

AHS COVID-19 Expanded Testing Algorithm

Residential Treatment Centres

COVID-19 Core Symptom(s)*

(new/worse or unexplained within the last 7 days)

- Cough
- Fever/chills/rigors
 - o Adults >37.8°C
 - o Pediatrics ≥38.0°C
- Shortness of breath
- Difficulty breathing
- Decreased O₂ saturation or increased O₂ requirement
- Sore throat/painful swallowing
- Runny nose/nasal congestion
- Loss of/change to sense of smell (anosmia)/taste (dysgeusia)

COVID-19 GI Symptom(s)‡

(new/worse and unexplained within the last 7 days)

- Vomiting
- Diarrhea

COVID-19 Expanded Symptom(s)€

(new/worse and unexplained within the last 7 days)

- Headache
- Myalgia (muscle pain)/arthralgia (joint pain)
- Fatigue/extreme exhaustion
- Nausea/sudden loss of appetite
- Conjunctivitis/red eye/chemosis (conjunctival edema)
- Any additional symptoms at clinician's discretion (e.g. skin manifestations such as "COVID toes")

Does patient have at least **ONE** new/worse or unexplained **Core Symptom*** or **GI Symptom‡** present?

YES →

- Implement [Contact & Droplet Precautions](#) due to symptoms
- Use usual site process for COVID-19 testing

NO ↓

Has patient travelled anywhere outside of Canada within the last 14 days?

Date of return _____ (if applicable)

YES →

Has patient been directed that they meet [Government of Canada travel-related quarantine exemption criteria](#)?

If YES:

- Follow Routine Practices ([including continuous masking and +/- eye protection](#))

If NO:

- Implement [Contact & Droplet Precautions](#)

NO ↓

Does patient have a positive COVID-19 test within the last 14 days or test currently pending (check lab results OR

Direction has been given for the patient to remain on Contact and Droplet Precautions, quarantine or self-isolation?)

YES →

- Implement [Contact & Droplet Precautions](#)

NO ↓

Does patient meet any of the following:

Close contact* of a person with acute respiratory illness who has travelled anywhere outside of Canada in the 14 days before their illness

OR

Close contact* of a confirmed or probable case of COVID-19 within 14 days before illness onset

OR

Associated with a COVID-19 outbreak at any healthcare unit/facility, congregate living, or other workplace or social gathering within the last 14 days. Refer to link: [COVID-19 outbreak](#)

OR

Had laboratory exposure to biological material known to contain COVID-19 virus within the last 14 days

Date of last exposure _____ (if applicable)

YES →

Is patient **fully immunized** (14 days after receiving the second dose of a two-dose vaccine series or 14 days after receiving one dose of a one-dose vaccine series)?

If YES:

- Follow Routine Practices ([including continuous masking and +/- eye protection](#))

If NO:

- Implement [Contact & Droplet Precautions](#)

NO ↓

Does patient have **any** new/worse or unexplained **Expanded Symptom(s)€**?

YES →

- Follow Routine Practices (including [continuous masking and +/- eye protection](#))
- Use usual site process for COVID-19 testing

NO ↓

- Follow Routine Practices (including [continuous masking and +/- eye protection](#))

If unable to assess patient due to altered mental status/decreased level of consciousness, place patient on [Contact & Droplet Precautions](#) and use usual process for COVID-19 testing

Note: This algorithm addresses COVID-19 testing only.

