

COVID-19 in the Calgary Zone: PCN update — February 25, 2021

Medical Home Q&A with Dr. Christine Luelo

Q. Now that vaccines are arriving again, and pharmacies have been announced as part of the distribution plan, what role will family doctors play in community vaccination?

I'm so excited my parents were able to sign up on Wednesday to get their immunizations. Right now, I almost don't care who is giving them as long as we are moving quickly! The Calgary Zone is well represented in the ongoing conversations about the next steps for family practice, in terms of putting needles in arms. Remember, this will be a long road with what could be annual boosters, so we want to get it right when it comes to our role. More information will be released shortly about what is needed in order to offer a vaccine. An expression of interest form is expected to be released in the coming days. Meanwhile, check out these great resources on how to be a vaccine-positive clinic as we aim for more than 80 per cent uptake. [Letter to Health Minister Tyler Shandro](#) | [Alberta Medical Association vaccine toolkit](#) | [Counselling immunocompromised patients](#) | [PrOTCT video](#) | [Vaccine information](#) | [Vaccine storage and handling](#) | [Vaccine sequencing FAQ](#) | [Vaccine info for health professionals](#)

Q. Can you clarify whether physicians and staff are included in Phase 2 of the immunization campaign and how it will be determined who is eligible?

It was officially confirmed Thursday morning that family physicians and "clinical staff" will be eligible for the vaccine in Phase 2 (c), which is for "health-care workers providing direct and acute patient care who have a high potential for spread to high-risk individuals." That phase is due to start in April. This is a welcome light at the end of this very dark tunnel and a much-needed positive when we are feeling down and exhausted. (Need help? Reach out to the [Physician and Family Support Program](#), which is continuing, as per the recent AMA [President's letter](#).) The current timeline is based on two vaccines being available. As Health Canada approves additional vaccines, timelines will be adjusted. Did you know? Alberta receives approximately 11 per cent of the federal shipments based on our population.

Q. Given that isolation guidelines are different for variant strains, why aren't we being informed whether patients have a particular strain when they test positive?

This is a known gap that is actively being addressed, with final meetings occurring at the same time as this document is coming to your inbox. We are confident that a solution will be forthcoming. In the meantime, you can refer to our [previous Q&A](#), in which we referenced the different isolation guidelines for these cases. Alberta Precision Laboratories is now [testing all samples](#) for variant strains, negating the need for follow-up test samples. [Info about variants](#) | [Isolation information](#) | [Transmission of variants](#) | [Isolation hotel information](#) | [Isolation hotel FAQ](#)

Q. There seems to be a lot of conflicting information about how far apart to spread vaccinations — and whether a second dose is needed. What’s the definitive word on spacing?

There is a lot of information swirling around on half doses, single doses, half-dose third boosters, mixing vaccines, left arm versus right arm (just kidding on that one!) and spacing of doses. The important piece to remember is that the scientific evidence is changing daily, as some jurisdictions are ahead on vaccines. For your own sanity, we recommend accessing the [source of truth](#) to understand how Alberta is applying this evidence locally. When you sign up for your first dose, you are automatically booked for your second shot, no later than 42 days from your first. [Spacing recommendations](#) | [Vaccine Q&A](#)

Q. Many of my patients would prefer to receive their vaccination in the clinic. If we are not selected to be a vaccination clinic, will we still be informed when and where they are vaccinated?

All vaccinations will be posted to Netcare on the day of vaccination. Right now, that means you would have to go to Netcare to retrieve information, but there is work underway to ensure continuity by connecting patients’ information to their family physician. CPAR (Central Patient Attachment Registry) is a key enabler of continuity and is worth considering if you have not already explored its value. [CPAR info](#)

Q. Is there anything new with how APL is managing wait times?

Three great pieces of news from APL:

1. After our education efforts in the fall, the lab has noted a downward trend in the amount of urinalysis being ordered, which has reduced the length of time patients have to spend in the labs and therefore increased access. Great job everyone!!
2. All sites are booking within four weeks. The shortest wait is two weeks. The pilot for shorter turnaround appointments is reaching its halfway point. Stay tuned for results and new processes.
3. Patients are asked to print requisitions that have been emailed to them by their provider and bring them to their appointment. Those who are unable to do so can email the requisition to the lab address that is provided when arriving on site. Lab staff will print off the requisition. Patients are asked to print single sided only. Requisitions sent by email should be in Word or PDF formats. Patients should not email requisitions to the lab prior to visits (for privacy reasons).

