

**Guidance Document
for COVID-19 Point-of-Care Testing
New Brunswick Public Health**

INDEX

INDEX ii

GENERAL 1

Preamble 1

Understanding the Role of COVID-19 Point-of-care Testing 2

 Benefits of POCT 2

 Limitations of POCT 3

 Populations Eligible for POCT 4

 Self-Administered POCT 5

POCT Administered by Qualified Test Provider 6

 Roles and Responsibilities 6

Registering Individuals for Periodic POCT 6

Infection Prevention and Control 7

Quality Assurance 7

Care Environments 7

Recording Results 8

Communicating Results 8

Reporting and Surveillance 10

 APPENDIX A: Roles and Responsibilities 12

 APPENDIX B: Community COVID-19 Screening Tool 13

 APPENDIX C: Client Information Sheet 14

 APPENDIX D: Personal Protective Equipment 15

 APPENDIX E: Test Provider Information Sheet 17

 APPENDIX F: Public Health Communicable Disease Team Contact List 19

 APPENDIX G: Reporting Form Process and Dictionary 20

References 22

Guidance Document for COVID-19 Point-of-Care Testing New Brunswick Public Health

Revisions, since the July 12, 2021 document:

- Updated Understanding the Role of COVID-19 Point-of-care Testing
- Expanded on the types of rapid tests used
- Updated Populations Eligible for POCT
 - expansion of definition on eligible populations
- added voluntary and mandatory testing explanation
- differentiated between self administered and test being administered by qualified test provider
- Updated Reporting and Surveillance
 - further explanation added when it may be prudent to contact Public Health
- Appendix B- Removal of part of form- consent form
- Appendix D- Further clarification on PPE requirement when rapid testing
- Appendix F- Adjustments to Public Health Communicable Disease Team Contact List

GENERAL

Preamble

COVID-19 is a rapidly evolving new disease that has spread globally; and has proven to be particularly threatening to medically fragile individuals and vulnerable people living in communal settings. As knowledge about the virus increased, protective measures and management strategies were implemented to protect New Brunswick citizens. Moving forward, as society resumes operations, we must strike a balance between reducing the risk of transmission while easing protective restrictions.

Testing for COVID-19 is one of the essential strategies identified in this process. It permits identification of those who carry the virus and close contacts to whom it may have been transmitted. By isolating confirmed and potential carriers, further transmission of the virus can be ceased. At the heart of this test, trace, isolate approach for COVID-19 is the gold standard Reverse Transcriptase- Polymerase Chain Reaction PCR (RT-PCR) testing that is conducted at the provincial lab in the Dr. Georges- L. Dumont University Hospital Center in Moncton. The samples for these tests are collected in community based COVID Assessment Centers operated by the regional health authorities in New Brunswick; and sent to Moncton for analysis, with results available within 24-72 hours.

Simpler methods of testing may be indicated when rapid results and ease of use matter more than accuracy. For these situations, antigen-based and molecular rapid testing devices may be used to screen for COVID-19 in a point-of-care (POC) application; where certain tests provide preliminary results on-site within 15 minutes. Point-of-care Testing (POCT) refers to patient testing activities provided outside the laboratory, performed by workers whose primary training is not in

the clinical laboratory sciences. POCT can be provided by health-care professionals, other qualified providers, and in some cases by individuals themselves. Although point-of-care testing has a lower ability to detect the presence of COVID-19 than lab-based PCR testing (i.e. chance of false negatives or not picking up infection that is actually there), it provides prompt results to identify individuals who might be more contagious (higher viral loads). When the incidence of infection in the population is relatively low; however, a positive result may also be false. To mitigate this, all positive test results must be confirmed with PCR testing.

As a federal and provincial collaborative measure, POCT for COVID-19 was initially intended to rapidly identify symptomatic individuals with high viral loads. While using these products to test asymptomatic individuals with increased risks for exposure to COVID-19 is an off-label approach, serial testing of this population may help to minimize the chances of an outbreak. Serial testing involves testing that is repeated at different points in time. In addition, the surveillance data from this testing will also enhance our understanding about the extent of asymptomatic spread in these groups and prevalence of infection in certain settings.

New Brunswick's Department of Health provides information and direction for the POCT program and influences the provision and utilization of POCT in specific settings.

Understanding the Role of COVID-19 Point-of-care Testing

Through federal and provincial collaboration, an ever-expanding number of rapid COVID-19 POC tests are becoming available for use. These devices are validated clinically by the Dr. Georges-L. Dumont Lab; and guidance is provided to their best use within the New Brunswick testing strategy. Please see Health Canada's [list of authorized testing devices](#) for COVID-19.

While the technology is available, it is not intended for everyone. Criteria have been established to guide where, how, and with whom rapid testing has a role.

There are 2 types of POCT that are primarily used within NB for asymptomatic testing within the province. Rapid Antigen tests are used frequently because of their quick results, within 15 minutes, and ease of administration, which often allows people to self administer this test. These test are mobile and can be administered at work or home, depending on the testing requirements for that individual sector.

Molecular tests can have a higher sensitivity due to the isothermal amplification, and quick results, often within 15 to 20 minutes. This type of POCT is used in certain areas where the testing regime is consistent, and you may need the option of printing or saving of results over a period of time. Each type of test has its advantages, and this is a discussion point before deciding on the type of test being offered for a certain purpose.

