



Lab-Based COVID-19 Testing for Pharmacies

Thursday, December 2, 2021 9:30-10:30 am
or Tuesday, December 7, 2021 4:00-5:00 pm

Antoine Corbeil, MD FRCPC
Medical Microbiologist
Public Health Ontario

Objectives

By the end of this session, you will understand:

- Changes in availability of lab-based COVID-19 testing in pharmacies
- How to assemble and handle kits for on-site collection or self-collection
- How to collect specimens for COVID-19 testing on site or at home
- How to complete the requisition form for COVID-19 testing
- How to safely package and transport specimens to the lab
- How to receive results and perform the appropriate follow-up actions

Note: This document is intended to provide general information only to pharmacies on specimen collection and handling for lab-based PCR COVID-19 tests. It is not intended to provide medical or legal advice. This document is up to date as of the time of presentation. As guidelines changes, participants are encouraged to visit the [Ministry of Health's COVID-19 website](#) regularly for updates to [COVID-19 symptoms](#) and [Public Health Ontario resources](#).

Expansion of lab-based PCR testing in pharmacies

- Ontario publicly-funded COVID-19 testing is a voluntary program for pharmacies as part of the [Ontario Enhancing COVID-19 Winter Testing](#) news release on November 18, 2021.
- Select sites may be eligible to provide services at no cost to individuals meeting provincial criteria for lab-based PCR testing (see [COVID-19 Provincial Testing and Clearance Guidance](#)) including:
 - Specimen collection on site, and/or
 - Handling of self-collected specimens for lab-based testing.
- Sites must be registered through the Ministry of Health program to provide services related to publicly-funded COVID-19 testing.

General principles of lab-based COVID-19 testing

- A specimen is collected from the patient and sent to the lab where polymerase chain reaction (PCR) testing occurs.
- PCR testing is highly sensitive when a good quality specimen is provided to the lab.
 - Proper specimen collection, labelling, packaging, and shipping are all essential steps for adequate testing.



- Responsibility of the pharmacist to ensure sample quality is maintained and results are correctly acted upon.

Test kit preparations for specimen collection

Ordering Clinician (required)
Surname, First Name
ONPCP(SO) Pract. License No.
Address
Postal Code
Phone: (519) 855-8555 Fax: (519) 855-8555

Hospital Lab (for entry into LIS)
Hospital Name
Address (if different from ordering clinician)
Postal Code
Phone: (519) 855-8555 Fax: (519) 855-8555

Other Clinician or ICH
Surname, First Name
ONPCP(SO) Pract. License No.
Address
Postal Code
Phone: (519) 855-8555 Fax: (519) 855-8555

7 - Patient Setting / Type
 Assessment Centre Family Shelter / Home Outpatient / ER not admitted
Only if applicable, indicate the group:
 Healthcare worker Institution / all group living settings
 Inpatient (hospitalized) Custodian (for use ONLY by a COVID testing kit). Enter your reach (REG-POL or REG)
 Inpatient (ICU / CCU)
 First Aid / First
 Unhoused / Shelter For elements of disease
 CH - In hospitalization Other (Specify)

8 - Clinical Information
 Asymptomatic Symptomatic
Date of symptom onset: 2022 / 00 / 00
 Fever / temperature if known Pneumonia
 Cough

Last Name
First Name
Date of BIRTH: 2000 / 00 / 00 Sex: M F
Address
Postal Code
Patient Phone No.: (519) 855-8555
Investigation / Outbreak No.
3 - Travel History
Travel to:
Date of Travel: 2022 / 00 / 00 Date of Return: 2022 / 00 / 00
4 - Exposure History
Exposure to probable, or confirmed case? Yes No
Exposure details:
Date of exposure onset of contact: 2022 / 00 / 00
5 - Test(s) Requested
 COVID-19 Virus Respiratory viruses check ONLY if required for hospitalized patient or those in group setting