[Lab routing memo](#) | [Lab results: Pediatricians](#) | [Online testing tool](#) | [APL: Booking an appointment](#)

Q. During the last webinar, it was helpful to hear about advocacy for primary care. Are there any signs that the value of primary care is starting to be recognized?

I am super proud of the Calgary Zone team at all levels, and the great work initiated early in the pandemic response that resulted in clinical pathways and Specialist LINK collaboration supporting the management of COVID-19 patients in the medical home. The data shows we have the lowest hospitalization rate in Alberta, which is not a surprise when you think about all the literature that proves that patients who are well-connected to their family doctor (and team) are healthier as they age, live longer and have fewer hospital visits. We have just capitalized on this known fact, and I think the rest of the system is starting to take notice. [Infographic: Primary care fuelling the fight against COVID-19](#)

Q. Where can we send questions about isolation and other issues when our patients are receiving guidance that seems to contradict guidelines or evidence?

Providers (but not patients) can email questions to phc@ahs.ca. Our next webinar on Monday, March 1, will also aim to address ‘COVID-19 conundrums’ — grey areas, unanswered questions and other topics

that are confusing or unclear. We've assembled a panel of experts to tackle your questions, which can be submitted in advance via info@calgaryareapcns.ca or on the night via the live chat. [Register](#).

Other updates

1 Vaccine booking opens

Immunization bookings opened Wednesday for Albertans born in 1946 or earlier. Appointments can be made [online](#) or via 811. Availability is based on vaccine supply. Family members can book on behalf of eligible seniors. They will need the Alberta Health Care number and date of birth of the senior being vaccinated. Appointments will also be available from the first week of March at [participating pharmacies](#).

Alberta Health Services is [offering](#) the vaccine directly to residents in retirement centres, lodges, supportive living and other congregate living facilities with residents who are 75 or older. Seniors who can't find transportation to their appointments can call 211 for help. Alberta is targeting April to start the next step, [Phase 2 vaccinations](#), depending on supply. Phase 2 will include anyone 50 – 74, individuals with high-risk underlying health conditions, First Nations and Metis people 35 and over, residents and staff in congregate living settings, and eligible caregivers in four stages.

2 Vaccine spacing recommendations

The National Advisory Committee on Immunization (NACI) has published several [recommendations](#) on vaccine spacing based on the potential for immune interference and the need to monitor for potential adverse events. Currently, there is no data on the simultaneous administration of the COVID-19 with other vaccines. In the absence of evidence, NACI recommends:

- COVID-19 vaccines should not be given simultaneously with other vaccines.
- Waiting at least 28 days after the second dose before giving another vaccine — except when required for post-exposure prophylaxis — is prudent.
- Refrain from giving another vaccine between the first and second dose.
- Waiting at least 14 days before the administration of the COVID-19 vaccine after another vaccine was given is also prudent.

3 Webinars & events

- On Monday, March 1, from 6 – 8 p.m., the Calgary Zone PCN COVID-19 and mental health series continues with *COVID-19 Conundrums*. [Email questions](#) to the panel in advance. [Register](#).
- On Wednesday, March 3, from noon to 1 p.m., the AMA hosts the fifth COVID Talks for Docs webinar in the series. *Maintaining Physician Wellness* addresses self-care in a changing environment. [Register](#).
- From Friday, March 5 to Sunday, March 7, the Alberta College of Family Physicians' Virtual Family Medicine Summit takes place. Dr. Luelo, Dr. Deena Hinshaw and Dr. Heidi Fell will deliver the keynote speech, *Processing the Pandemic: Where are we now, and what comes next?* [Download the program](#). [Register](#).
- On Wednesday, March 10, from 7 – 9 p.m., the University of Calgary's COVID Corner series continues with Vaccines vs. Variants. [Register](#).
- On Tuesday, March 23, at noon, the second part of *The COVID-19 Pivot: Vaccine Update for Family Physicians* will be hosted by the College of Family Physicians of Canada. [Register](#).