Benefits of POCT

- Rapid testing is faster, less expensive, and can be performed by non-lab personnel in a community or workplace setting
- Community or workplace-based testing has the potential to socialize individuals who have higher risk of exposure to the idea of regular testing to prevent future outbreaks (i.e. Those

- who frequently cross New Brunswick borders for childcare, shared child custody arrangements, education, or employment reasons.)
- Community centered screening practices helps to conserve laboratory resources, as only presumed positive results would be confirmed through PCR.

Limitations of POCT

No testing method is 100% accurate; including rapid testing for COVID-19. It is possible to get false positive or false negative results. A false positive result occurs when someone's sample tests positive; but they do not have COVID-19. Conversely, if a person who has a COVID-19 infection tests negative, the result is a false negative. There are several approaches to help address these types of errors, which will be described below.

- When an antigen test detects COVID-19 in a sample; the person is most likely positive even if they are asymptomatic. The risk of a false positive is eliminated by conducting PCR testing to confirm all preliminary positive results.
- Rapid antigen test devices are most effective at detecting COVID-19 when people are symptomatic and highly contagious; meaning that false negatives may occur when asymptomatic or at lower viral loads. Serial testing of the same asymptomatic individual in a designated population would help to mitigate the risk of false negatives. It has been suggested that asymptomatic individuals in facilities with on-site serial testing should have a set testing frequency of at least weekly; and more often (i.e. 2-3 times per week) when there is a higher level of transmission in the facility or community.
- POCT screening devices reflect a person's status for that moment in time. It is vital that those who develop COVID-19 compatible symptoms seek PCR testing, even if they have recently tested negative on a POCT device. The province continues to maintain the standard of requiring PCR testing for those with COVID-19 compatible symptoms.
- Testing should always be viewed within a broader picture of the community/zone context. When there is a very low percentage of positive test samples in a community/zone, serial screening tests may be required less frequently.
- Conversely, when a community/zone positivity rate rises such as a community outbreak, more frequent testing or testing more of the workplace population is indicated. Industries or agencies conducting POCT may be advised by the Medical Officer of Health when the community prevalence of COVID-19 would require adaptations to their testing process.

Contraindications to POCT

There are circumstances in which POCT would not be advised and a RT-PCR test would be required. These include:

- Symptomatic individuals.
- Identified persons of a close contact of a case.
- In a facility outbreak setting; unless under the direction of the Medical Officer of Health.

Note: If the client has recovered from a COVID-19 infection within the last 90 days, neither POCT nor PCR testing would be appropriate for asymptomatic screening. They may continue to test positive for up to 90 days after a COVID-19 infection, as dead virus particles may be detected. However, if this client re-experiences COVID-19-compatible symptoms; they should self-isolate

immediately and schedule a PCR test at an Assessment Center. If they continue to test positive, further direction will be provided by the Medical Officer of Health.

Ultimately, in New Brunswick the best role for rapid POCT is as a screening device for asymptomatic people; where protocols are in place to conduct serial testing and to confirm preliminary positive results through PCR testing.

Populations Eligible for POCT

As the pandemic progresses and variants of concern have emerged, along with the easing of restrictions across the country and around the world, cases in New Brunswick are expected to fluctuate over time. While earlier in the pandemic, cases in New Brunswick were typically travel related, these are now primarily being seen in the population that is not fully vaccinated. Mitigation measures have been needed to address the risk of transmitting COVID-19 in workplaces and in the community.

One of the provincial risk-reduction strategies is to recommend serial asymptomatic testing for populations who may be at increased risk for exposure to COVID-19; or during times when there is a higher level of viral activity in the community. For these situations, POCT may prove useful for:

- Individuals who frequently cross New Brunswick borders for the purpose of childcare, education, work, or to fulfill child custody arrangements.
- Individuals employed in the commercial transportation industry who may be required to make trips outside of New Brunswick on a regular basis.
- Those living in rural and remote areas that lack access to a standard Assessment Center for RT-PCR testing for COVID-19.
- Points of entry to New Brunswick, such as land borders, airports, or marine ports where testing would be opportune.
- Times when many new cases of COVID-19 are being diagnosed in a community; or an outbreak has been diagnosed in a workplace or facility.
- Long term Care homes, Nursing homes and Adult Residential facilities- staff visitors and residents
- Individuals who are not fully vaccinated

Voluntary testing

Conducting regular asymptomatic rapid testing enhances our understanding about the extent of asymptomatic spread and prevalence of infection in this sector.

The New Brunswick Department of Health has engaged key employers in the process of offering regular rapid POCT to their staff. Applications from industries interested in implementing rapid POCT will be reviewed by the Department of Health based upon specific criteria. Workplace POCT would be recommended when:

- the company has the ability to undertake POCT through their Occupational Health Department, or similar health and safety infrastructure onsite, including a qualified testing lead
- there is a large number of on-site employees in a critical industry or infrastructure (i.e. Food/Beverage/Manufacturing/resource extraction and production), and

working conditions are not easily adaptable to physical distancing or mask wearing
* Priority will be given to those employees who are in higher risk situations or perform critical function

Higher priority may be given to businesses:

- located near a provincial border,
- in which previous outbreaks have occurred in similar workplace settings,
- where illness in this population of employees would jeopardize critical infrastructure or the flow of essential goods/services,
- where the facility/community/industry is currently experiencing a community outbreak of COVID-19.

Rapid testing programs for different size businesses have been developed by NB Public Health, and we have partnered with organization to be able to offer rapid tests to these organizations. These programs can be accessed [here](#).

