

October 16, 2020

CLINICAL MICROBIOLOGY

Phase II – Temporary Changes in the Test Menu Available at HSC, SBH, and Westman Clinical Microbiology Laboratories to Accommodate Increased COVID-19 NAAT Testing

Date effective: October 19, 2020

Background Information

Shared Health Clinical Microbiology Laboratories at the Health Sciences Centre (HSC), St. Boniface Hospital (SBH), and Westman Laboratory have been mandated to further increase nucleic acid amplification testing (NAAT) for SARS CoV-2 (COVID-19) for patients at their sites as well as referral hospital sites. To accommodate this testing with a static labour force, additional clinical microbiology laboratory tests will be temporarily suspended while demands for COVID-19 NAAT remain high.

Change in Test Procedure

The following have been added to the list of temporarily suspended clinical microbiology tests:

- Anaerobic bacterial cultures (exceptions: blood cultures, sterile site cultures)
- Mycology (yeast and mould) cultures (exceptions: cultures of tissues from immunocompromised patients, respiratory cultures). *Candida* will continue to be reported where clinically appropriate.
- Sputum culture (exceptions: CF patients, ETT secretions from ICU patients)
- Throat swabs

Phase I list of clinical microbiology tests that were previously suspended (October 2, 2020 memo):

- Bacterial vaginosis (BV) Gram stain assessments
- Breast milk cultures
- Dermatophyte cultures
- Ear (external) and eye (routine) cultures
- Genital swab cultures – including cultures for *Neisseria gonorrhoeae*
- *Legionella* cultures
- Pulsed-field gel electrophoresis (PFGE) testing
- Stool cultures
- *Trichomonas* testing – vaginal swabs
- Urine culture for outpatient reproductive age (18-45 years) women with typical symptoms of acute cystitis (uncomplicated infection) – samples from pregnant women will continue to be processed
- Ward screens for MRSA and CPOs (carbapenemase-producing organisms) – admission screens will continue to be accepted

Patient Impact

- Contact the appropriate Clinical Microbiology Laboratory if individual patient culture or testing is critical.

Contact Information

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SHA Laboratory Medicine Provincial Program Bulletin

Date: March 22, 2020

To: All Patients of Saskatchewan

From: Lenore Howey, Executive Director and Dr. Fergall Magee, Provincial Medical Director

Re: This notice describes the discontinuation of Routine testing and reduction of Laboratory Testing within the Province of Saskatchewan to a defined Limited Test menu for Stat and Urgent requests ONLY, with the exception of standing orders.

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Microbiology

All patients	Inpatients/ER only
COVID-19	Influenza A/B/RSV
Blood cultures	Lower Respiratory cultures
Cerebral Spinal Fluid	Urine cultures
Sterile site specimens (aspirates, tissues and intraoperative)	Deep wound cultures
Clostridium difficile	CPO (Carbapenemase Producing Organism) screening
Mycobacterium tuberculosis (rapid and culture)	
Transplant related testing	

Note: Testing will be batched for processing twice a week for the following tests:

- HIV serology
- Hepatitis B and C Serology
- HIV/HCV Viral Loads
- Prenatal serology screening
- Measles/Mumps serology & viral detection
- CSF PCR for HSV/VZV
- Syphilis Serology

Transfusion Medicine:

All prenatal testing (including Kleihauer-Betke testing) will be performed. Otherwise, only STAT and URGENT requests will be considered. Should there be a blood shortage, all requests will be reviewed for approval in accordance with the Saskatchewan Blood Contingency Plan.

