

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 B) 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. Testing can take place in the clinic, hospital, or in the client's home.

What COVID-19 tests can midwives perform?

As per the December 21[,] 2020 update from the CMO, midwives are permitted to perform some, but not all, tests for COVID-19.

- Midwives are **not permitted to perform nasopharyngeal swabs (NPS) and deep nasal swabs** on their own authority as they require the performance of the controlled act of "putting an instrument, hand or finger beyond the point in the nasal passages where they normally narrow." Under the Midwifery Act, 1991, midwives do not have the authority to perform this controlled act.
- Midwives **are permitted to perform anterior nasal swabs and throat swabs**, as they do not require the performance of a controlled act.

Who can I order a COVID-19 test for?

As of August 26th 2021, the Ministry of Health has <u>updated their testing guidance</u>. Pregnant people and newborns are included in their definition of 'other populations'.

- Pregnant people/birthing parents and neonates should be tested as soon as possible if they are exhibiting <u>any</u> COVID-19 symptoms (see here for the Ministry's <u>updated list of</u> <u>symptoms</u>).
 - When evaluating clients for COVID-19 symptoms, midwives should consider whether clients' symptoms are <u>new, worsening, or different from an</u> <u>individual's baseline health status</u>. The Ministry's updated symptoms list includes chronic or other potentially related conditions/causes for each symptom that may rule out COVID-19.
 - Midwives should consider testing any labouring clients presenting with fever, unless there is a clear alternative reason for their fever and the prevalence of COVID-19 in their community is low.

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

Newborns currently in the NICU/SCN born to birthing parents with confirmed COVID-19 at the time of birth should be tested within the first 24 hours of life and, if the initial test is negative, again at 48 hours of life, regardless of symptoms.

• Midwives should not test asymptomatic clients who are considered low risk or who have been fully vaccinated. Midwives should recommend or perform a test for asymptomatic clients that were recently in contact with someone with confirmed COVID-19, regardless of vaccination status.

All specimens that are submitted for testing will be accepted. Clients who require more information about testing can be directed to the <u>Ministry's COVID-19 website</u>.

What types of swabs are midwives permitted to perform for COVID-19 testing?

Midwives are only required to submit a single upper respiratory tract specimen for COVID-19 testing.

If unable to get a medical directive to perform NPS testing, midwives can collect specimens for COVID-19 testing using the following swabs* (in the order of most to least sensitive):

- Combined oropharyngeal/throat and both anterior nostrils
- <u>Anterior nostril swab</u> (both sides)
- <u>Throat/oropharyngeal swab</u>
- Saliva
 - <u>Neat funnel</u>
 - o <u>Neat straw</u>
 - <u>"Swish and gargle" funnel</u>
 - <u>"Swish and gargle" straw</u>

*These tests are not as sensitive as a nasopharyngeal swab, the recommended swab for COVID-19 according to PHO and the MOH; test results may also take longer to obtain. If midwives are unable to collect a nasopharyngeal swab or there are barriers to clients accessing this swab in the community, **a combined swab of the throat and both nostrils is the preferred swab**.

Please visit <u>PHO's chart</u> titled *Preferred and Acceptable Specimen Types for COVID-19 Testing by Patient Characteristic* to determine when a given swab is preferred or acceptable for your client, including instructions for specimen collection by swab type. Please also see PHO's requirements for submitted specimens (including requisition(s) required and minimum volume thresholds). **Note:** Swabs should be collected in universal transport medium (UTM). However, PHO will accept other liquid transport media (except gel or solid media).

As of October 5, 2020, PHO has begun accepting saliva samples for COVID-19 testing. This sample is considered acceptable for children (including newborns) for whom other collection methods may not be tolerable. Midwives should note, however, that not all laboratories are accepting saliva samples for COVID-19 testing at this point in time.

How can I order collection kits?

Midwives can still submit their orders for COVID-19 test collection kits through the <u>Ontario</u> <u>Health Digital Health Services page</u>. Midwives can order the larger throat/nasal swabs for testing, or use a nasopharyngeal swab to collect a combined throat/nasal swab (if this is the only collection kit available).

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

When should clients and/or their newborns be tested using alternative swabs?

If midwives are unable to conduct nasopharyngeal swabs (i.e. they are not under delegation/do not have the authority to do so), and clients have barriers to accessing this test for themselves/their newborns in the community, midwives can test using any of the aforementioned swabs. PHO recommends a combined swab of the throat and anterior nares. While this is currently considered the most acceptable alternative a midwife can perform, it may possibly result in slightly more false-negative results, and there is limited evidence regarding its accuracy when compared to a nasopharyngeal swab. More research with larger sample sizes is still needed.

PHO has summarized the performance characteristics for various respiratory specimens in this updated <u>evidence brief</u>. When compared to nasopharyngeal swabs, the collection of the following specimens for COVID-19 testing are reported to have the following sensitivity rates:

Comparison	Sensitivity rate
Nasal or deep nasal vs nasopharyngeal	82.6% to 100% (five studies)
Combined throat and nares vs nasopharyngeal	91.7% (one study)
Throat vs nasopharyngeal	81.8% (one study)
Saliva vs nasopharyngeal	69.2% to 97.1% (three studies)

Please see PHO's full evidence brief for more information and a full list of references.

Note: If a newborn tests positive for COVID-19, midwives should consult with a paediatric infectious disease consultant or other appropriate neonatal or pediatric consultant.

Alternative collection kits

Due to existing shortages, PHO has compiled a list of <u>alternative collection kits for various</u> <u>respiratory specimens</u>. Midwives can procure any of the collection kits listed on PHO's website to collect a sample for COVID-19. Please be mindful of each kit's intended and alternative specimens for collection.

Self-testing kits

Self-test kits have been approved by <u>Health Canada</u> and are being sold in retail locations in Ontario. These are rapid antigen screening tests that can be used at home by people who do not have symptoms and have not been exposed to COVID-19. Self-testing kits should NOT be used to test for COVID-19 infection in symptomatic individuals, individuals with known contact with a COVID-19 case or in outbreaks.

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. Midwives may also order additional collection kits from the <u>Ontario Health Digital Health Services</u> page.

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 <u>COVID-19 Virus Test Requisition</u> 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.
- <u>Note:</u> if there will be a delay of more than 72 hours before specimen can be shipped to laboratory, keep specimen frozen (-70°C) and ship on dry ice

Can any lab accept samples for COVID-19 testing?

Midwives can either:

Ship sample(s) to their <u>local PHO Laboratory</u> or

 Ship sample(s) directly to <u>one of seven PHO Laboratories</u> that are processing specimens for COVID-19 testing (located in Toronto, Hamilton, Kingston, Ottawa, Timmins and London).

<u>Dynacare</u> laboratories are not currently processing tests for COVID-19. Dynacare is forwarding all samples to PHO for COVID-19 testing.

<u>LifeLabs</u> 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 Health Services has provided <u>instructions and information</u> for clinicians who use the Ontario Laboratories Information System (OLIS) to look up patient/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 access <u>this page</u> 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, <u>please contact PHO</u>.