

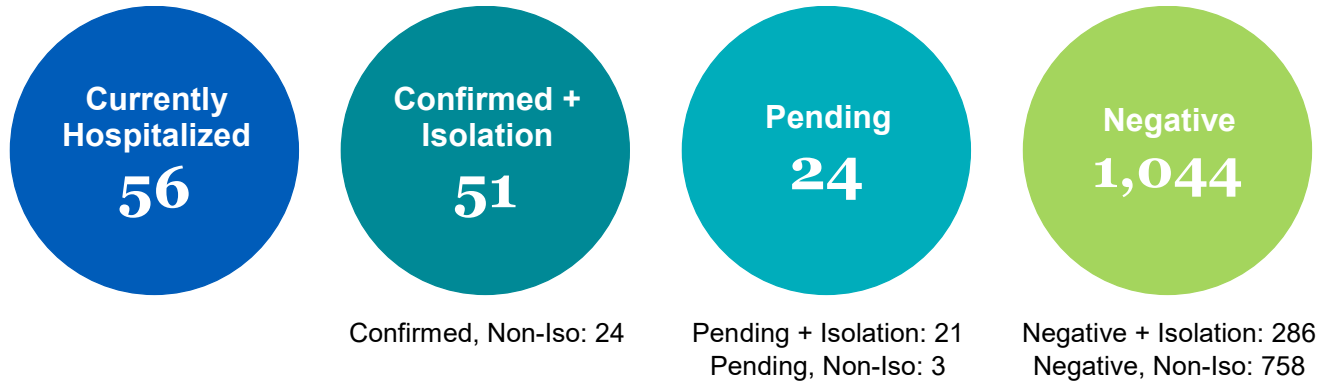
## Department of Medicine

### COVID-19 Information Bulletin

November 9, 2020

#### Calgary Zone COVID 19 Hospital Admission Data

##### Calgary Zone COVID 19 Status of Patients on Site as of 9 November 2020\*



- Confirmed:** patients with a positive Covid-19 test in SCM or ProvLab, or CDOM status 'Confirmed'
- Pending:** patients with Covid-19 test pending in SCM or ProvLab
- Negative:** patients not 'Confirmed' or 'Pending', and most recent SCM test is negative, or CDOM status 'Not a case'
- Isolation:** patient has an active Isolation order
- Non-Iso:** patient does not have active Isolation order

##### COVID 19 Status of Patients by Attending Group as of 9 November 2020 \*

	FMC		PLC		RGH		SHC	
	Confirmed	Pending	Confirmed	Pending	Confirmed	Pending	Confirmed	Pending
Cardiac Sciences	1	3	1	0	--	--	--	--
Hospitalist	13	2	7	0	9	1	5	0
Med / Oncology / Hematology	0	0	--	--	--	--	--	--
Medical Teaching Unit	3	0	4	3	--	--	--	--
Medicine	3	2	0	0	6	1	--	--

\* Data from [Calgary Zone COVID 19 Operational Reporting Tableau Database](#) as of: 2020-11-09 9:01 am

**Calgary Zone COVID 19 Patient Census<sup>^</sup>**

	Nov 4		Nov 5		Nov 6		Nov 7		Nov 8	
	Non-ICU	ICU	Non-ICU	ICU	Non-ICU	ICU	Non-ICU	ICU	Non-ICU	ICU
ACH	0	0	0	0	0	0	0	0	0	0
FMC	19.6	1.0	19.5	1.2	17.4	2.0	17.4	1.7	17.6	1.0
PLC	10.9	4.0	10.8	4.0	14.1	4.7	14.0	5.0	13.2	5.8
RGH	10.2	1.0	9.6	1.0	13.6	1.0	14.6	1.0	15.7	0.6
SHC	9.8	1.2	8.4	2.0	8.1	2.0	7.0	2.0	6.8	2.0
<b>TOTAL</b>	<b>50.5</b>	<b>7.2</b>	<b>48.4</b>	<b>8.2</b>	<b>53.2</b>	<b>8.2</b>	<b>53</b>	<b>9.7</b>	<b>53.3</b>	<b>9.4</b>

**Calgary Zone COVID 19 Hospital Admissions by Day<sup>^</sup>**

	Nov 4	Nov 5	Nov 6	Nov 7	Nov 8
ACH	0	0	0	0	0
FMC	2	1	1	1	1
PLC	1	0	2	0	0
RGH	0	2	4	1	1
SHC	0	0	1	0	1
<b>TOTAL</b>	<b>3</b>	<b>3</b>	<b>8</b>	<b>2</b>	<b>3</b>

<sup>^</sup> Data from [Calgary Zone COVID 19 Daily Activity & Outcomes Tableau Dashboard](#) as of: 2020-11-09 00:00 pm

**COVID-19 Outbreaks****FMC**

Units with heightened COVID-19 activity:

- [Units with dedicated COVID beds: 2](#) (Units 64 and 54)
- [Units on outbreak: 1](#) (Unit 82)
- [Units on watch: 1](#) (Unit 61)

**PLC**

Outbreak Unit Admissions and Transfers

- Effective immediately, Units 38, 49 and 51 will be open to admissions as per their normal admission criteria. COVID-19 possible patients will not be admitted to Unit 51. COVID-19 possible patients will only be admitted to Units 38 or 49 if they require the specialized care only available on these units.
- Effective immediately, disclosures related to being admitted or transferred to a unit on outbreak will be done after the transfer, knowing that these outbreak units remain a safe place to receive care.
- 38, 49 and 51 are restricted to family support persons at end of life or when essential to care. Please consider both the physical and emotional needs of the patient when determining if a family support person is "essential".
- Passes off of these units should be minimized, but can be permitted with appropriate education, hand hygiene and masking.