Examples of different types of swab-based specimen collection kits

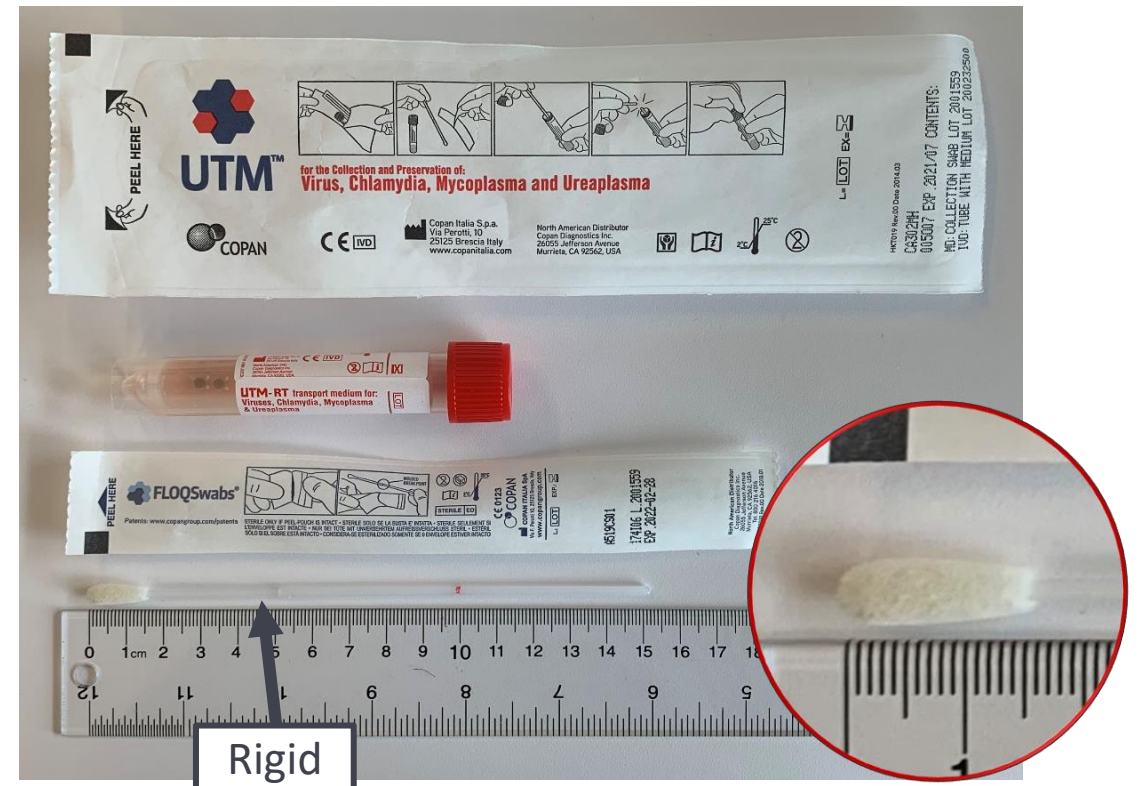
A) Kit with nasopharyngeal (NP) swab and transport media tube

Uses: NP sampling



B) Kit with nasal or throat swab and transport media tube

Uses: combined oral-nasal or nasal sampling



COVID-19 swab test kit components

*Note: To obtain the listed supplies, please submit your order via the following link: <https://ehealthontario.on.ca/en/health-care-professionals/digital-health-services>

Sterile swab*

Biohazard bag

Test requisition

Public Health Ontario Sante Publique Ontario Ontario Health

COVID-19 oral and nasal specimen collection

Instructions

- Wash hands and open the biohazard bag to remove the specimen tube and packaged swab.
- ***Required for test completion**
- Label the specimen tube with the date of collection, your full name and either your Health Card Number (required for accessing results online) or date of birth.
- Complete all required fields of the COVID-19 test requisition.

Follow the specimen collection instructions below:

- Remove the swab from the package, keeping the swab tip clean.
- Insert swab between the cheek and lower gums and rotate swab 3 times.
- Repeat on other side of mouth.
- Tilt head back and insert the same swab about 1.5 to 2.5cm straight back (not up) into nostril. Stop when you meet resistance.
- Rotate swab several times against the wall and leave in place for several seconds to absorb specimen.
- Using the same swab, repeat on other nostril.
- Immediately place swab inside specimen tube containing transport liquid, break swab at breakpoint and close cap tightly.

Note: Do not drink the transport liquid as it may be harmful if ingested.
- Place the closed specimen tube in the biohazard bag with the fully completed test requisition placed inside the bag's external pouch.
- Wash your hands and refer to school guidance for test drop-off locations.

