

August 31, 2020



Midwives ordering testing for COVID-19

Can I test my clients and/or their newborns for COVID-19?

Midwives can order laboratory tests for COVID-19 for their clients and infants born within their care in accordance with Reg. 682 (Appendix A) under the Laboratory and Specimen Collection Centre Licensing Act.

Midwives can provide COVID-19 testing at any point in time during the prenatal and postpartum period, provided they have the resources required to carry out testing. Testing can take place in the clinic, hospital, or in the client's home.

Who can I order a COVID-19 test for?

As of August 14, the Ministry of Health [updated their testing guidance](#). Pregnant people and newborns are included in their definition of 'other priority populations'. This updated document now includes testing guidance for asymptomatic contacts of confirmed positive cases.

Pregnant people and neonates should be tested as soon as possible if they are exhibiting any COVID-19 symptoms (see here for the Ministry's [updated list of symptoms](#)).

According to the Ministry, if the client is only reporting a runny nose/sneezing or congestion, midwives should consider other underlying issues such as seasonal allergies and post-nasal drip.

Newborns should be tested for COVID-19 within 24 hours of birth if their birthing parent had suspected or confirmed COVID-19 at the time of delivery, regardless of symptoms.

Midwives should use their clinical judgement to determine whether to test a birthing parent or newborn in the postpartum period. The symptoms list and/or the Ministry's updated [case definition](#) for COVID-19 can help to inform this decision.

All specimens that are submitted for testing will be accepted. Midwives should prioritize testing symptomatic people over those without symptoms. Testing of asymptomatic people is not recommended, and clients should be directed to the COVID-19 website if they require more information.

What type of swab is needed to test for COVID-19?

According to [Public Health Ontario](#), midwives are only required to submit a single upper respiratory tract specimen for COVID-19 testing. This specimen can be collected through either a nasopharyngeal swab **OR** a viral throat swab. **However, PHO states that a nasopharyngeal swab is the preferred specimen.** Swabs must be collected in universal transport medium (UTM).

How can I order collection kits for nasopharyngeal and viral throat swabs?

Midwives can order the following collection kits from PHO using the [Requisition for Specimen Containers and Supplies Form](#):

- Nasopharyngeal swab in transport medium (UTM) – Item number 390082
- Viral throat swab - Swab in transport medium (UTM) – Item number 390081
- Biohazard Bags – Clinical specimens (self-seal) – Item number 300008

Midwives should fax the completed requisition form to their local public health laboratory (fax information can be found on the second page of the Requisition for Specimen Containers and Supplies form).

Note: Collection kits should be stored at 2-25°C until used.

If ordering from PHO is not possible, midwives can order alternative collection kits (see Table 1).

How do I conduct a nasopharyngeal swab? (Preferred method)

To conduct a nasopharyngeal swab, PHO recommends the following:

1. Open the pouched seal pack and aseptically remove the sterile swab from the package.
2. [Collect the specimen](#) from the site involved as early as possible following the onset of symptoms. [This video](#) provides additional guidance on how to collect this specimen.
3. Aseptically remove cap from vial and insert swab in medium.
4. Break swab shaft evenly at the scored line to fit in tube well below the cap and replace cap to vial closing tightly.
5. Label the specimen container with the patient's full name, date of collection and one other unique identifier such as the patient's date of birth or Health Card Number.
Failure to provide this information may result in rejection or testing delay.

How do I conduct a nasopharyngeal swab on a newborn?

Although conducting a nasopharyngeal swab on a newborn involves the same mechanics as it would with an adult, there are a few considerations to make when swabbing a newborn. Nasopharyngeal swabs are invasive and can be a [discomforting experience for newborns](#) and their parents. [This video](#) provides some guidance on how midwives can lessen this discomfort when conducting a nasopharyngeal swab.

The Provincial Council for Maternal and Child Health's (PCMCH) COVID-19 guidance document includes considerations for nasopharyngeal testing on a newborn (such as ensuring a newborn's face is cleansed prior to sample collection). See [page 18](#) of this guidance document for more information.

Are there alternatives to nasopharyngeal swabs?

