

Information update for all *General Practice, Urgent Care & Community Pharmacy teams*

- Please share this with everyone in your team -

Thank you to everyone who attended the vaccination update webinar on Tuesday. This was attended by over 300 people! We will be working through the remaining questions over the next week and these will be published along with a copy of the webinar in case you were unable to attend. Key update messages today;

Covid Vaccine

News released today means the first vaccines will be available in NZ for category 1 (MIQ/Border & close contacts) from Saturday 20 February. Planning is well underway for when the vaccine arrives in Canterbury which is expected to be from 24 February. CPRG plans to provide regular vaccine updates starting from next week.

Swabbing

Please continue your excellent efforts in offering swabbing to everyone who presents with COVID-19 symptoms. We have seen a drop off in numbers over the summer, which is to be expected, with a decrease in circulating viral illness. We would like to see these coming back up to baseline if possible.

Swabbing Technique

The Ministry of Health have enquired about quality control for swabbing technique in both MIQ/border testing and community testing. We have a robust process in place at the testing centres but it is an opportune time to check in with your swabbing staff to ensure a good technique.

Attached is the CHL guide for swabbing in primary care. It is important to note that in the past there was a video available that indicated the need to stay in the nasopharynx for 10 seconds. This video has been removed and you do not need to stay in this position for this length of time. You should make sure you insert the swab far enough to meet resistance. You then need to make 1.5-2 gentle rotations and then remove. This is adequate to gather the required material for testing and does not cause undue discomfort for the patient.

We will be aiming to make a training video in the near future and will publish this when it is available.

MMR catch-up and COVID-19 vaccination

If you are performing an MMR catch up vaccine in the 15-30 year old age group, please check if they are a border worker covered by the testing order.

If they are, their MMR vaccine should be delayed and should not take place until 4 weeks after they have completed their COVID-19 vaccine second dose. Their COVID-19 vaccine should take priority over the MMR catch up.

Pre-travel testing

The number of and requirements of pre-travel tests are increasing. To support the labs in processing these test, this is a polite reminder to make sure that the labs forms include the following information:

- Date and time the sample was collected
- Destination of travel and time of flight departure

Changes to PPE Use

The MoH have updated their risk assessment guidelines for interactions with people of unknown COVID-19 status (See attached flowchart). If you have HIS patients presenting with or without symptoms the advice is to provide the patient with a medical mask.

Kind regards,

Martin Carrell
Response Manager

Dr Hannah Gordon
GP Clinical Lead




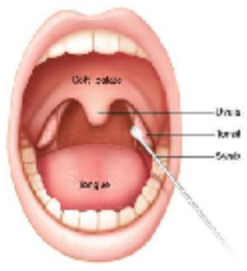
Aki Tominari
Pharmacy Lead

COVID-19

INSTRUCTIONS ON SPECIMEN COLLECTION – FOR PRIMARY CARE USE

Updated 4 June 2020

As global supply chains remain fragile, multiple swab options may be in circulation for COVID-19 testing.
A NASOPHARYNGEAL SWAB PLACED INTO A VIRAL TRANSPORT MEDIA (VTM) REMAINS THE OPTIMAL SPECIMEN OF CHOICE.

OPTION 1. INSTRUCTIONS ON NASOPHARYNGEAL SPECIMEN COLLECTION (PREFERRED)	
<p>Nasopharyngeal swab in Viral Transport Media</p>  <p>Adult: orange top swab / Paediatric: white top swab</p>	
<ol style="list-style-type: none"> 1. Wear appropriate PPE <i>This includes disposable, fluid resistant long-sleeved gown, gloves, surgical mask, and eye protection.</i> 2. ENSURE PATIENT BLOWS NOSE PRIOR TO COLLECTION. 3. Using a synthetic fibre-tipped nasopharyngeal swab, insert swab into one nostril. For adequate collection the swab tip must extend well beyond the anterior nares until some resistance is met (see diagram). 4. Press on swab tip and rotate the swab tip several times across the mucosal surface to collect cellular material. 5. Break swab into VTM provided. Ensure there is no leakage. Follow steps 6 & 7 below to complete. 	
OPTION 2. INSTRUCTIONS OF OROPHARYNGEAL + DEEP NASAL SPECIMEN COLLECTION	
	
<ol style="list-style-type: none"> 1. Wear appropriate PPE. <i>This includes disposable, fluid resistant long-sleeved gown, gloves, surgical mask, and eye protection.</i> 2. Use a tongue depressor to hold the tongue out of the way. 3. Using a viral oropharyngeal swab (DO NOT use standard bacterial swabs), swab BOTH tonsillar beds. Ensure the swab does not touch the tongue. 4. Using the SAME SWAB, insert into one nostril until resistance is met (this swab is too large to reach the nasopharynx) and rotate a few times. Repeat for the other nostril. 5. Insert into VTM tube provided (green top swab comes with tube with sponge at the bottom; other oropharyngeal swabs may come with same VTM tubes as nasopharyngeal swabs). 6. Label specimen with patient's name, date of birth AND/OR NHI number, and collection time and date. 7. Enclose the request form (must include clinical history, including symptoms and relevant travel/contact history) with your specimen and send via your usual collection service. 	

