

# CMO SMOH Weekly Notice for AHS Medical Staff

April 1, 2021

## This week:

- Highlighted Resources: What's Hot in Vaccines
- Scientific Advisory Group Rapid Review: Symptoms Predictive of a Positive COVID-19 Test and Duration of Symptoms **New**
- MD Culture Shift **New**
- Doctor of the Week **New**
- APL Laboratory Requisition Generator Launched on APL Website **New**
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  - COVID-19 Case Status in Alberta **Update**
  - COVID-19 Testing for Healthcare Workers — the Latest Numbers **Update**
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  - Influenza Immunization **Update**
- Beyond COVID-19: Supporting our healthcare teams: Physician Assistant Regulation
- Additional Resources for Physicians

## Highlighted Resources: What's Hot in Vaccines

- 1) Opening up more supply and vaccine appointments
  - Government of Canada is [distributing more vaccines across the country](#)
  - Government of Alberta [announced the roll out of Phase 2B](#)
- 2) mRNA vaccines for your patient with chronic conditions (phase 2B) - how to counsel your patients:
  - [Immunocompromised Individuals](#)
- 3) A safety signal is investigated: On March 29, Alberta announced it is temporarily pausing the administration of the Covishield/AstraZeneca vaccine to anyone under the age of 55. This is a precautionary measure based on recommendations from the [National Advisory Committee on Immunization](#).

As those investigations continue, and more information becomes available, it's a good opportunity to highlight, and remind health practitioners, to continue to fill out Adverse Events Following Immunization (AEFI) whenever applicable.

**How:** Complete and submit the [AEFI report form](#). If unable to complete the form, call 1-855-444-2324 to report.

**What Needs to be Reported:** Anything that meets the definition of an AEFI. An AEFI is defined as an unfavourable health occurrence experienced by a patient that:

- Follows immunization
- Cannot be attributed to a pre-existing condition and
- Meets one or more of the following as determined by a health practitioner:
  - A life-threatening health occurrence that requires hospitalization or urgent medical attention.
  - The health occurrence is unusual or unexpected that:
    - Has not previously been identified; or
    - Has been previously identified but has increased frequency
  - The health occurrence cannot be explained by the patient's medical history, recent disease or illness or consumption of medication.

**Did you know there is a [new law](#) in Alberta?** As of Dec. 17, 2018 any healthcare practitioner who becomes aware of an adverse event following any immunization must report the event to the AHS Provincial AEFI Team.

### **Scientific Advisory Group Rapid Review: Symptoms Predictive of a Positive COVID-19 Test and Duration of Symptoms**

AHS Scientific Advisory Group (SAG) conducted a rapid review to explore and summarize available evidence around symptoms typically associated with a positive COVID-19 test, including duration and the relationship between onset of symptoms and virus detectability through testing.

This rapid review is intended to help inform decisions regarding public health measures for people presenting with different symptoms, symptom resolution and duration of infectiousness of COVID-19.

The SAG found that loss of taste or smell are reliably predictive of a positive COVID-19 test, although not all COVID-19 patients experience this. For example, children experiencing a loss of taste/smell, nausea or vomiting, and headache were very likely to test positive for COVID-19.

Other symptoms, such as cough, fever and fatigue are common with COVID-19, but are not specific to COVID-19. While isolated sore throat and a runny nose in adults were less likely to be associated with a positive COVID-19 test, people with these symptoms could develop additional symptoms over time. This means that a person with sore throat and/or runny nose could still test positive for COVID-19, and should still adhere to [Alberta's public health requirements](#) and isolate until symptoms resolve.

For more information about this report, see the [Rapid Review](#).

### **MD Culture Shift (Previously Physician Wellness)**

Our April 2021 MD Culture Shift newsletter is [now live](#).

<b>Physician Wellness Zoom Rooms</b>	<b>Topic of focus: Self-Compassion</b>
	Date: Tues., April 6
	Time: 5-6 p.m.
	<b>Topic of focus: Anti-Racism</b>
	Date: Tues., April 20
	Time: 5-6 p.m.
	Zoom Link: <a href="#">Here</a>

#### **MD Culture Shift Resources:**

- Infographics from past Physician Wellness Zoom rooms can be found at [www.ahs.ca/mdwellness](http://www.ahs.ca/mdwellness).