Mandatory Testing

Some employers, including the province of New Brunswick, Horizon and Vitalité Health Networks have implemented mandatory testing for employees who are not fully vaccinated. Employees at these workplaces will be responsible for self-administering POC tests and for appropriate follow-up should a positive test result ensue.

Self-Administered POCT

For individuals who will be self administering POCT, through part of a workplace rapid testing program, or due to their vaccination status, tests are most likely self administered. The frequency of these tests may vary by the type of program being implemented, but minimum 2x/weekly and often 3x/weekly is most appropriate.

Testing

Test kits provided by the workplace or the sector needing tests, and instructions on how to self-administer will be provided as an instructional handout or video.

IMPORTANT NOTE: If at any time, the employee develops symptoms of COVID-19 or have been exposed to a confirmed case of COVID-19, they should schedule a PCR test as outlined below. If they have two or more symptoms and are not fully vaccinated, they must isolate while awaiting test results. They may also be asked to isolate by Public Health due to an exposure. Always follow directions of Public Health.

POCT Results

If a test indicates a POSITIVE result, the employee is to self-isolate immediately and schedule a PCR test at a local Assessment Centre. To get tested, complete an online self-assessment at www.gnb.ca/gettestedcovid19 or by calling 811 if unable to access a test appointment online.

You must remain in self-isolation until you received a negative result from the PCR test. For information on self-isolation, go to:

https://www2.gnb.ca/content/gnb/en/corporate/promo/covid-19/self_isolation.html

Note: This is the end of information pertaining to Self-Administered POCT.

POCT Administered by Qualified Test Provider

Roles and Responsibilities

At this stage in the New Brunswick pandemic experience, the best-fitting role for rapid POCT is for asymptomatic serial testing in many different sectors, usually driven by the risk factors within that sector. All qualified test providers must perform certain duties to ensure proper rollout within their facility that will be implementing rapid testing.

Qualified POCT providers in a community-based setting should establish a process to provide safe testing which includes the appropriate use of Infection Prevention and Control (IPC) measures, complete training required by Public Health on the device, and incorporate the testing process into their facility's operational plan. Qualified providers will also create a plan regarding the implementation process in their agency/facility, communication of test results, guidance for the individual being tested, and a robust documentation process.

While rapid testing is not diagnostic in nature, when preliminary (presumptive) positive results occur, there is an expectation that the qualified test provider and client will fulfill certain commitments. The qualified test provider will advise the client to self-isolate; and will book their confirmatory PCR test at a COVID-19 Assessment Centre at: www.gnb.ca/gettestedcovid19 The client is expected to follow these self-isolation directions and complete the PCR testing. The qualified test providers are not responsible to follow up on the client's final test results. Confirmatory testing, contact tracing, and outbreak management are the responsibility of Regional Public Health, under the direction of the Regional Medical Officer of Health.

For specific information about roles and responsibilities, please refer to Appendix A.

Registering Individuals for Periodic POCT

Moving beyond this pandemic will require robust testing strategies, in conjunction with protective layers of public health measures, to ensure the safety of workplaces and communities. Until these processes become implemented and integrated into the workplace culture, locations that provide rapid POCT for COVID-19 may receive direction from the Public Health Act regarding who is required to participate in screening using these devices. This process is subject to change in response to the evolving pandemic conditions.

Prior to performing or supervising the rapid test, qualified provider must confirm:

- client's identity using two identifiers
- client's contact information if needed
- client is aware what is required of them should their sample test positive, as seen in the Client Information Sheet (Appendix C).

Infection Prevention and Control

COVID-19 is an infectious disease that is highly transmissible. Providers must ensure that respiratory droplet and contact precautions are followed for every POCT (See Appendix D Personal Protective Equipment) and that they fully understand and follow proper techniques for use and removal (donning and doffing).

At the POCT site, Public Health measures must always be implemented to ensure that clients:

- maintain 2m physical distancing from others when not being swabbed
- wear a community mask and
- hand sanitize before and after the test.

Qualified providers must also ensure that the equipment and the environment is cleaned/disinfected per WorkSafeNB standards between clients with a [hard-surface disinfectant](#) approved by Health Canada.

Quality Assurance

POCT programs require establishment of ongoing quality assurance practices to ensure accurate device performance over time. Below please find key elements of this process.

Those who provide or supervise the testing process must function within their scope of practice, or ensure there is appropriate oversight to conduct, interpret, and report results. They should also do this in accordance with organizational policies and procedures.

Test providers are responsible for the safe and competent supervision of specimen collection and use of POCT devices. They must undertake training from Public Health by watching one of the training videos provided to attain, maintain and demonstrate the competency required to perform POCT and applicable quality assurance standards for point-of-care use.

- POCT is a rapidly evolving area. It is the responsibility of the test provider to maintain and update skills and training when significant changes are made to POCT procedures and/or devices; and to remain abreast of current Public Health guidance.
- It is recommended that the test provider is familiar with the purpose, accuracy, precision, reliability and quality control procedures of the test.
- All providers of rapid testing programs must have a written operational plan which includes the training required to use POCT equipment, recording all quality control measures; as well as infection prevention control and safety protocols, safe handling of biological specimens, proper disposal of contaminated material or specimens, and the cleaning of contaminated surfaces and equipment.

The quality assurance measures required differ for each device. Further information is available in the product insert for each specific device.

Care Environments

COVID-19 is an infectious disease that can leave people susceptible to stigma and social rejection. Care must be taken to respect the diverse needs of clients, and to deliver services in a culturally safe and appropriate manner.