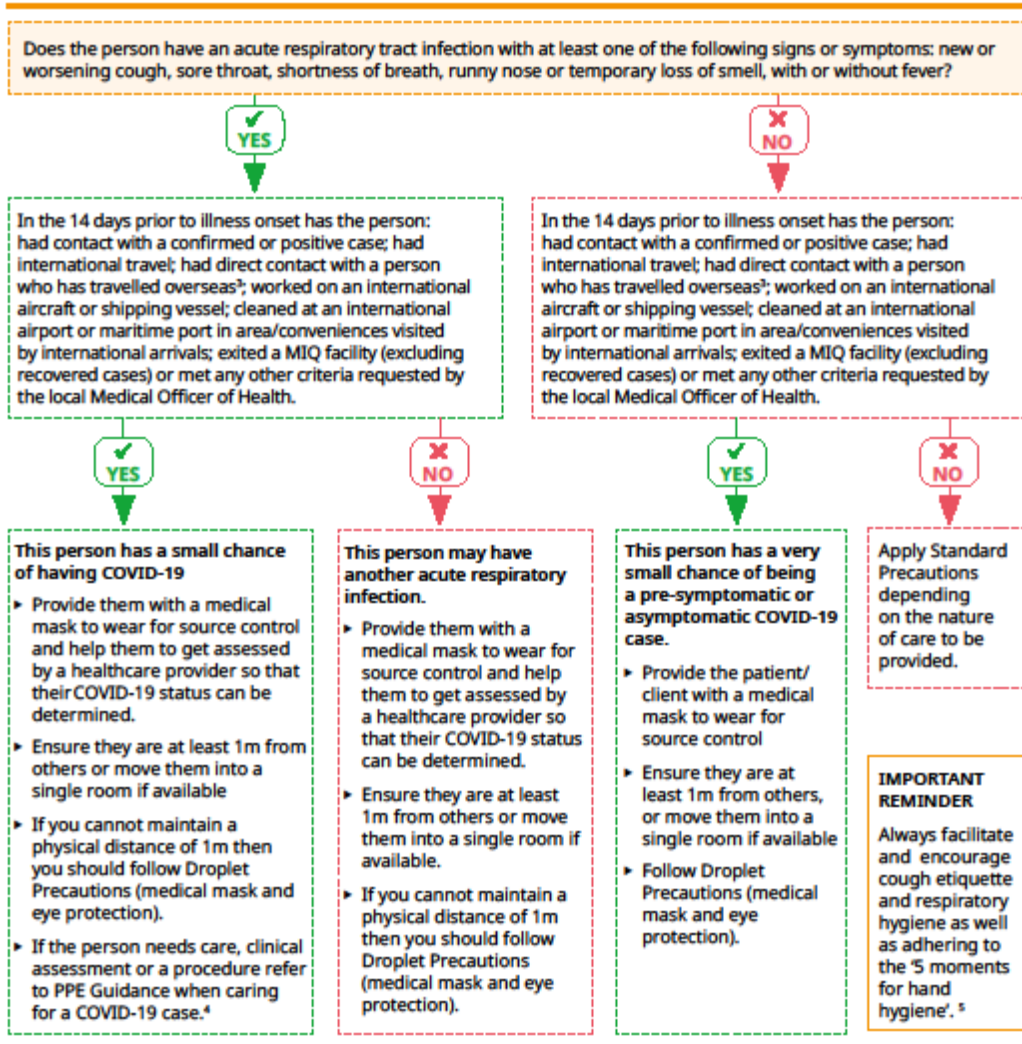
COVID-19

ALERT LEVEL 1: HEALTH AND DISABILITY SECTOR RISK ASSESSMENT FOR INTERACTIONS WITH PEOPLE OF UNKNOWN COVID-19 STATUS.

This is a risk assessment for the first point of contact with people whose COVID-19 status is unknown. Please ask the questions before contact with the person if possible (by phone or signage); otherwise maintain physical distancing of at least 1 metre when asking them.¹

No matter what the person's COVID-19 status is, follow Standard Precautions for all care.² Also, refer to your organisational Infection Prevention and Control Guidance.

Note: The risk of community transmission is very low at Alert Level 1.



1. This assessment will determine what additional IPC precautions are required.

2. Refer to Frequently Asked Questions about PPE www.health.govt.nz/ppe-health

3. This includes Customs and Immigration staff and all staff at managed isolation/quarantine facilities

4. www.health.govt.nz/ppe-health

5. Hand Hygiene New Zealand resources <https://www.hqsc.govt.nz/our-programmes/infection-prevention-and-control/projects/hand-hygiene/>