of birth should be tested for COVID within 24 hours of delivery, regardless of symptoms.

## **Testing Guidance for Hospital Inpatients/Long-term Care Residents Experiencing:**

- Fever (Temperature of 37.8°C or greater);
  OR
- Any new/worsening acute respiratory illness symptom (e.g. cough, shortness of breath (dyspnea), sore throat, runny nose or sneezing, nasal congestion, hoarse voice, difficulty swallowing);

OR

• Clinical or radiological evidence of pneumonia.

Atypical presentations of COVID-19 should be considered, particularly in elderly persons. For a list of potential atypical symptoms, please see table below

Symptoms	Signs
Symptoms	218112

- Unexplained fatigue/malaise
- Delirium (acutely altered mental status and inattention)
- Falls
- Acute functional decline
- Exacerbation of chronic conditions
- Digestive symptoms, including nausea/vomiting, diarrhea, abdominal pain
- Chills
- Headaches
- Croup

- Unexplained tachycardia, including age specific tachycardia for children
- Decrease in blood pressure
- Unexplained hypoxia (even if mild i.e. O2 sat
- Lethargy, difficulty feeding in infants (if no other diagnosis)