Clients in a testing situation are inherently vulnerable, and POCT should be delivered with emphasis on relationship-based care. Every client deserves an appropriate level of privacy; where the test provider can provide emotional support and counseling about next steps.

Protocols should be in place to ensure testing is performed safely, and effectively. In a multi-disciplinary care setting, it is recommended that a suitably qualified provider be delegated to oversee POCT services.

Recording Results

Written procedures, guidance and/or instructions should be in place to guide reporting and documentation of results. It is required that results and testing data are recorded in a permanent record. Details should include type of POCT device used, how it was reported to the client, and what follow-up was required. Professional qualifications of test provider may also be documented, if indicated (i.e. Pharmacist, Occupational Health Nurse).

For any tests performed in a pharmacy, documentation of results must meet requirements outlined in the New Brunswick Pharmacy Act. Regulation 23.5(a) to (h). Regulation 17.22.1 (f) also states that the pharmacy will retain written records (where applicable) for two years and then written or electronically for at least 15 years thereafter.

Appropriate federal and provincial regulation on data collection, privacy, security, storage and use requirements must also be met. Please see [Right to Information and Protection of Privacy - New Brunswick \(gnb.ca\)](http://gnb.ca) for further information.

Communicating Results

Please note this section only pertains to facilities or organizations that are utilizing a test provider to administer tests. This is not required if you are self-administering the rapid test.

Method of Communication

After the test result information is logged, the qualified test provider should immediately inform the client of the results. Rapid notification is especially important for positive results. Qualified providers are to use the method of communication (in-person, phone or encrypted email) that was pre-arranged with the client. For all forms of communication, it is essential that the POCT provider confirms the client's identity using at least two identifiers prior to discussing the results.

In Person

Results will be available within 15 minutes; allowing for immediate feedback to clients. Ensure the client has been provided with the Client Information Sheet (Appendix C) for further reference and proof of testing for their workplace or border controls.

Phone call

Initial communication of a positive screen result may be delivered by a phone call. This allows the qualified test provider to reassure the client and give guidance about next steps; as well as allow clients to ask questions.

The phone call should be made using either a company phone or personal phone with the number blocked for privacy. If participant doesn't answer the phone, leave a message requesting the participant call the test provider back. Do not leave a message with the positive results.

Encrypted Email or Text

Regardless of the mode of communication, the digital connection must be initiated by the client, and responded to by the tester to acknowledge receipt of the client's contact. When the results become available, the tester may reconnect with the client digitally asking for confirmation of identity again. Prior to sharing the results and personal health information, the client re-confirms with two identifiers.

If the digital communication is to be used as a proof of testing, items to include in the email communications are listed below.

- Name of employee
- Date of birth of employee
- Type of test – Rapid antigen screening test for Covid-19
- Location, Date and Time of the screen
- Screening results
- Reminder to continue to use Public Health measures: physically distancing, mask wearing, and using effective hand hygiene practices.
- If applicable, remind participant that they will continue to be paid during the time that they are self-isolation.

If an organization doesn't provide paid sick leave remind them that the Canadian federal government has provided the [Canada Recovery Sickness Benefit](#).

Provider Script for Negative Result:

Negative results indicate that the COVID-19 virus was not detected in your sample at the time of the screening. It is very important to remember that these results reflect a point in time only. It is normal to think that you are safe from the virus, however there are instances of false negative results. In addition, should you develop COVID-19 compatible symptoms at any time following a negative test, you need to get retested.

The threat of COVID 19 remains high in New Brunswick with ongoing transmission. It is important to remain extra vigilant with following the Public Health measures while at work and home (i.e. hand hygiene, distancing, wearing your mask and practicing respiratory etiquette) even if your test result is negative.

At this point, all citizens are encouraged to remain committed to following the Public Health measures.

Provider Script for Positive Result:

While this is a preliminary result, it is likely that you have COVID-19. You must go directly home immediately, and self-isolate away from others in your household. You will be required to confirm these results with a second test at the local Assessment Centre By booking at www.gnb.ca/gettestedcovid19

The Assessment Center will send your second sample to the provincial lab to confirm these results. You will be able to obtain your final results in 48-72 hours via MyHealthNB. It is very important to stay on self-isolation until the final results have been received. More information on self isolation can be found at www.gnb.ca/coronavirus.

If the second test is positive, remain on self-isolation and a member of the Public Health team will be in contact with you to provide further information to support your self-isolation and recovery. Even if you do not have any noticeable symptoms, you may still be contagious and can spread the virus to others.

Most people with mild illness will recover on their own. Your health care provider may recommend treatment or steps you can take to relieve symptoms. If your symptoms worsen, and you need to contact 911, inform them that you are waiting for COVID-19 test results.

This is also briefly covered in Appendix E Test Provider Information Sheet.

Provider Script for Indeterminate Results

Your initial sample registered as indeterminate or invalid. This means that the test did not register as negative or positive, and further testing is needed. We will repeat the POCT test immediately. If it continues to provide indeterminate results, you should register for PCR testing at the Assessment Center just to be certain. Should a RT-PCR test be required, please follow the self-isolation instructions provided.

There are a variety of situations that can result in invalid or indeterminate results. Sometimes it arises when too little or too much biological material was present on the swab; and sometimes it indicates that we are testing too early. By completing a PCR test, we will be able to eliminate any uncertainty.

Reporting and Surveillance

If your test result is positive on the follow-up PCR confirmatory testing, the final result will also be reported to Public Health via the Dr. Georges-L. Dumont Lab. Public Health has the ability to identify individuals who may not present for confirmatory PCR testing at the Assessment Center.

