



**Northwestern  
Health Unit**

www.nwhu.on.ca

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### **HCP Medical Advisory – HCP role in the reopening of schools**

In preparation for the reopening of schools, please be aware of the following information. NWHU have shared [a resource](#) with schools regarding the process to follow when students have symptoms and the requirements for them to return back to school.

Please be aware that health care providers may be asked to assess patients to determine whether they need to be tested for COVID-19. Please note the following:

- If a health care provider determines that there is an alternate diagnosis OR assesses the patient and does not recommend testing for COVID-19, then the patient does not need to be tested for COVID-19 and can return to school 24 hours after symptom resolution.
- If a health care provider recommends testing for COVID-19 and the patient does not get tested, then they are required to self-isolate for 14 days from symptom onset. Household members may also be required to self-isolate depending on public health's risk-assessment.
- Those with chronic illnesses who have symptoms similar to COVID-19, can attend school if the symptoms are normal for that person's illness. If the symptoms worsen, change, or are unusual for the individual, they should self-isolate and get tested for COVID-19 and/or be assessed by their health care provider.

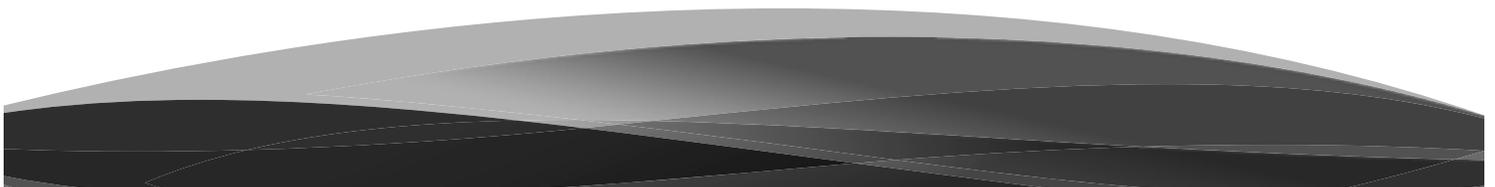
Ministry guidelines do not require a physician's note to allow a student to attend school.

[Attached is information related to different swab collection methods for PCR testing for COVID-19.](#) This may be useful in situations where a nasopharyngeal swab is not possible.

Please contact me if you have any questions or concerns.

Sincerely,

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## FAQs for health care providers on alternate types of swab testing for COVID 19

This document was developed in response to questions on alternate swab testing methods for COVID-19 other than nasopharyngeal swabs. Most of the information below are excerpts from Public Health Ontario's [COVID-19 Laboratory Q&As](#). For further information related to testing for COVID-19, please also refer to [Public Health Ontario's COVID-19 PCR test information](#).

**Q. Is there a minimum age limit on the swabs, or can they be used for any age person?**

A. We do not have age limits on any swab. If the swab fits in the nose, it can be used as directed.

**Q. Is the pediatric swab (Copan CA56750CS01) supposed to be used only on pediatric patients? If so, what would be the age recommendations for this?**

A. The Copan CA56750CS01 swab can be used for pediatric patients, but so can the other swabs. There is no age recommendation, but it is expected to be used on pediatric patients. It is not appropriate for use on neonates as it is too wide for this age group. There are limited numbers of Copan CA56750CS01 available.

**Q. If a pediatric swab is not available, can the practitioner choose an alternative site for a pediatric client? For example, choose deep nasal when the swab is an NPS?**

A. Yes, an alternative site such as nasal or deep nasal can be used, as long as the swab tip fits in the patient's nose. Alternatively a throat collection can be done.

**Q. Can adult patients choose an alternative site even though the swab is an NPS?**

A. For best sensitivity an NPS swab should be used for NPS collection, however, nasal or deep nasal collection is also acceptable if NPS can't be performed.

**Q. Are the swabs I received suitable to detect COVID-19?**

A. The Infectious Diseases Society of America (IDSA) suggests collecting nasopharyngeal, or mid-turbinate or nasal swabs for SARS-CoV-2 RNA testing in symptomatic individuals with upper respiratory tract infection (URTI) or influenza like illness (ILI) suspected of having COVID-19. While NP swab collection is widely used and is the primary specimen type for commercial direct SARS-CoV2 test platforms, based on current available evidence, clinical practice, and availability of testing resources, the IDSA believes there are comparable alternative methods for sampling the nasal passages.

References:

- <https://www.idsociety.org/practice-guideline/covid-19-guideline-diagnostics/>
- <https://www.idsociety.org/globalassets/idsa/practice-guidelines/covid-19/diagnostics/table3.png>

**Q. How do nasopharyngeal swabs (NPS) and throat swabs compare in their test performance?**

A. Upper respiratory tract specimens include a nasopharyngeal swab (NPS), deep nasal swab, anterior nasal swab OR viral throat swab. NPS is the preferred specimen when swabs are available, followed by a deep nasal swab. An analysis of a subset of specimens tested at PHO Laboratory shows that throat swabs are less sensitive than NPS. The analysis looked at approximately 2400 episodes of parallel NPS and throat swab collections (separate throat swabs and NPS collected at the same time. Sixteen (18.4% of 87 parallel collections that were positive by NPS were negative by throat swab. In addition, only 7 (0.3% of 2307 parallel collections episodes with a negative NPS were positive by throat swab collected at the same time. Similar analysis of the performance of nasal swabs, or different types of nasal swabs (deep or anterior) could not be performed at PHO Laboratory, as this information was not consistently provided on the laboratory requisition. Although an NPS or nasal swab is preferred over a throat swab due to increased sensitivity, PHO Laboratory continues to accept and test throat swabs. Throat swabs may be the only testing option for specific reasons such as limited supplies of NPS and nasal swabs, or patient factors e.g. nose bleeds with nasal/NP swabbing.

**Q. Is there a swab for testing of neonates?**

A. At this time there are no dedicated neonatal nasopharyngeal swabs available in Ontario. Current advice is to collect an NP swab when testing neonates for COVID-19. If the calibre of the swab that is available is too wide, it can be used for nasal, deep nasal or throat swab collection as alternative collection sites.

**Q. During collection, is a nasopharyngeal swab inserted into both nares or only on one side.**

A. Either method can be used and is at the discretion of the person collecting the swab. [CDC](#) specifically states: **Specimens can be collected from both sides using the same swab, but it is not necessary to collect specimens from both sides if the mini-tip is saturated with fluid from the first collection.**