Respiratory Outbreak Management Algorithm for LTCH/RH

WINDSOR-ESSEX COUNTY HEALTH unit
Bureau de santé de Windsor-comté d'Essex

STEP 1: Assessment

*Note: steps 1 to 3 may occur concurrently

Does the resident have **new and unexplained respiratory symptoms** not attributed to an underlying medical condition (e.g., COPD, allergies, etc.)?

- YES → Two or more residents with ARI symptom onset within a **48-hour period with an epi-link**?
- NO → No further action required. If the resident **develops new or worsening symptoms**, go back to **step 1**.
- UNCERTAIN → STEP 3

STEP 2: Reporting to WECHU

Two or more residents with ARI symptom onset within a **48-hour period with an epi-link**?

- YES → **Monday to Friday 8:30am to 4:30pm: Call 519-258-2146 ext. 1420**
  After hours: Call 519-973-4510
  Fax Line List to 519-977-5097. Line lists will be followed up by the CDOT team during business hours.
- NO → WECHU does not need to be notified. Follow **steps 3, 4 & 5.**

STEP 3: Implement IPAC Measures

- **The ill resident** should be placed on **additional precautions** in a private room. If a private room is unavailable, implement **additional precautions** and the following measures: 1) draw the curtain 2) dedicate equipment 3) encourage masking 4) ensure adequate ventilation.
- **The roommate** (if applicable) should be placed on **additional precautions** while awaiting lab results for the ill resident.
- **Non-roommate close contacts** should be monitored daily for symptoms, wear a mask when receiving care and when outside their room, and physically distance from others while awaiting lab results for the ill resident.
- Use **droplet contact precautions** when providing direct care or interacting within 2 metres of the ill resident/close contact: **Medical mask, eye protection, gown and gloves.**
- ***Review Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings* and WECHU Outbreak Quick Guide 6.0 for specific IPAC measures.**

- Place the resident on **additional precautions** for 24 hours to **monitor for new or worsening** symptoms.
- **Consult** with the resident's physician or nurse practitioner for an assessment.
- Use **droplet contact precautions** when providing direct care or interacting with the resident: **Medical mask, eye protection, gown and gloves.**
- **If new or worsening symptoms develop**, go back to **step 1.**
- **If no new or worsening symptoms develop** and/or if there is an alternate, non-infectious diagnosis, additional precautions may be discontinued and testing is not required.

STEP 4: Specimen Collection

- **Collect a nasopharyngeal (NP) swab** for **FLUVID** or **Multiplex Respiratory Virus PCR (MRVP)** testing. You may collect up to four MRVP swabs per outbreak (swab the most symptomatic residents).
- Complete a **General Test Requisition** form. Use your facility's medical director as the ordering provider.
  - Ensure "COVID-19 and Respiratory Viruses" is checked off in **box 5** and specify test requested (e.g. FLUVID or MRVP).
- Ensure **ALL fields are completed**. Resident demographics on the requisition must match the demographics on the specimen container.
- **Submit** specimens to the lab for testing ASAP.

STEP 5: Additional Precautions

Refer to Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings.

- **Case Management:** Page 51.
- **Contact Management:** Page 52.
- **Antivirals:** Consult with resident's physician or nurse practitioner.

Review the WECHU Outbreak Quick Guide 6.0 for a summary of IPAC measures.

It is the facility's responsibility to follow and implement all measures as set out in the **Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings** (February 2025, or as current). If there are any discrepancies between this document and the guidance, the directions from the guidance should be followed. Consult WECHU for outbreak questions.

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