

## COVID-19 in the Calgary Zone: PCN update – December 3, 2020

### Medical Home Q&A with Dr. Christine Luelo

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**Q. I've started to receive notifications about positive COVID-19 tests for patients, but I know not all of them are coming through. How can I follow up with patients if I'm not notified?**

Thank you for your efforts to help your patients stay connected to their Medical Home. Primary care leadership has been working tirelessly on this issue. We expect changes to be made to the online system this week to ensure more physicians are copied on their patients' results and can appropriately manage them. We are aware that some of the information in the physician drop-down list in the [online form](#) may be incorrect. It was developed as an extract from the Millennium lab system in Calgary. Please check your name and clinic information and [request any necessary changes by email](#).

PCN access clinics are receiving daily downloads of COVID-19 positive cases and then reaching out to patients and clinics to ensure no one is left without care. The text notification patients receive has also been updated to suggest they reach out to their family physician. It is critical that we continue to support our patients to isolate. It's also important to underscore the importance of their close contacts isolating immediately during their potentially most infective period (48 hours before symptoms start and the first couple of days of symptoms). Weekend coverage within your clinic will also be an important consideration. [Isolation information](#) | [Patient notifications](#) | [Timely follow-up care](#) | [College standards](#) | [Slides: The patient journey](#) | [Slides: Notifications for positive patients](#) | [Aptima kit memo](#)

**Q. What are patients being told to do when they test positive?**

When signing up for a test, patients are advised that they need to isolate for 14 days if they are close contacts — no matter what. If they are symptomatic, they are told to isolate until the results are confirmed. If positive, they are advised to continue to isolate and informed they will receive a follow-up text on day 10 to let them know they are able to leave isolation if symptoms have resolved. As their family physician, you can work with them to advise on the need for further isolation, if you feel comfortable with that, as well as decisions on return to work if there are concerns around continued fatigue, etc.

**Q. Most of my patients who have tested positive for COVID-19 have very mild symptoms. Do we still need to check in daily, and is there a more efficient way to manage follow-up?**

We unveiled an updated risk stratification for patients, as well as a modified follow-up timeline, as part of the revised [adult pathway](#). Low-risk patients can [self monitor](#) and reach out if needed. Remember to consider after-hours access arrangements — the College requires us to verbally hand off patients who are at high risk of needing care. Consider calling your own patients on the weekend. You may also consider an internal call schedule for your clinic. [Access to care guidelines](#) | [Pediatric testing and isolation pathway](#) | [Pediatric outpatient clinical management pathway](#)

- Q. Two of my patients, aged nine and 13, recently tested positive, completed their isolation period and symptoms resolved. A close contact just tested positive, so do they need to isolate again?**  
As per the local guidelines used by contact tracers, confirmed cases are considered immune for 90 days and therefore do not need to isolate again. It is important that patients continue to follow hand hygiene and masking guidelines after their isolation period ends, as the science is continually being updated.
- Q. We've had a few instances of patients refusing to wear a mask in our clinic. Is there an official policy concerning how to handle these situations?**  
The PCN Incident Response Task Force compiled a [helpful document](#) to provide clarity on this difficult issue. As physicians, we have a duty of care to our patients, but not to the extent that we are required to put ourselves at harm. If I exhaust my crucial conversation skills and virtual care does not meet a patient's needs, my process is to book the patient at the end of the day, with minimal staff interaction, using full PPE. I also used this process when a patient is unable to wear a mask reliably (e.g. a dementia patient whose reported labial mass turned out to be a full uterine prolapse on exam in the office!)
- Q. Do I have to do anything differently with my practice given the new restrictions?**  
Community medical clinics are not impacted by the changes. As per College of Physicians and Surgeons of Alberta advice, we should still be using virtual care whenever possible. Continue to do what you can to reduce the pressure on Alberta Precision Labs, which is asking patients to [revisit dated lab requisitions](#) as part of a partnership with PCNs. I have had a few more patients asking to shift to virtual care in the last week. Remember to protect your patients and yourself. All health-care providers need to [continuously mask](#) in clinic settings. [APL booking page](#) | [COVID-19 rapid testing pilot](#) | [PPE information](#)
- Q. I'm worried about social isolation for my patients. What resources are available?**  
Our last [webinar](#) featured a very helpful [tips for managing the holidays](#) presentation by Dr. Vanessa Chong. Don't forget self care, which could include accessing the [Physician and Family Support Program](#).
- Q. What do we know about vaccines so far?**  
We think/hope we can see the light at the end of the tunnel. Some details about the local immunization plan were released Wednesday. Alberta's first vaccine shipment is scheduled to arrive by January 4, 2021 – subject to approvals. Staff and residents in long-term care and health-care workers would be among the first to receive the vaccine, between January and March. A second phase would begin in April, with vaccines potentially being made available to the public by the summer. The role of primary care is yet to be confirmed. [Video: COVID-19 vaccine](#) | [Rapid review: Chronic symptoms of COVID-19](#) | [Updated review: COVID-19 risk of reinfection](#) | [Conversations with Yiu: COVID-19 vaccine](#)
- Q. When is the next PCN webinar?**  
The next scheduled webinar is due to take place in February 2021, but we will organize one prior to that should the need arise. We will continue with these newsletters in the interim — so please send your questions to [info@calgaryareapcns.ca](mailto:info@calgaryareapcns.ca) or your PCN medical directors. [Webinar physician Q&A](#)