Yes. Recent research has shown that midturbinate swabs –swabs that are inserted into the nostril until resistance is met at the turbinates as opposed to the nasopharynx– are a good alternative to nasopharyngeal swabs for diagnosing respiratory viruses. [In one study](#) (n = 84) infants were swabbed using both midturbinate and nasopharyngeal swabs to detect the presence of a respiratory syncytial virus. Study authors found that differences in viral loads were small and likely not clinically significant, and over 75% of parents preferred midturbinate swabs to nasopharyngeal swabs.

PHO has approved one pediatric midturbinate swab as an alternative collection kit for an upper respiratory tract specimen for COVID-19 testing (see Table 1). This may be an appropriate option for testing newborns. [This video](#) provides some guidance on how midwives can conduct a midturbinate swab.

How do I conduct a viral throat swab? (For use only if a nasopharyngeal swab is not possible)

To conduct a viral throat swab, [PHO](#) recommends the following:

1. Open the pouched seal pack and aseptically remove the sterile swab from the package.
2. [Collect the specimen](#) from the site involved as early as possible following the onset of symptoms.
3. Aseptically remove cap from vial and insert swab in medium.
4. Break swab shaft evenly at the scored line well below the cap and replace cap to vial closing tightly.
5. Label the specimen container with the patient's full name, date of collection and one other unique identifier such as the patient's date of birth or Health Card Number. Failure to provide this information may result in rejection or testing delay.

Alternative collection kits

Due to existing shortages, PHO has compiled a list of [alternative collection kits](#). Midwives can order any of the following to collect upper respiratory tract specimens for COVID-19 testing.

Additional collection kits

Midwives can submit other swab types (except cotton-tipped swabs) and other liquid transport media (except gel or solid media) to PHO laboratories for COVID-19 testing.

What personal protective equipment is required when testing for COVID-19?

Midwives should don droplet and contact precautions when testing for COVID-19. This includes:

- Surgical/procedure mask
- Isolation gown
- Gloves
- Eye protection (goggles or face shield)

Requisition form for COVID-19 testing

Midwives must complete all fields of the [COVID-19 test requisition](#) form when they have completed swabbing and include with sample(s) for processing.

How do I prepare the sample(s) for transportation?

After collecting the sample, midwives should:

- Place the specimen in the biohazard bag and seal.
- Ensure that specimens are stored at 2-8°C (in the fridge).
- Ship specimen on ice packs.
- **Note:** if there will be a delay of more than 72 hours before specimen can be shipped to laboratory, keep specimen frozen (-80°C) and ship on dry ice

Can any lab accept samples for COVID-19 testing?

Midwives can either:

- Ship sample(s) to their [local PHO Laboratory](#) or
- Ship sample(s) directly to [one of seven PHO Laboratories](#) that are processing specimens for COVID-19 testing (located in Toronto, Hamilton, Kingston, Ottawa, Timmins and London).

[Dynacare](#) laboratories are not currently processing tests for COVID-19. Dynacare is forwarding all samples to PHO for COVID-19 testing.

[LifeLabs](#) locations are accepting samples for COVID-19 testing, unless otherwise specified.

Midwives are encouraged to contact their local hospital(s) or community lab to check if they have the capacity to accept swabs taken from the community for COVID-19 testing.

How will I receive the test results?

Midwives will be notified by PHO once results become available. Presently, all positive and negative results are being reported to the local public health unit.

Ontario Health Digital Services has provided [instructions and information](#) for clinicians who use the Ontario Laboratories Information System (OLIS) to look up client results for COVID-19. Midwives who are registered to use OLIS will be able to find client COVID-19 results in the clinical viewer as soon as they are entered by the processing lab, if that lab has been connected to OLIS. Work is ongoing to get all COVID-19 testing labs feeding into the system, although most are connected now.

Clients and the public are now able to check their own test results through OLIS. Clients can sign up [here](#) to view their own COVID-19 results, whether or not their care providers are registered to use OLIS. This will not give clients access to other types of test results or reports available in OLIS, and, like clinicians, they will only be able to view results from labs that are connected to the system.

Note: If you become aware that a client visited your clinic and has since tested positive for COVID-19, please notify your local public health unit. For more information about testing, [please contact PHO](#).