Communicable Disease (Respiratory) Initial Screening

Please ensure all 5 sections on both page 1 and 2 are fully assessed and completed. Designated family/support person(s) should be encouraged to self-report new or worse symptoms to the care team.

### Part 1 - Patient Current Status

- Unable to assess patient’s symptoms due to patient’s physical or mental status. Implement Contact & Droplet Precautions, and contact Most Responsible Health Practitioner (MRHP) to order COVID-19 and other labs as indicated.

### Part 2 - Symptom Set Assessment within the last 7 days

Review ALL symptom sets and follow actions required as appropriate

#### Actions Required

- COVID-19 Core Respiratory Symptoms
  - New or worse:
    - Cough
    - Fever/chills/rigors: **Adult**: higher than 37.8°C; **Pediatrics**: 38°C or higher (If sole symptom, should be reviewed with other symptoms, history, physical exam, etc.)
    - Shortness of breath, increased O₂ requirement, difficulty breathing
    - Sore throat/painful swallowing
    - Runny nose/nasal congestion
  - COVID-19 Gastrointestinal (GI) Symptoms
    - New or worse:
      - 2 or more episodes of vomiting and/or diarrhea
  - Seasonal ILI Symptoms (see below), plus one of the following:
    - Immunocompromised, critical respiratory failure, or outbreak investigation
      - **Adults**: New or changed cough **AND** fever (38°C or higher) **AND** any of the following: sore throat, joint pain, muscle ache, extreme exhaustion/weakness
      - **Pediatrics**: cough **OR** sneezing **OR** runny nose

#### Pertussis Symptoms

- Cough **AND** one or more other Pertussis Symptoms
  - Paroxysms, inspiratory ‘whoop’ cough ending in gagging/vomiting
  - Neonates: also consider apnea

#### Tuberculosis (TB) Symptoms

- Cough **AND** any other Tuberculosis (TB) Symptoms
  - Hemoptysis, fever, night sweats, unintentional weight loss, or history of TB

#### Measles and Varicella Symptoms

- Fever **AND** Rash **AND** International travel in last month
- Fever **AND** Rash **AND** potential Measles Exposure
- Fever **AND** Rash **AND** potential Varicella Exposure

#### No above symptoms present: Follow Routine Practices (including Point of Care Risk Assessment). **Continue to Part 3**

### Part 3 - COVID-19 Expanded Symptoms

- COVID-19 Expanded Symptoms:
  - New or worse:
    - Headache, muscle/joint pain, fatigue/extreme exhaustion,
    - Nausea/sudden loss of appetite, loss of/change to sense of smell or taste,
    - Conjunctivitis/red eye/conjunctival edema, altered mental status,
    - any additional COVID-19 symptoms at clinician’s discretion
  - No above symptoms present: Follow Routine Practices (including Point of Care Risk Assessment). **Continue to Part 4**
Part 4 - COVID-19 Risk Factors  *(check all that apply)*

- Close contact* with a confirmed or probable case of COVID-19 within 14 days before illness onset
- Associated with a COVID-19 outbreak at any healthcare unit/facility, congregate living or other setting *(e.g., workplace or social gathering)* within the last 14 days. Refer to link: COVID-19 outbreak
- Close contact* with a person with acute respiratory illness who has travelled anywhere outside of Canada in the 14 days before their illness
- Travelled anywhere outside of Canada within the last 14 days
- COVID-19 test; positive COVID-19 within the last 14 days or currently pending
- Had laboratory exposure to biological material known to contain COVID-19 virus within the last 14 days
- Direction has been given for the patient to remain on Contact & Droplet Precautions

*A close contact is someone who:
- Provided direct care for the case, *(including HCW, family members or other caregivers)*, or who had other similar close physical contact *(e.g., intimate partner, hug, kiss, handshake)* without consistent and appropriate use of personal protective equipment *(PPE)*, OR
- Lived with or otherwise had close prolonged contact which may be cumulative, i.e., multiple interactions for a total of 15 min or more and within two metres with a case without consistent and appropriate use of PPE and not isolating, OR
- Had direct contact with infectious body fluids of a case *(e.g., shared cigarettes, glasses/bottles, eating utensils)* or was coughed or sneezed on while not wearing recommended PPE.

### Actions Required

- Implement Contact & Droplet Precautions
- Notify IPC as per site process
- If risk factor is present, date of last exposure _________________
  
*If positive COVID-19 test within the last 14 days, or currently pending, specify the date ____________________  

**Continue to Part 5**

Part 5 - Previously positive COVID-19 *(recovered/cleared)*

If COVID-19 positive, greater than 14 days but within previous 90 days, do not re-test for COVID-19 unless the patient has

- new COVID-19 symptoms

**AND**

has one of the following:

- New COVID-19 risk factor (Part 4)
- Immunocompromised - may refer to link for additional detail.
  
  [https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-immunocompromised-patients.pdf](https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-immunocompromised-patients.pdf)
- Healthcare Worker
- Severe COVID-19 Illness *(e.g., progressing pneumonia)*

**Actions Required**

If symptoms present implement Contact & Droplet Precautions

Contact MRHP to order other tests and investigations as clinically indicated.

If the clinician decides to re-test for COVID-19 because of concerns about the risk of reinfection, a nasopharyngeal swab should be taken and a Respiratory Pathogen Panel (RPP) should also be ordered.

Notify IPC as per site process

### Assessed by

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