#### **Leadership Development Opportunities**

##### **Decision-Making and Capacity (12 e-learning lessons through MyLearningLink)**

- **Date:** April 8
- **How to Join:** Visit [Practice Wise](#).
- **Questions:** Contact the Practice Consultation service at [practice.consultation@ahs.ca](mailto:practice.consultation@ahs.ca)

##### **“Coaching Out of the Box” Training: Offered by University of Alberta Faculty of Dentistry and Medicine**

Designed for physicians to explore ways in which coaching skills might enhance their clinical practice, teaching and leadership

- **Date:** April 28 (Eight weekly sessions)
- **Time:** 4:30-6 p.m. MST
- **Learn more at:** [Coaching Out of the Box](#)

### **Doctor of the Week – Dr. Thara Kumar**



Dr. Thara Kumar is a Fellowship trained emergency physician in Central Zone. She has a passion for the vulnerable population and the work around diversity and inclusion. In 2019, Dr. Kumar worked with teams in Red Deer around federal grant funding where she began to build relationships with shelters, overdose prevention, and the Red Deer Primary Care Network (PCN).

When COVID-19 hit, Dr. Kumar proved invaluable. She immediately stepped up to support response for vulnerable populations in Red Deer, and worked with AHS Addiction and Mental Health teams, shelter providers, the City of Red Deer and Community and Social Support to stand up our Assisted Supported Isolation Sites. The Central Zone COVID-19 response would not be the same without her.

Dr. Kumar completed a Master Degree in Public Health following her residency, and with this education, supported work as a casual Medical Officer of Health in the Central Zone. Her response helped tremendously during Outbreak responses at the Red Deer Regional Hospital.

She has displayed early on in her career the values of AHS, and continues to do so.

Thank you, Dr. Kumar, for your dedication and support to your colleagues and for Albertans.

#### **Doctor of the Week Call for Nominations**

*Do you know a physician who has gone above and beyond during the pandemic to shape and drive improvements for patients? Perhaps a physician colleague has gone above and beyond to help support others during a difficult day?*

*Each week, we would like to take a moment to celebrate and thank the amazing physicians working across the province to provide high-quality care to patients, staff and colleagues. If you know someone who deserves to be celebrated, please email [CMO@ahs.ca](mailto:CMO@ahs.ca) with your suggestion, and a brief description of why.*

### **APL Laboratory Requisition Generator Launched on APL Website**

On March 23, Alberta Precision Laboratories (APL) launched a [laboratory requisition generator](#), allowing healthcare providers to create a PDF version of commonly used laboratory requisitions with pre-populated Connect Care identification numbers (CC IDs).

Successful implementation of Connect Care, including Waves 1 and 2 launched in 2019 and 2020 as well as Wave 3 in April 2021, requires the use of new CC IDs, which are accommodated on the current version of lab requisitions and should be used immediately. A lab bulletin ([Connect Care Identifiers for Immediate Use](#)) was distributed on Feb. 22 2021, providing guidance regarding use of CC IDs with laboratory requisitions.

A recent audit indicated that a high percentage of requisitions being received by the laboratory have not yet implemented CC IDs, and there is also a high percentage of incomplete or illegible requisitions, which inhibits the ability to provide timely test results to the appropriate ordering physician location. This new tool facilitates the proper completion of lab requisitions.

For more information and resources, please see the [APL bulletin](#).