In addition, other situations may arise where it would be prudent to consult with Public Health. If a qualified test provider encountered serial or multiple positive samples in one testing session, they should be prepared to examine the context of the situation that led to the positive results. The goal is to rule out the possibility of cross contamination or processing problems. Were the last several positive samples processed back-to-back? Or is there another factor that would reasonably

explain sequential positive results? For instance, were the samples from people who recently returned from travel together? Do these people work in the same area in a facility? Are they from the same household? If it is felt that a cluster of positive cases has been detected, it is recommended that the qualified test provider should contact the Regional Medical Officer of Health for their area. Please see Appendix F for contact information.

As stewards of the federal-provincial partnership for COVID-19 rapid testing devices, the Department of Health will be responsible to provide surveillance on testing activities. To support this process, qualified testing providers will be required to provide high level information regarding the number of tests conducted in their facility and the results obtained on a monthly basis. A reporting form can be found in Appendix G with instructions on how to complete and submit in Appendix H.

Conclusion

The fluid nature of the pandemic requires an adaptive management approach that responds to the changing conditions. It is hoped that the use of rapid POCT to screen asymptomatic individuals will help to expand our understanding of asymptomatic spread within a community and provide further information regarding prevalence of infection among certain sectors.

APPENDIX A: Roles and Responsibilities

Role	Responsibility
NB Department of Health	<ul style="list-style-type: none"> • Provide POCT kits • Provide guidance on what to do with test results • Provide guidance related to testing process
POCT Qualified Provider or Testing Lead	<ul style="list-style-type: none"> • Adhere to all POCT program guidance • Maintain up-to-date competency records • Actively screen prior to POCT • Follow IPC (Contact Droplet) precautions • Follow public health measures as per the Public Health Act • Use the equipment in a safe and responsible manner • Recognize and act on results that require follow up action, including arranging RT-PCR testing appointment • Report results to Public Health per schedule • Store testing data for a minimum of two years
COVID-19 Assessment Center	<ul style="list-style-type: none"> • Obtain sample for RT-PCR confirmatory testing • Send swabs to Dr. Georges-L. Dumont Laboratory • Notify Public Health when presumptive positive client fails to attend RT-PCR testing appointment
Dr. Georges-L. Dumont Laboratory	<ul style="list-style-type: none"> • Conduct clinical verification of rapid POCT devices • Process RT-PCR test. • Ensure assays are available 7 days a week and performed within two days of receiving the specimens • Notify Public Health of positive test results
MyHealthNB	<ul style="list-style-type: none"> • Provide individual results of RT-PCR test
SNB	<ul style="list-style-type: none"> • Communicate RT-PCR results if not accessed by individual via MyHealthNB
Public Health	<ul style="list-style-type: none"> • Provide outbreak management in all facilities and communities • Manage contact tracing and active daily monitoring • Support self-isolation and care of individuals who test positive • Advise individuals when self-isolation completed

APPENDIX B: Community COVID-19 Screening Tool











Consent Form

Community Rapid COVID-19 Testing Screening Tool & Testing Information

Date _____ Time _____

Initial appropriate boxes: Telephone screen In-person screen

NOTE: This screening is not screening for seasonal or environmental allergies but meant to capture new symptoms or worsening of long-term symptoms.

Check yes or no to the questions below:	Yes	No
Do you have any of the following symptoms that are not related to a known pre-existing health condition (i.e. seasonal allergies)?		
 Fever		
 Cough (or worsening cough)		
 Diarrhea		
 Loss of sense of smell and taste		
 In children, purple markings on the fingers and toes		
 Runny nose		
 Sore throat		
 Muscle pain		
 Headache		
 Fatigue/exhaustion		
Have you been advised by Public Health, a health-care provider or a peace officer that you are currently required to self-isolate?		
Are you waiting for a COVID-19 test or COVID-19 test results AND have been told you need to self-isolate?		
Have you travelled outside of New Brunswick in the past 14 days (unless exempt from self-isolation)?		
Has an individual in your household returned from outside of New Brunswick in the past 14 days for any reason, and now someone within the household has developed one or more symptoms of COVID-19 as listed above?		
Have you tested positive for COVID-19 in the past 12 weeks?		
Test site signature:	Client Signature:	

APPENDIX C: Client Information Sheet

Client Information Sheet

Rapid COVID-19 Screening

You have agreed to participate in a rapid screening for COVID-19. A swab will be used to obtain a sample, and results will be available within 15 minutes.

If my results are positive for COVID-19:

While this is a preliminary result, it is likely that you have COVID-19. You must go directly home immediately, and self-isolate away from others in your household. If you have been tested by a test provider in your workplace, the test provider will register you for a test with your local Assessment Center to confirm these results. The Assessment Center will call you at home with this appointment time. If you have performed a self-swab at your place of work, you are responsible to read your result and if it is positive, follow instructions to self-isolate and book a test at an Assessment Centre www.gnb.ca/gettestedcovid19.

This second sample will be sent to the provincial lab to confirm these results. You will be able to obtain your final results in 48-72 hours via MyHealthNB. It is very important to stay on self-isolation until the final results have been received. More information on self isolation can be found at www.gnb.ca/coronavirus.

If the second test is positive, a member of the Public Health team will be in contact with you to provide further information to support your self-isolation and recovery. Even if you do not have any noticeable symptoms, you may still be contagious and can spread the virus to others.

