

Calgary Zone COVID updates – Friday, April 24, 2020

Patient notifications

PCNs and AHS are working together to ensure family physicians are notified about the status of their patients as part of the Calgary Zone's COVID-19 response.

The goal is to reconnect patients with their family doctor – or if unattached, introduced to a new family doctor – as soon as appropriate.

The importance of reconnecting patients grows as more and more are transferred from Health Link (811), hospitals and public health back to the medical home.

Hospital discharge notifications this week averaged 280 a day.

Providing one central point of contact into the Calgary Zone PCNs for AHS and other organizations, the Calgary Zone's supported transitions team works to transfer information across boundaries within the healthcare system.

There are many groups, systems and policies involved, so it is not as easy as one may expect. In some cases, the starting point is a handwritten note. Work continues to improve the system.

Many notifications are sent by fax, so it is important someone is available to check the clinic fax.

A reminder that in terms of daily monitoring, the touch base for most patients will be quick; team members may be able to help.

The [COVID pathway](#) and [COVID tele-advice line](#), available seven days a week, are tools physicians may find helpful. Please contact your PCN if you have any questions or concerns.

Testing guidance

It is NOT necessary to perform COVID-19 testing on an asymptomatic patient before providing health services or accepting a patient transfer from another site.

AHS has three [reasons](#) for this guidance:

- Prevalence of COVID-19 in the general asymptomatic patient is relatively low.
- If testing were conducted, the burden of virus may be too low to detect, which could lead to a false negative and potentially lower adherence to precautions if symptoms develop.
- Delaying care while awaiting results may have negative consequences without adding value to decision-making.

Medications guidance

AHS has new [guidance](#) for primary care physicians and pharmacists on specific prescription medications for patients with COVID-19.

Based on available evidence, the recommendation to continue these medications does not replace your clinical judgement.

The document offers support for patient care decisions on a case-by-case basis for

- Angiotensin Converting Enzyme Inhibitors and Angiotensin Receptor Blockers
- Immunosuppressants
- Respiratory conditions requiring inhaled corticosteroids or oral corticosteroids
- Non-steroidal anti-inflammatory drugs

For patient-specific questions, please contact the patient's specialist, if applicable, or request tele-advice using [Specialist LINK](#).

Expanded testing

Effective immediately, everyone in continuing care facilities with current outbreaks will be tested, whether they have symptoms or not.

The Alberta government is monitoring and [posting](#) a list of facilities with active outbreaks in continuing care and acute care.

Quick links

Rural OBGYN webinar – The rural video conference series addresses *Rural OBGYN Management in the Time of COVID-19* (PPE, safe transport of patients with COVID-19, and virtual care) in a one-hour webinar. Tuesday, May 5 at 8 a.m. [Register here](#).

COVID-19 response (recording) – AHS panelists Dr. John Conly, Dr. Laura McDougall, Dr. Jonathan Choy, and Dr. Sarah Hall discussed PPE, COVID-19 modelling and virtual health in a 90-minute [webinar](#) recorded on April 17.

Well Doc Alberta hosts Fleur Yumol, clinical social worker, for a 13-minute [podcast](#) on the importance of emotional connection and strategies to stay connected while social distancing.

Civility tips – The sixth [bulletin](#) from Well Doc Alberta offers evidence-informed tips to reframe stress into a more supportive culture that enhances civility and respect.