## RGH

Units with heightened COVID-19 activity:

- **Units on outbreak: 3** (Units 58, 72, 74)
- **Units on watch: 2** (Units 56, 71)

**A COVID 19 Outbreak has been declared on November 7, 2020 for the RGH Unit 58 (Acute Geriatric Unit (AGU)).** The AGU is closed to admissions currently as a result of this outbreak.

Situation: A patient was transferred to Unit 58 on October 26<sup>th</sup> from Unit 93. The patient was on isolation on Unit 93 almost the whole time prior to transfer to Unit 58.

While on Unit 58 the patient was briefly on contact isolation for diarrhea and was on nightly BiPAP. The patient developed respiratory symptoms on November 6<sup>th</sup> and was swabbed. The patient was placed on Contact Droplet isolation on November 6<sup>th</sup> at 23:50. The swab came back November 7<sup>th</sup> COVID 19 positive and an investigation was initiated. The patient has been transferred to Unit 93 and the patient's roommate has been placed on isolation.

Next steps:

- Contact tracing is underway. All staff and physicians identified as a potential contact will be identified by their respective leadership team.
- Staff and physicians who were in close contact with the patient November 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup> evenings and nights when the BiPAP was running AND November 6<sup>th</sup> days, evenings and nights until the isolation was commenced at 23:50 will be restricted from work. In addition, any PPE breaches from continuous masking and hand hygiene on day shift 4<sup>th</sup> and 5<sup>th</sup> will be restricted.
- Anyone who is symptomatic should present to an AHS Assessment Centre for testing. **Use EI Number 2020-5685 as it allows for both racking and expedited results.**
- Prevalence testing for all patients will be arranged
- Voluntary Prevalence testing for **unrestricted, asymptomatic core staff (clinical staff, Unit Clerks, Housekeeping, Allied Health, Respiratory staff), physicians and students** will be arranged for the following dates on a drop in basis in **Room 4577** at the Rockyview Hospital:
  - **Monday November 9 – 1100-1915**
  - **Tuesday November 10 – 1100-1915**
- Anyone who cannot attend one of the above dates is requested to present to an AHS Assessment Centre ASAP for testing. **Use EI Number 2020-5685 as it allows for both racking and expedited results.**

Staff who deliver items to the unit such as Patient Food Services and Porterage, or were not in the patient room are not required to be part of this prevalence screening at this time.

## SHC

SHC has just been notified of a COVID-19 outbreak at Oilfields General Hospital in Black Diamond. As a result, SHC is currently in the process of determining any impact on our Site as a result of this outbreak. All SHC Units have been asked to identify any patients admitted over the last 48 from Oilfields Hospital and notify their most responsible healthcare practitioner to discuss the need for isolation.

**COVID-19: New / Updated Resources and Information**

**UPDATED** [COVID-19 Frequently Asked Questions - Healthcare Worker / Staff](#) (9 Nov 2020)

**UPDATED** [COVID-19 Frequently Asked Questions - Public](#) (9 Nov 2020)

**UPDATED** Directive: [Use of Masks During COVID-19](#) (6 Nov 2020)

**NEW** COVID-19: Close Contacts and Contact Tracing (6 Nov 2020)

- [Contact Tracing Notification Process](#)
- [Contact Tracing Worksheet](#)
- [Information for Close Contacts of a COVID-19 Case](#)

**NEW** Memo: [Update on Availability of Disinfectants and Avoiding Damage to Medical Devices](#) (5 Nov 2020)

**UPDATED** PHAC wording around COVID Transmission – Aerosol vs. Airborne (Updated 5 Nov 2020)

- [PHAC updated wording around COVID-19 transmission, which used the term “aerosol”](#)

**NEW** COVID-19 Scientific Advisory Group Rapid Response Review: [Quarantine Period for Exposed Healthcare Workers](#) (4 Nov 2020)

**NEW** Guidance: [Workplace Health and Safety Notification Steps Regarding Occupational Exposures/Outbreaks to COVID-19](#) (4 Nov 2020)

**NEW** [Cardiopulmonary Resuscitation \(CPR\) for Continuing Care Clients with Suspected or Confirmed Novel Coronavirus \(COVID-19\)](#) (4 Nov 2020)

**UPDATED** [Personal Protective Equipment \(PPE\) Frequently Asked Questions](#) (4 Nov 2020)

**UPDATED** [COVID-19 Acute Care Outbreak Response Plan](#) (3 Nov 2020)

- Please note there are several embedded links in this document that should also be opened and reviewed.

**NEW** [Alberta COVID-19 Border Testing Pilot Program – Requirements](#) (1 Nov 2020)

**NEW** [Nonviolent Crisis Intervention \(NCI®\) Training with COVID-19 Risk Reduction Recommendations](#) (30 Oct 2020)

**UPDATED** [COVID-19 Travel and Vacation Guidelines and FAQs](#) (27 Oct 2020)

**UPDATED** Guidance: [COVID-19 Response – Nurse Practitioners](#) (30 Sept 2020)

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Communications Team

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