Most people with mild illness will recover on their own. Your health care provider may recommend treatment or steps you can take to relieve symptoms. If your symptoms worsen, and you need to contact 911, inform them that you are waiting for COVID-19 test results.

If my results are negative for COVID-19:

Negative results indicate that the COVID-19 virus was not detected in your sample at the time of the screening. It is very important to remember that these results reflect a point in time only. It is normal to think that you are safe from the virus, however there are instances of false negative results. In addition, should you develop COVID-19 compatible symptoms at any time following a negative test, you need to get retested.

The threat of COVID 19 remains high when the region is in the orange, red or lock down phase of recovery; or after traveling to areas outside New Brunswick with high case numbers. It is important to remain extra vigilant with following the Public Health measures while at work and home (i.e. hand hygiene, distancing, wearing your mask and practicing respiratory etiquette) even if your test result is negative. Until the province returns to green phase of recovery, all citizens are encouraged to remain committed to following the Public Health measures.

If my results registered as indeterminate or invalid:

This means that the test did not register as negative or positive, and further testing is needed. The POCT test should be repeated immediately. If it continues to provide indeterminate results, you should register for PCT testing at the Assessment Center just to be certain. Should an RT-PCR test be required, please follow the self-isolation instructions provided.

APPENDIX D: Personal Protective Equipment

Personal Protective Equipment (PPE)

***NOTE: Qualified testing leads who are supervising those who are self administering the rapid test DO NOT need to use PPE. This section does not apply to them.**

PLEASE NOTE: Qualified Providers of rapid tests must follow PPE practices if they are administering rapid tests to others.

This includes:

- medical grade, non-latex, non-sterile gloves;
- long-sleeved gown;
- surgical/procedural mask with visor attachment (or appropriate goggles).

Qualified Providers are to change PPE between clients. Please see video instruction on how to properly [don PPE](#) and [doff PPE](#).

Individuals coming for rapid testing are to wear a community mask. Removal of the mask is only permitted during the act of obtaining the sample required.

Hand hygiene

Hand hygiene should always be performed

- Upon entering the clinical environment
- Before contact with a client and donning personal protective equipment (PPE)
- Immediately after removing gloves and personal protective equipment (PPE)
- Upon departure from the clinical environment

Handwashing with soap and water is the preferred method and to be used when hands are visibly soiled. If soap and water is not available, a handwashing with an [approved alcohol-based hand sanitizer](#) for COVID-19 is required.

Gown

Isolation gowns can be reusable or disposable. They should have long-sleeves, cover the body front and back from the neck to the thighs, overlap in the back, fasten at the neck and back and be easy to put on and take off.

Disposable isolation gowns are typically fabricated from nonwoven materials or in combination with materials that offer increased protection from liquid penetration, such as plastic films. Various forms of synthetic fibers (e.g., polypropylene, polyester, polyethylene) are used for the construction of disposable isolation gowns.

Reusable (multiuse) isolation gowns are laundered after each use and typically made of tightly woven 100% cotton, 100% polyester, or polyester-cotton blends. They are usually chemically finished and may be pressed through rollers to enhance the liquid barrier properties. Reusable isolation gowns must be removed after every client and placed into an appropriate container for laundering between clients.

Masks

Surgical/Procedural masks are considered appropriate to prevent transmission of viral respiratory infections that spread primarily by large droplets. Masks are to be changed between each patient contact and changed if crushed, wet, or contaminated by a patient or one's secretions.

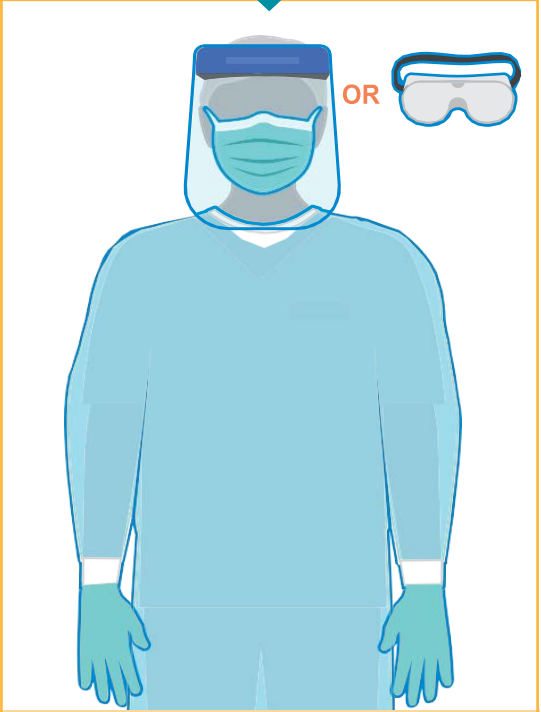
Protective eyewear

Protective goggles or face shield is to be worn to prevent exposure to the conjunctiva of the eyes from respiratory droplets that could possibly contain the virus.

Gloves

Medical grade, non-latex, nonsterile gloves are to be worn, covering the sleeve cuffs of the provider's gown. Gloves are not to be washed or re-used for more than one client.

Contact Droplet Precautions



- surgical / procedure mask
- eye protection
- gloves
- gown

APPENDIX E: Test Provider Information Sheet

Panbio™ COVID-19 Ag Rapid Point-of-care Test Information Sheet

Point-of-care Testing (POCT) refers to patient testing activities provided outside the laboratory, performed by workers whose primary training is not in the clinical laboratory sciences.

