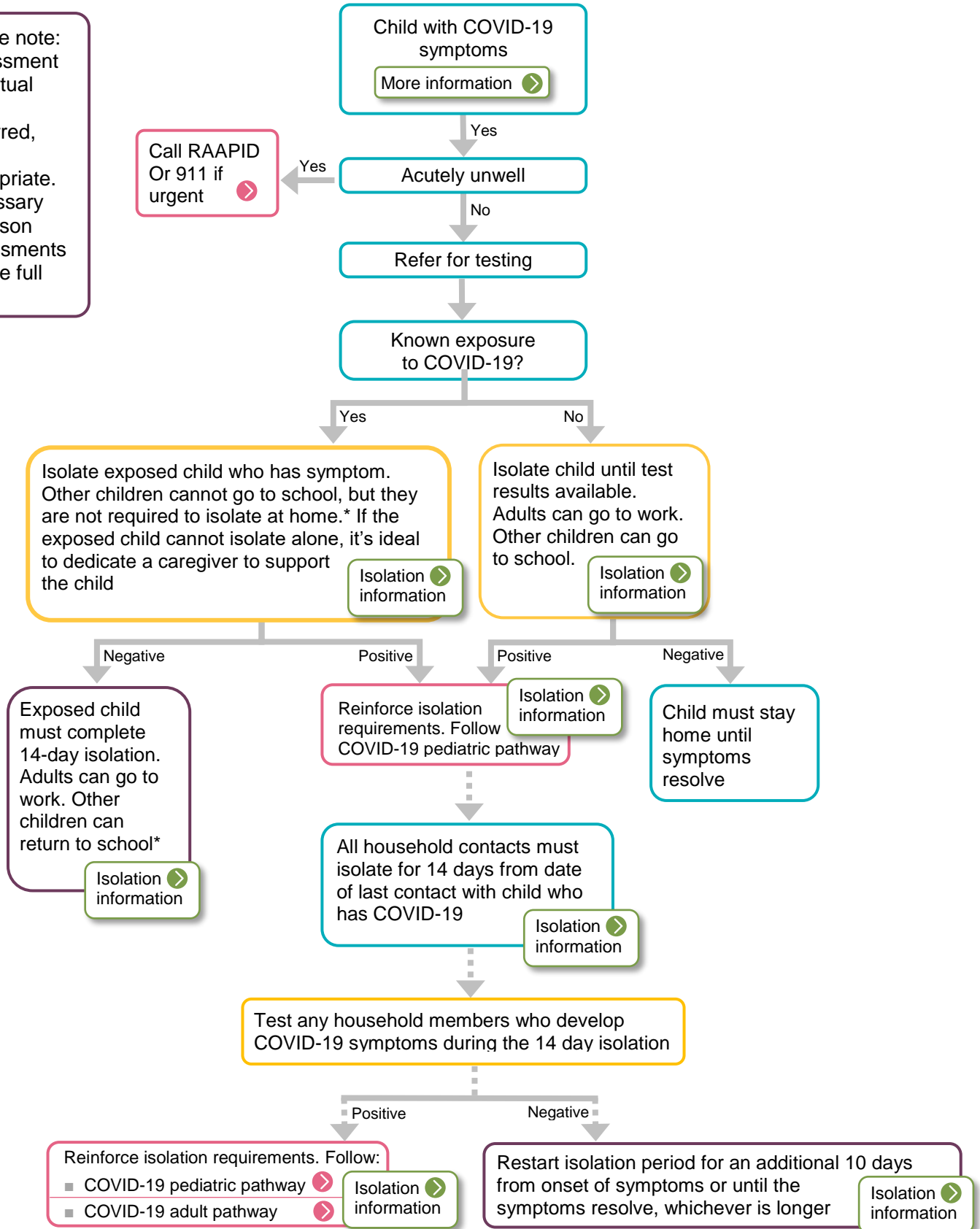


Central Zone: Primary Care COVID-19 Pediatric Testing and Isolation Pathway

Please note: Assessment via virtual care preferred, when appropriate. Necessary in-person assessments require full PPE.