## Highlights from the CEO All Staff Update

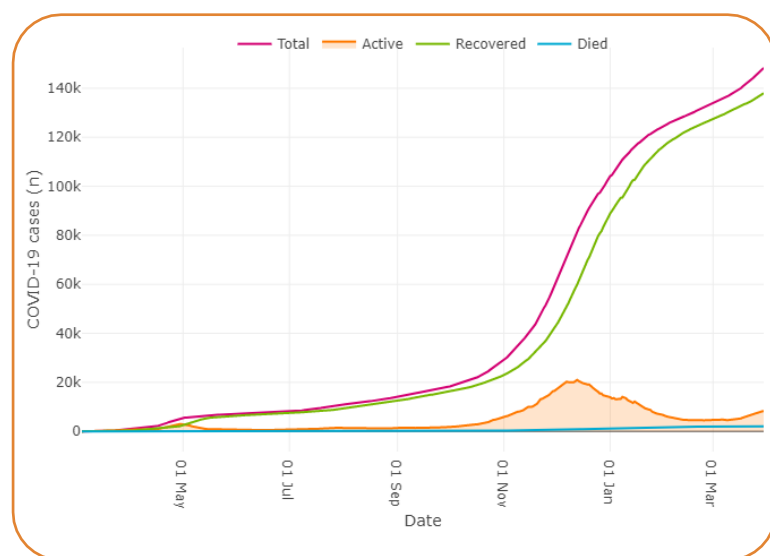
### COVID-19 Case Status in Alberta

COVID-19 and variants of concern continue to spread throughout the province, as the number of active cases spiked once again this past week, with four of the five AHS zones reporting week-to-week increases of 20 per cent or more.

As of March 30, there were 8,350 active cases in the province compared to 6,835 on March 24, a 22 per cent increase (representing 1,515 additional active cases).

For the 12<sup>th</sup> consecutive week, the Calgary Zone had the most active cases with 3,923, although all zones reported increases as you can see in the table below.

	Active Cases (as of March 30)	Active Cases (as of March 24)	Per cent Change
<b>Calgary</b>	3,923	3,099	+26.6%
<b>Edmonton</b>	1,844	1,512	+22.0%
<b>North</b>	970	798	+21.6%
<b>South</b>	854	790	+8.1%
<b>Central</b>	733	611	+20.0%
<b>Unknown</b>	26	25	+4.0%

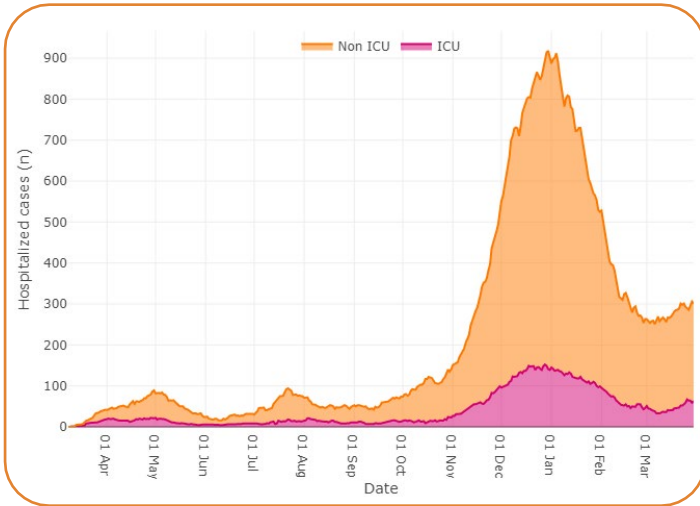


There was an average of 685 daily new cases for the six-day period ending on March 30, compared to 593 the previous week (March 18 to March 24), a 15.5 per cent increase.\* Over this six-day period, the Calgary Zone had the largest number of new cases with 1,889, which is more than double the number of cases in the Edmonton Zone (915 new cases) during the same time period.

*\*Note: Usually, the average number of daily new cases captures a seven-day period from Thursday of the previous week to Wednesday of the present week. However, due to the Easter holiday, the average daily new cases for the present update only reflects a six-day period from Thursday, March 25, to Tuesday, March 30.*

### **Hospitalizations and ICU admissions**

Over the past week, the number of individuals requiring an intensive care unit (ICU) stay for COVID-19 increased, although the total number of individuals being treated in Alberta's hospitals remained the same at 301. On March 30, there were 63 individuals in ICUs compared to 55 in ICUs on March 24, a 14.5 per cent increase.