## Other updates

### 1 Specialist LINK tele-advice, holiday hours and pathways

- COVID-19 support: The number of requests for Specialist LINK's COVID-19 tele-advice line almost doubled in November to 240 calls. To ensure family physicians have access to timely advice, callers

are asked to use this service for questions about managing patients with presumed or confirmed COVID-19 infection, as well as those with acute or chronic infectious diseases. Questions about isolation orders or testing in the community should be directed to public health via [phc@ahs.ca](mailto:phc@ahs.ca).

- Holiday hours: Some Specialist LINK tele-advice services will close during the holidays. Tele-advice is not available on weekends or statutory holidays, as usual, which means services are closed on Friday, December 25, Monday, December 28 and Friday, January 1. In addition, some services are closed on other days. For a complete schedule of services, visit [specialistlink.ca](http://specialistlink.ca).
- Lymphadenopathy: A new pathway has been posted on [specialistlink.ca](http://specialistlink.ca) to help support physicians with patients who have a high likelihood of lymphoma diagnosis, from the point of suspicion through diagnostic work-up and staging to consults. Early diagnosis can allow for cure but more than 30 per cent of lymphoma patients are diagnosed only after admission to hospital. For information about the lymphoma diagnosis program at the Tom Baker Cancer Centre, please reference this [one-page guide](#).

## 2 Family and Specialist Physician of the Year

The Department of Family Medicine — Calgary is seeking nominations for its annual awards. The Specialist Physician of the Year award recognizes specialists who have demonstrated exemplary collaboration with primary care, as voted by family doctors. Patient nominations are also being accepted for Family Doctor of the Year. Nominate a family physician [here](#) or a specialist physician [here](#).

## 3 Temporary restrictions for acute care visitation

Alberta Health Services has implemented [temporary restrictions](#) for visitor access to acute care sites with outbreaks or in areas under “watch” or “enhanced” status, including Calgary. One designated family or support person is allowed for:

- Hospital patients under specific circumstances
- Maternity and postpartum units and a doula or surrogate may be permitted
- End-of-life; other visitors must pre-arrange their visit with the site or unit
- Ambulatory care (including emergency), where possible

## 4 Donating plasma

Canadian Blood Services is asking patients who have recovered from COVID-19 to donate plasma as part of clinical trials to test the safety and effectiveness of plasma as a treatment option. [More information](#)

## 5 Webinars and workshops

- On Monday, December 14 at 6 p.m., the Department of Family Medicine’s Mackid Symposium and Well Doc Alberta present a free online wellness workshop called *Affirmation of your Professional Calling for Family Physicians*. Contact [family.medicine@ahs.ca](mailto:family.medicine@ahs.ca) to register.
- Well Doc Alberta has a new 53-minute [podcast episode](#) featuring two medical ethics experts discussing how ethics and morality affect physicians. Dr. Cheryl Mack and Dr. Eric Wasylenko address moral dilemmas and share strategies and supports to prevent moral stress from causing injury or burnout.
- On Wednesday, December 16, at noon, the third webinar in a weekly series will be held on the care and management of COVID-19 patients in the community. It is hosted by physicians from AHS, the CPSA and the Alberta Medical Association, with support from the Alberta College of Family Physicians. [Register](#)