*May vary based on employment, workplace, education, or school broad policies and procedures

EXPANDED DETAILS

Isolation information

A. Isolation requirements

1. COVID-19 isolation information:
 - <https://www.albertahealthservices.ca/isolationinformation>
2. Government of Alberta isolation and quarantine requirements:
 - <https://www.alberta.ca/isolation.aspx>

B. Isolation guidance

How to care for a COVID-19 patient at home: <https://www.albertahealthservices.ca/topics/Page17026.aspx> Handout:

How to care for a COVID-19 patient at home

- English: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-patient-at-home.pdf>
- Arabic: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-arabic.pdf>
- Simplified Chinese: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-simplified-chinese.pdf>
- Traditional Chinese: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-traditional-chinese.pdf>
- French: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-french.pdf>
- Punjabi: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-punjabi.pdf>
- Spanish: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-spanish.pdf>
- Tigrinya: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-tigrinya.pdf>
- Vietnamese: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-translated-patient-at-home-vietnamese.pdf>

Alberta International Medical Graduates Association: <https://aimga.ca/covid-19/>

- Isolation information translated into multiple languages as short videos:
 - Part 1: What is the difference between self-isolation and isolation?
 - Part 2: How to safely isolate
 - Part 3: Safety and prevention at home
- English text of content: <https://aimga.ca/wp-content/uploads/documents/covid-19/aimga-covid-19-isolation.pdf>

C. Isolation for children who attend school

1. COVID-19 isolation information:
 - <https://www.albertahealthservices.ca/isolationinformation>
2. Guidance for Parents of Children Attending School and/or Childcare
 - <https://www.albertahealthservices.ca/topics/Page16998.aspx>

D. Talking to children about isolation at home for COVID-19

- Let children know that they are safe. The overwhelming majority of children will only have symptoms of the common cold, if they have any symptoms at all
- Remind children that is important to prevent germs from spreading every day. They can do this by washing their hands often, covering their mouths when coughing or sneezing, and not sharing their food or drinks. When someone at home is sick, it is extra important to follow this plan
- Remind children that the purpose of wearing a mask is to help stop the spread of germs. Let them know that the mask is only temporary and soon the household will return to “mask-free” with a usual home routine. Let children know they do NOT have to wear a mask while sleeping
- Listen to children’s questions and concerns. They may have unique concerns, fears, or worries that caregivers do not think about
- Continue to provide physical comfort to children who are isolating if they need it, such as cuddles and hugs. It is best to avoid kisses since this is a higher risk for transmitting the virus between people

For symptoms persisting longer than 14 days from onset

Patients should continue to be monitored until symptom resolution. Isolation should continue for 10 days after symptom onset OR until core symptoms have cleared, whichever is longer. If the patient remains symptomatic after 10 days, they should be monitored for an additional four days – a total of two weeks after symptoms started. They should continue to isolate. If patient remains symptomatic two weeks after date of onset of symptoms, contact ConnectMD (pcnconnectmd.com) for advice on further investigations, management, and isolation.

If Public Health has discharged a patient from isolation that you feel should still be isolating, consider:

- Public Health has the legal responsibility to require citizens who are diagnosed with COVID-19 to isolate and to release them from this requirement when they are no longer deemed at risk to spread the disease to others.
- There should be alignment between the direction from Public Health and your advice to patients and caregivers. When this doesn’t happen, consider the following:
 - Is there agreement between your records and Public Health identification of the date of symptom onset?
 - The patient or patient’s caregiver(s) disclose medical information to you that is unavailable to Public Health (example -- the presence of ongoing symptoms which would compel you to suggest continued isolation).
 - If you are unsure of whether to advise your patient or patient’s caregiver(s) to continue isolation beyond the date identified by Public Health, or the patient remains symptomatic beyond 14 days post symptom onset, you may obtain advice from the ConnectMD.

BACKGROUND

About this pathway

Due to the reopening of schools across Alberta in fall 2020, a team that included specialists from Pediatrics, Infectious Disease, the AHS primary care team, family physicians, and Primary Care Networks (PCNs) developed this pathway to help support family doctors to care for pediatric patients who contract COVID-19. This pathway has been adapted for use within the Edmonton zone.

Authors and conflict of interest declaration

This pathway was reviewed and updated in December 2020. Names of participating reviewers and their conflict of interest declarations are available on request.

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DISCLAIMER

This pathway represents evidence-based best practice but does not override the individual responsibility of health care professionals to make decisions appropriate to their patients using their own clinical judgment given their patients' specific clinical conditions, in consultation with patients/alternate decision makers. The pathway is not a substitute for clinical judgment or advice of a qualified health care professional. It is expected that all users will seek advice of other appropriately qualified and regulated health care providers with any issues transcending their specific knowledge, scope of regulated practice or professional competence.