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To / Destinataire Lori Clarke, Danielle McLennan, Dr. / D^r Richard Garceau, Dr. / D^r Guillaume Desnoyers, Dr. / D^{re} Louise Thibault

From / Expédition Dr. / D^{re} Cristin Muecke, Deputy Chief Medical Officer / Médecin-hygiéniste en chef adjointe

Copies Dr. / D^{re} Jennifer Russell, Heidi Liston, Jeff McCarthy, Penny Higdon, Louis-Alexandre Jalbert, Regional Medical Officers of Health / médecins-hygiénistes régionaux; Janique Robichaud-Savoie

Subject / Objet **COVID-19 Laboratory Processing Prioritization Scheme / Ordre de priorité pour les tests de dépistage de la COVID-19 dans les laboratoires**

Like other jurisdictions, New Brunswick is anticipating and planning for an increase in COVID-19 and other respiratory illnesses as schools reopen and we move into the fall.

During the summer months a variety of testing initiatives have been implemented to monitor for COVID-19 activity and maintain laboratory testing numbers in the absence of community transmission or significant importation.

Testing of symptomatic people, with associated comprehensive case management and contact tracing, remains the most effective means to control COVID-19 transmission, while asymptomatic and other sentinel testing has more limited value.

Please see the attached prioritization scheme which outlines the Office of the Chief Medical Officer of Health's priority testing groups should

Comme d'autres provinces, le Nouveau-Brunswick prévoit une augmentation du nombre de cas de COVID-19 et d'autres maladies respiratoires et se prépare en conséquence alors que les écoles rouvrent et que l'arrivée de l'automne est imminente.

Pendant les mois d'été, diverses initiatives de dépistage ont été mises en œuvre pour surveiller l'activité de la COVID-19 et maintenir le nombre de tests de laboratoire en l'absence de transmission communautaire ou d'importation considérable.

Les tests de dépistage chez les personnes symptomatiques, ce qui comprend une gestion complète des cas et la recherche des contacts, restent les moyens les plus efficaces de contrôler la transmission de la COVID-19. Quant aux tests chez les personnes asymptomatiques et le dépistage sentinelle, leur valeur est plus limitée.

Veuillez consulter le document ci-joint du Bureau du médecin hygiéniste en chef. Il décrit les groupes qui auront la priorité de traitement

there be either a surge of samples or a shortage of laboratory resources.

pour le dépistage s'il devait y avoir une augmentation du nombre d'échantillons ou une pénurie de ressources de laboratoire.

A handwritten signature in black ink, reading "Cristin Muecke". The signature is written in a cursive style with a large initial 'C'.

Dr. / D^{re} Cristin Muecke, MD, MSc, FRCPC / M.D., M.Sc., FRCPC
Deputy Chief Medical Officer of Health / Médecin-hygiéniste en chef adjointe

NB COVID-19 TESTING PRIORITIZATION SCHEME

Phase 1 summer 2020 - 3 lanes of testing

- Symptomatic – any one of nine symptoms, self isolation if two or more
- Targeted asymptomatic – travel related or working with vulnerable populations/settings
- Sentinel asymptomatic – ER and hospital admission

Phase 2 fall/winter 2020

- Threats to processing capacity include:
 - surge of symptomatic cases due to concurrent increase in URTIs/influenza or COVID-19 or both
 - increase in outbreaks in facilities, schools, other settings causing surge on PH case and contact tracing but still containable
 - introduction of sustained COVID-19 community transmission in one or more areas of NB
 - limitations in supply of reagents, swabs, human resources

Should capacity be threatened (*when lab processing approaches 2,000 tests/day*) the following is the priority order for processing samples:

1. Public health priority testing – outbreak and cluster control, ordered by regional PH/RMOH, whether symptomatic or asymptomatic; may be GeneXpert, PCR, or serology
2. Symptomatic staff and residents in nursing homes/ARF, institutional (including corrections) or group living (including shelters, dormitories)
3. Symptomatic with known exposure through travel or any other event (if not otherwise identified by PH)
4. Symptomatic health care professionals, first responders, staff and patients in hospitals
5. Symptomatic members of Indigenous communities
6. Symptomatic teachers, school personnel, daycare workers, children and youth in school
7. Any symptomatic person who doesn't fit in the previous categories
8. Asymptomatic mandatory due to travel – TFWs, locums/medical residents, international students
9. Asymptomatic working in vulnerable setting – COVID unit, nursing home/ARF, corrections, shelter, school or daycare
10. People requiring test for travel or asymptomatic voluntary testing due to travel (long haul truckers, out of Atlantic bubble Canadian post secondary students)
11. Sentinel surveillance samples from ER and hospitals