Biochemistry:

Albumin	Ionized Calcium
Alkaline Phosphatase	Iron testing
ALT	Ketone (blood)
Ammonia	Lactate
AST	Lipase/Amylase
Bilirubin, Direct	Magnesium
Bilirubin, Total	Osmolality-blood and urine
Blood and Body Fluid Exposure	Phosphate
Blood Gas	Pregnancy Test – Urine and Blood
Calcium	Protein Electrophoresis
Catecholamines and metabolites	Protein, Total
CSF Biochemistry	Therapeutic/Transplant Drug monitoring
CK	Toxicology Screening (excluding Drug of Abuse confirmation)
Cortisol	Troponin
Creatinine	TSH
CRP	Urea
Electrolytes (Na, K, Cl, HCO ₃)	Uric Acid
Glucose (inclusive of 50/75G Pre-natal tolerance)	Urinalysis

NOTE: No interruption of service:

- prenatal, perinatal and neonatal testing
- newborn screening
- maternal serum screening
- metabolic testing

Hematology:

Complete Blood Count (CBC)	Malaria
D-Dimer	Sickle cell testing
Fibrinogen	All body fluid cell analysis
INR	Monotest
PTT	
Thrombin Time	

NOTE: Flow cytometry testing and Special Coagulation will be available by consult

Anatomical Pathology

Stat surgical pathology and cytology specimens will only be processed at this time, as designated by physicians on requisitions.

Cytogenetics - Only STAT and Urgent requests will be approved.

Immunodiagnosics- Only STAT and Urgent requests will be approved at this time.

HLA Transplant Testing – Services will continue on a STAT basis at this time

RE: Media request (6AT deadline) Suspension of clinical microbiological testing

Elliott, Brendan<Brendan.Elliott@nshealth.ca>

Mon 2021-02-22 10:02 AM

To: Robertson, Dylan <Dylan.Robertson@freepress.mb.ca>

Hi Dylan, the decision to reduce services is not taken lightly. We have business continuity and pandemic plans that outline which services can be suspended.

These decisions take into consideration the impact to patient care when a crisis requires reallocation of resources.

As was the case in many regions of the country, testing in areas other than COVID-19 during the first wave was drastically reduced because many outpatient clinical services were suspended.

However, we did have to make changes to STI testing and HSV/VZV testing because the swabs for those tests needed to be reallocated to COVID-19. We also needed to reallocate human resources. We tailored strategies based on the different pressures we faced. For example, some testing required suspension (HSV.VZV- used the same viral swabs we used for COVID-19), while routine STI testing was able to be performed using urine sampling to conserve swabs.

For BV smears, ova, and parasite screening, human resources were made available for clinical situations that required them.

Please note we were always able to address specific requests on a case by case basis, with consultation with microbiologists. Some reductions persist but if there is a particular request, the physician can call a microbiologist to discuss and approve it.

Here's a list of tests/services that were suspended, along with the date they were suspended and reintroduced:

On Nov. 25, 2020 the following services were suspended:

- Throat swabs for Group A Streptococcus
- Routine HSV / VZV swabs for PCR
- Stool testing for viral gastroenteritis
- Oral swabs for fungal culture / stain
- fungal culture for skin, hair and nails
- Chlamydia and Gonorrhea testing except for prenatal screening

We also encouraged our front line clinicians to reduce the use of the following services:

- Routine Urine cultures (Do not culture urine in asymptomatic individuals. Asymptomatic bacteriuria should not be treated except in pregnant women or prior to an invasive urologic procedure)
- Skin Swabs (Avoid swab specimens of superficial ulcers, especially of inadequately debrided wounds)

On Jan. 20, 2021 the following tests/services resumed, with the understanding that turnaround times may be delayed if COVID-19 volumes increase again:

- Chlamydia and Gonorrhea
- Routine HSV / VZV swabs for PCR
- Throat swabs for Group A Streptococcus

The following tests continue to be suspended to support the staff re-deployment required for COVID-19 testing:

- vaginal swabs for the assessment of bacterial vaginosis except in pregnant women or women who fail to respond to empiric treatment
- Stool testing for viral gastroenteritis except for outbreaks as directed by Public Health
- Oral swabs for fungal culture / stain
- fungal culture for skin, hair and nails

- Stool microscopy for parasites will continue to require approval by a microbiologist, except those submitted by the Newcomer Health or Infectious Diseases clinics

Brendan



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