What is Panbio™ COVID-19 Ag POCT?

Panbio™ COVID-19 Ag is a rapid antigen test that produces a result on-site within 15 minutes. It is considered a screening device because positive results require confirmatory lab-based testing.

Why is Panbio™ COVID-19 POCT available now?

These units were recently approved for use in Canada by the federal government. Provinces and territories were provided with an allotment, and the autonomy to determine device location and how to use them in their clinical decision-making process.

How is the Panbio™ COVID 19 Ag POCT different from a conventional RT- PCR test?

A RT-PCR test is the gold-standard molecular-based test for diagnostic purposes with both asymptomatic and symptomatic individuals. RT-PCR testing is performed at the Dr. Georges-L. Dumont Lab in Moncton, with results available in approximately 48-72 hours.

While the **Panbio™ COVID-19 Ag** test is faster, less expensive, and can be performed by non-lab personnel; there are limitations. It is more likely to give false negative and false positive results, so anyone who tests positive is required to have RT-PCR testing to confirm their diagnosis. For this reason, it is best used as an antigen-based screening device.

Why are Panbio™ COVID 19 Rapid Antigen Test devices appropriate for community or workplace use?

- Panbio™ can be used in the workplace or community to screen asymptomatic individuals
- Non-healthcare -based testing has the potential to socialize individuals to the idea of regular testing to prevent future outbreaks.
- Critical infrastructure or industry will have an added protective measure to support the safety of the workplace
- Workplace or community-based screening practices help to conserve laboratory resources, as only presumed positive results would need a PCR test.

What happens after a positive result from Panbio™ COVID-19 Ag?

This is a preliminary result that will be confirmed with PCR testing, but in the meantime, they are considered a case. They must return home immediately, self isolate away from other household members and get tested: www.gnb.ca/gettestedcovid19

The second specimen obtained at the assessment center will be sent to the Dr. Georges-L. Dumont Lab for confirmatory (RT-PCR) testing. The client will be able to access their confirmatory

results within 48-72 hours online at MyHealthNB; or they will be called by a representative from Public Health if they do not have online access.

If the sample tests negative using Panbio™ COVID-19, what will happen next?

The client is “Negative for now”, as the test reflects only a point in time. They should continue following the Public Health measures in the workforce and at home; distancing, mask wearing, hand washing and monitoring for signs and symptoms of COVID-19.

What precautions are test sites required to take while conducting Panbio™ COVID-19 testing?

When tests are being administered by a test provider and not self-administered, respiratory droplet and contact precautions should be followed during testing (mask, eye protection, gloves and gown). Public Health measures are also required to be followed, ensuring that distancing of 2m between individuals, avoiding line ups, mandatory masking, accessible hand sanitizing stations and cleaning/disinfecting between clients accessing the testing.

What needs to be documented?

Pharmacies conducting testing will meet requirements outlined in Regulation 23.5(a) to (h). Other testing sites are required to document:

- Client’s name and address
- Type/name of test
- Assessment Center appointment booking (if positive)
- Person who conducted the testing
- Date and time of testing; time results were received
- Date the results were provided to the patient and any other health care professionals.

APPENDIX F: Public Health Communicable Disease Team Contact List

Contact information for the RHA Public Health Offices is listed below and is also available on the Office of the Chief Medical Officer of health's website:

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy_people/content/public_health_clinics.html

Department of Public Safety Public Health Inspectors	Regional Health Authority Public Health Nurses
Central Region Fredericton (Regular hours): Main office (506) 453-2830 Communicable Disease Line (506) 444-5905	Zone 3 - Fredericton (Regular hours): Main office (506)453-5200 Communicable Disease Line (506) 444-5905
South Region Saint John (Regular hours): Main office (506) 658-3022 Communicable Disease Line (506) 658-5188	Zone 2 - Saint John (Regular hours): Main office (506) 658-2454 Communicable Disease Line (506) 658-5188
East Region Moncton (Regular hours): Main office (506) 856-2814 Communicable Disease Line (506) 856-3220	Zone 1 - Moncton (Regular hours): Main office (506) 856-2401 Communicable Disease Line (506) 856-3220 Zone 7 - Miramichi (Regular hours): Main office (506) 778-6756 Communicable Disease Line (506) 778-6104
North region Edmundston (Regular hours): Main office (506) 737-4400 Campbellton (Regular hours): Main office (506) 789-2549 Bathurst (Regular hours): Main office (506) 549-5550	Zone 4 - Edmundston (Regular hours): Main office: (506) 735-2065 Communicable Disease Line: (506) 735-2626 Zone 5 - Campbellton (Regular hours): Main office phone number: (506) 789-2266 Communicable Disease Line (506) 790-4769 Zone 6 - Bathurst (Regular hours): Main office phone number: (506) 547-2062 Communicable Disease Line: (506) 547-2067

Note: Regular hours are 8:15 am – 4:30 pm Monday-Friday.

APPENDIX G: Reporting Form Process and Dictionary

COVID-19 Rapid Testing Report Form

Please complete and return to Public Health New Brunswick through the Rapid Testing inbox (RapidTestRapide@GNB.ca) within 72 hours following the end of the reporting month.