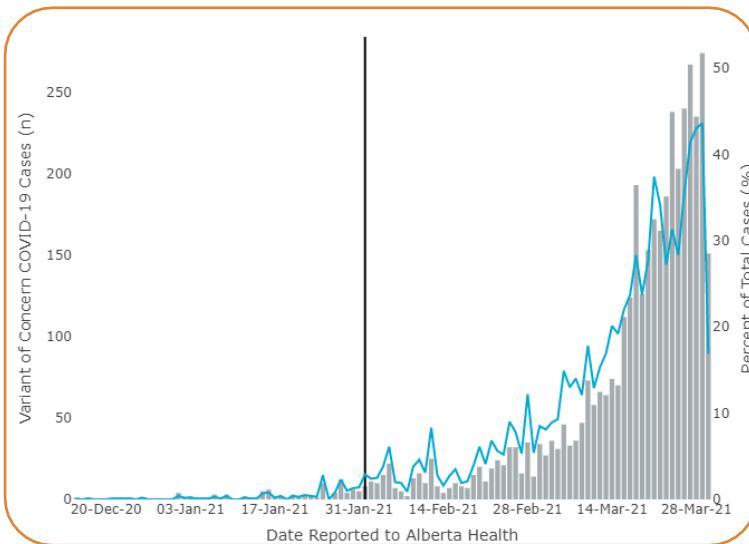
A total of 238 individuals were in non-ICU hospital beds on March 30 compared to 246 individuals in non-ICU hospital beds on March 24, a 3.3 per cent decrease.

The breakdown of hospitalizations by zone as of March 30 is as follows:

	<b>Hospitalizations</b>	<b>ICUs</b>
<b>Calgary</b>	112	31
<b>Edmonton</b>	96	15
<b>South</b>	33	8
<b>Central</b>	33	4
<b>North</b>	27	5

### **Variants of concern**

Alberta Health has now reported 4,055 cases of COVID-19 variants of concern (VOC): 4,030 are B.1.1.7 variant (U.K. variant), 20 are B.1.351 variant (South African variant) and 5 are P.1 (Brazilian variant). Of the 4,055 VOC cases, 2,660 are active (31.9 per cent of total active cases), 1,372 people have recovered and 23 people have died.



The figure above shows new VOC cases (grey bars) and the percentage of VOC cases identified compared to other cases of COVID-19 (blue line); between March 22 and March 28, the percentage of VOC cases ranged from 27.2 per cent to 43.0 per cent.

### ***Other notable COVID-19-related information:***

As of March 30:

- A total of 148,332 cases of COVID-19 have been detected in Alberta and a total of 6,555 individuals have been hospitalized, which amounts to 4.4 individuals for every 100 cases. In all, 137,992 Albertans have recovered from COVID-19.
- 1,990 individuals have passed away from COVID-19, including 14 deaths over a six-day period (March 25 to March 30). We extend our condolences to the families of these individuals, and to all who have lost loved ones from any cause during this time.
- A total of 3.7 million tests have been conducted and 1.9 million individuals have been tested. From March 25 to March 30, 67,010 COVID-19 tests were completed, an average of 11,168 tests per day. During this period, the daily positivity ranged from 5.46 per cent to 7.71 per cent.

The R value, also known as the reproduction number, describes the ability of a disease to spread. It tells us the average number of people that someone with COVID-19 will infect. An R value of 1 means an infected person will infect one other person on average. Values below 1 mean transmission is decreasing; above 1, transmission is increasing. The provincewide R value from March 22 to 28 was 1.09.

### **COVID-19 Testing for Healthcare Workers — the Latest Numbers**

We continue to update the testing data for healthcare workers in the [AHS Healthcare Worker COVID-19 Testing dashboard](#). These statistics provide the total number of AHS, Covenant Health and Alberta Precision Laboratories (APL) employees and physicians tested, including a breakdown of the number of positive tests and those who have been confirmed to have been exposed in the workplace.

As of March 31:

- 79,139 employees (AHS, APL, and Covenant combined) have been tested for COVID-19 and, of those tested, 5,012 (or 6.33 per cent) have tested positive.
- Of the 2,867 employees who have tested positive and whose source of infection has been determined, 640 (or 22.3 per cent) acquired their infection through a workplace exposure. An additional 2,145 employees who have tested positive are still under investigation as to the source of infection.
- 5,096 physicians (AHS, APL, and Covenant combined) have been tested for COVID-19 and, of those tested, 207 (or 4.06 per cent) have tested positive.
- Of the 112 physicians who have tested positive and whose source of infection has been determined, 11 (or 9.8 per cent) acquired their infection through a workplace exposure. An additional 95 physicians who have tested positive are still under investigation as to the source of infection.

For more information, see the AHS Healthcare Worker COVID-19 Testing [infographic](#) and [dashboard](#).