Site Name: _____

Site Location: _____

Frequency of testing: _____

For Public Health to complete		
Region:	1 <input type="checkbox"/>	2 <input type="checkbox"/>
	3 <input type="checkbox"/>	4 <input type="checkbox"/>
	5 <input type="checkbox"/>	6 <input type="checkbox"/>
	7 <input type="checkbox"/>	

Reporting Month: _____

Tests received from GNB in the reporting month: _____

Testing Session		Number of Tests that are:			
Period of Test Reporting	Purpose of Test (e.g. Regular border crosser, workplace testing etc)	Positive	Negative	Inconclusive	Confirmed
Total tests:					

Tests remaining: _____

Completed by: _____

Contact information: _____

COVID-19 Rapid Testing Report Form Process and Dictionary

Sites are to conduct monthly data collection on high level information regarding the number of tests completed, their purpose, and their results. Forms are to be completed and returned to Public Health New Brunswick monthly through the CDC Unit Inbox. Individual testing sessions can be record on each line of the form.

A testing session is defined by the date it was conducted, the purpose of the testing and the type of swabs used. Multiple lines should be used if more than one testing session is conducted in a given day.

Variable	Definition
Site Name	The name of the site conducting the tests
Reporting Period	The time frame during which data are being reported.
Site Location	The town or community where the site is
Region	The region the site is in
Frequency of testing	How frequently the site is conducting tests on individuals. E.g. daily, weekly, every 3 days.
Tests used in the reporting period	How many tests the site used during the reporting period.
Tests remaining at the end of the reporting period	Report how many tests remain at a site at the end of the reporting period.
Tests received from GNB in the reporting period	How many tests GNB supplied the site in the reporting period. If the site is reporting their first period, then they can report how many tests they have received to date.
Period of Test Reporting	The time frame during which the testing session was completed. (yyyy-mm-dd to yyyy-mm-dd)
Purpose of Test (e.g. Regular border crosser, workplace testing, etc.)	Records the purpose for conducting the testing session. If there is more than one purpose of testing in this session, report the additional purpose(s) in a new line (e.g. testing while entering work in one line and testing while leaving work in another line)
Swab type	The type of swab used for the test session. If there is more than one type of test used in a given session, report the other test(s) in a new line
Number of Tests that are positive	The total number of tests that had a positive result
Number of Tests that are negative	The total number of tests that had a negative result
Number of Tests that are inconclusive	The total number of tests that had an inconclusive result

References

Alberta Health Services (2021) COVID-19 Scientific Advisory Group Rapid Response Report. Accessed: [Comparison of Testing Sites Rapid Review \(albertahealthservices.ca\)](https://albertahealthservices.ca/Comparison-of-Testing-Sites-Rapid-Review)

CADTH (December 2020) CADTH Horizon Scan: Rapid Point-of-care Testing for COVID-19. Accessed at: [Rapid Point-of-Care Testing for COVID-19 \(cadth.ca\)](https://cadth.ca/Rapid-Point-of-Care-Testing-for-COVID-19)

CDC (February 5, 2021). Guidance for SARS-CoV-2 Point-of-Care Testing. [Guidance for SARS-CoV-2 Point-of-Care Testing | CDC.](https://www.cdc.gov/media/releases/2021/s020521-covid-19-testing.html)

European Center for Disease Prevention and Control (2020). Technical Report: Options for the use of rapid antigen tests for COVID-19 in the EU/EEA and the UK. Accessed at: [https://www.ECDC.europa.eu/en/publications-data/options-use-rapid-antigen-tests-covid-19-eueea-and-uk.](https://www.ecdc.europa.eu/en/publications-data/options-use-rapid-antigen-tests-covid-19-eueea-and-uk)

Government of Alberta (September 28, 2020) Guidance for Industry-Initiated COVID-19 Testing. Accessed: [Guidance for Industry-Initiated COVID-19 Testing \(alberta.ca\)](https://alberta.ca/guidance-for-industry-initiated-covid-19-testing)

Government of Canada (2021). Interim guidance on the use of rapid antigen detection tests for the identification of SARS-CoV-2 infection. February 21, 2021. Accessed at: [Interim guidance on the use of rapid antigen detection tests for the identification of SARS-CoV-2 infection - Canada.ca](https://www.canada.ca/en/health-canada/services/covid-19/interim-guidance-on-the-use-of-rapid-antigen-detection-tests-for-the-identification-of-sars-cov-2-infection-2021-02-21.html)

Government of Canada (2021). Testing Devices for COVID-19. February 19, 2021 Accessed at: [Testing devices for COVID-19: Point-of-care and self-testing devices - Canada.ca](https://www.canada.ca/en/health-canada/services/covid-19/testing-devices-for-covid-19-point-of-care-and-self-testing-devices-2021-02-19.html)

Ontario Ministry of Health. February 17, 2021. COVID-19 Guidance: Considerations for Rapid Antigen Point-of-Care Screening Version 2.0 Accessed [COVID-19 Guidance: Considerations for Rapid Antigen Point-of-Care Screening \(gov.on.ca\)](https://www.ontario.ca/gov/covid-19-guidance-considerations-for-rapid-antigen-point-of-care-screening)

Province of British Columbia. May 1, 2020. Community based point-of-care testing policy. Accessed at: <https://www2.gov.bc.ca/gov/content?id=3C3DC55785654FC896F0E105A3E65ED4>

Venner, A., Beach, L., Shea, J., Knauer, M., Huang, Y., Fung, A., Dalton, J., Provencal, M., Shaw, J. Quality assurance practices for point-of-care testing programs; Recommendations by the Canadian society of clinical chemists point-of-care testing interest group, Clinical Biochemistry, Volume 88, 2021, Pages 11-17. Accessed <https://doi.org/10.1016/j.clinbiochem.2020.11.008>