### **COVID-19 Immunization Updates**

#### ***By the Numbers***

As of 7 a.m. today (April 1), more than 644,400 total doses of COVID-19 vaccine have been administered by AHS.

In total, more than 437,500 Albertans have received at least one dose of COVID-19 vaccine, and more than 103,300 have received both Dose 1 and Dose 2.

#### ***Temporary pause on use of Covishield / AstraZeneca for people under the age of 55***

As of March 29, Alberta is temporarily pausing the use of the Covishield/AstraZeneca vaccine for people under the age of 55. This recommendation is aligned with current [National Advisory Committee on Immunization \(NACI\)](#) recommendations.

This is a precautionary measure being taken across Canada while more investigation happens on vaccine-induced prothrombotic immune thrombocytopenia (VIPIT), a rare blood clot condition following immunization. For people under the age of 55 who have received the AstraZeneca/Covishield vaccine, the risk of experiencing blood clots is very low.

However, as with anyone who receives any medication, including a vaccine, they should monitor their health and seek immediate medical attention if they experience any health concerns. If they experience any of the following [symptoms](#) within four to 20 days after immunization, they should immediately seek medical attention.

There have been no reported cases of these blood clots following immunization in Alberta or anywhere in Canada. There is no evidence of any similar issues linked to the other vaccines used in Alberta. Safety is always our top priority and this pause will enable Health Canada to conduct further assessments and gather more information from around the world.

The AstraZeneca/Covishield vaccine remains a good choice for those who are over 55 and is highly effective at preventing severe outcomes from COVID-19. For more information, see the [COVID-19 Vaccine FAQ](#).

### ***Phase 2B booking through AHS starts Monday***

The next group of eligible Albertans will be able to start booking COVID-19 immunizations through AHS starting April 5 at 8 a.m. as part of Phase 2B. This phase includes Albertans who are 16-64 years of age with any one of a list of eligible chronic conditions. A full list of associated underlying health conditions is available at [alberta.ca/covid](http://alberta.ca/covid).

AHS is offering appointments in a staged approach and will start with those born in or before 1963. All eligible Albertans wanting to book their appointment through AHS can do so through the [online booking tool](#) or by calling Health Link at 811. AHS will continue to expand eligibility to include additional birth years in the days to come.

Pharmacies across Alberta will continue to offer immunizations to all Albertans born in or before 1963 with underlying health conditions. Eligible individuals can book their appointment through a [participating pharmacy](#).

During this phase of the vaccine rollout, Alberta will operate on the honour system. A doctor's note or other proof of an underlying condition is not required. Individuals who are pregnant, immunocompromised or with an autoimmune disorder are encouraged to consult their healthcare provider prior to booking their appointment if they have any questions.

### ***Family booking starts April 5***

In conjunction with the launch of Phase 2B, AHS has made enhancements to the online booking tool to allow other eligible family members to book vaccines at the same time. Starting on April 5, the tool will provide options for eligible Albertans to book appointments at the same time and at the same clinic for up to three additional family members.

### ***COVID-19 vaccine for homebound Albertans***

On March 29, AHS began immunizing eligible homebound Albertans. Homebound individuals are physically unable to leave their home, such as for medical and personal appointments. This population is considered vulnerable and requires immunization to be provided in their homes.

Similar to how the annual influenza vaccine is provided to homebound individuals, the COVID-19 vaccine is administered by AHS public health or home care staff, depending on the zone. Eligible home care clients will be contacted directly by AHS to arrange immunization.

Albertans who think they may be eligible to receive the COVID-19 vaccine at home but are not a home care client are encouraged to contact Health Link at 811. Health Link staff will do an initial screening to



check eligibility. The zone teams will then follow up to do a second eligibility check and book their COVID-19 immunization if appropriate.

Only homebound individuals are eligible to be immunized through this program at this time. This will ensure homebound individuals are immunized as quickly as possible, with the resources and vaccine supply available. For more information, see [Immunization - Booking Your Appointment](#).

### ***Thank you***

Thank you to all eligible Albertans who have received their COVID-19 vaccines or booked their immunization appointment. We will continue to work to ensure all adult Albertans who want a vaccine will get their first dose by the end of June. For more information, please refer to [alberta.ca/covid](https://alberta.ca/covid) and AHS' [COVID-19 Vaccine FAQ](#).

### **Influenza Immunization Update**

As of March 27, 1.6 million doses of influenza vaccine have been administered in Alberta. Immunizations are up by more than 191,600 compared to the same time last year. For the 21<sup>st</sup> week in row, there are no reported cases of seasonal influenza in Alberta. Alberta Precision Laboratories (APL) has tested 110,426 respiratory swabs for influenza from Aug. 23, 2020, to March 27, 2021.

Please note: the 2020-2021 Alberta Influenza Immunization program has ended for the general public. March 31 was the last day for members of the general public to receive influenza immunization. Eligible children under the age of nine, who have received one dose of the influenza vaccine prior to March 31, will be offered their second dose until April 30.

### **Beyond COVID-19**

#### **Supporting our healthcare teams: Physician Assistant Regulation April 1, 2021**

The [Government of Alberta announced](#) that, as of today, April 1, 2021, Physician Assistants (PA), academically skilled professionals who function as physician extenders, become a fully regulated health professional in Alberta.

PAs work under the supervision of a physician or group of physicians within a team and their scope of practice is negotiated by the relationship with the physician(s) and the care setting.

PAs will collaborate and work alongside physicians, nurse practitioners, registered nurses, licensed practical nurses, blending their individual skills and knowledge to provide optimum patient care.

For more information on PAs, you can visit the [Canadian Association of Physician Assistants](#) website or the [CPSA website](#).

#### **Additional Resources for Physicians:**

- [Acute Care Outbreak Prevention & Management Task Force](#)
- [AHS Immunization Information](#)
- [AHS Virtual Health](#)
- [COVID-19 FAQ for Clinicians](#)
- [COVID-19 Resources for Community Physicians](#)
- [COVID-19 Testing and Self-Isolation Criteria](#)
- [CPSA's physician portal](#)
- [Cumming School of Medicine Continuing Medical Education \(CME\) Resources](#)
- [Government of Alberta Vaccination Updates](#)
- [How to Access AHS Insite and Email](#)
- [How to do a Nasopharyngeal \(NP\) Swab](#) (New England Journal of Medicine)
- [IPC Emerging Issues](#)
- [Online Healthcare Worker Self-Assessment Tool](#)



- [Physician & Family Support Program](#) - 1-877-SOS-4MDS (767-4637)
- [Physician Wellness Educational Resources: Well Doc Alberta](#)
- [Spectrum](#): A mobile app customized to deliver local antimicrobial stewardship guidelines, resistance data, dosing information, and AHS COVID-19 related content.
- COVID-19 Questions? Contact your local Zone Emergency Operations Centre (ZEOC):
  - [ZEOC.South@ahs.ca](mailto:ZEOC.South@ahs.ca)
  - [ZEOC.Calgary@ahs.ca](mailto:ZEOC.Calgary@ahs.ca)
  - [ZEOC.Central@ahs.ca](mailto:ZEOC.Central@ahs.ca)
  - [ZEOC.Edmonton@ahs.ca](mailto:ZEOC.Edmonton@ahs.ca)
  - [PCH.ZEOCNorth@ahs.ca](mailto:PCH.ZEOCNorth@ahs.ca)

#### For more information

- Visit the [COVID-19 Healthcare Professional information page](#) on the AHS website for more information or contact [AHS.ECC@ahs.ca](mailto:AHS.ECC@ahs.ca).
- Additional updates and information are being shared through the [College of Physicians & Surgeons of Alberta \(CPSA\)](#).

*This update, provided every Friday, is intended to provide a summary of the key action items, information and decisions for AHS Medical Staff in relation to clinical policies and practices, and for the COVID-19 pandemic response. It is forwarded to physicians' preferred email inbox.*

*Do you have COVID-19 questions, information, or a physician or team who have gone above and beyond during the pandemic, that you would like to see covered in an upcoming edition of the COVID-19 CMO update? Let us know at [CMO@ahs.ca](mailto:CMO@ahs.ca).*

Sincerely,  
**Dr. Mark Joffe on behalf of Dr. Francois Belanger**  
Vice President & Medical Director

**Dr. Laura McDougall**  
Senior Medical Officer of Health