***Please keep at room temperature and return within 2 hours of collection.**

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Collection info sheet (self-collection kits only)

For sites assembling self-collection kits for distribution

Prior to assembling a self-collection kit:

- Perform hand hygiene
 - Wearing gloves is recommended to limit potential cross-contamination.
- Select a clean area
 - Ideally separate from patient testing area.
- Check expiry dates on both the tube and the swab.
- Transport media in the tube should be clear and red, orange or pink.



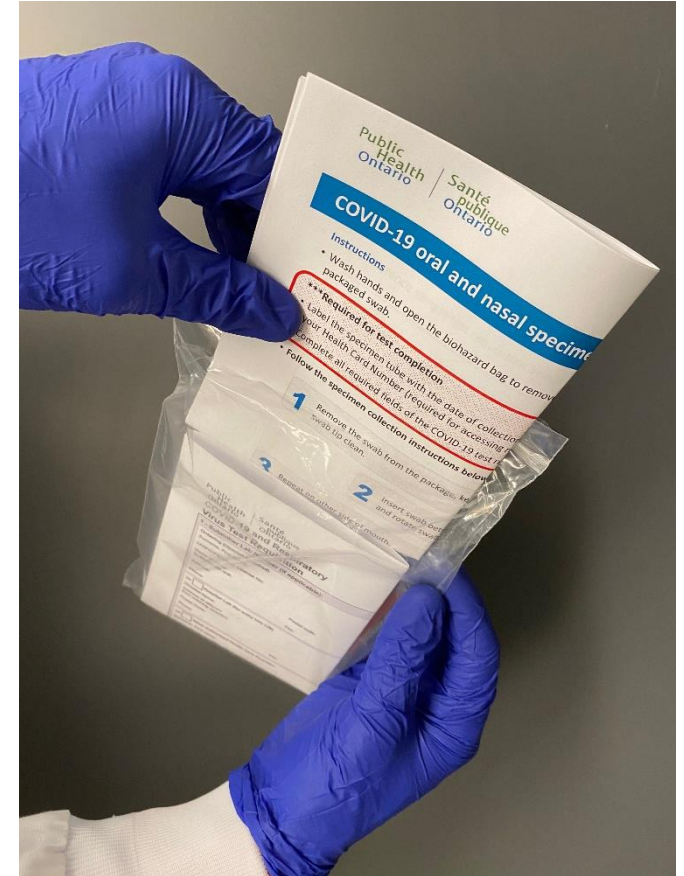
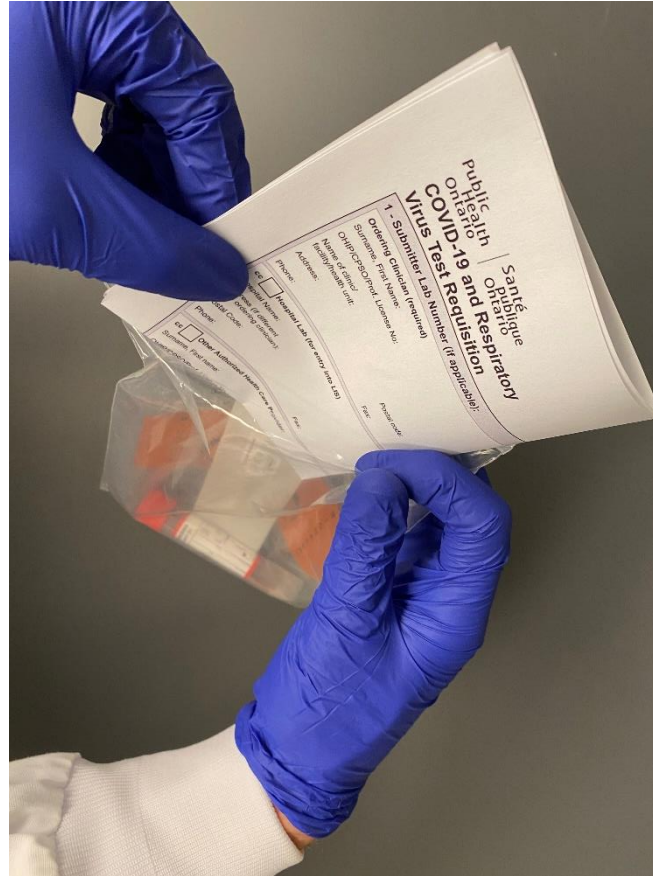
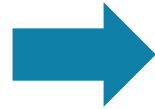
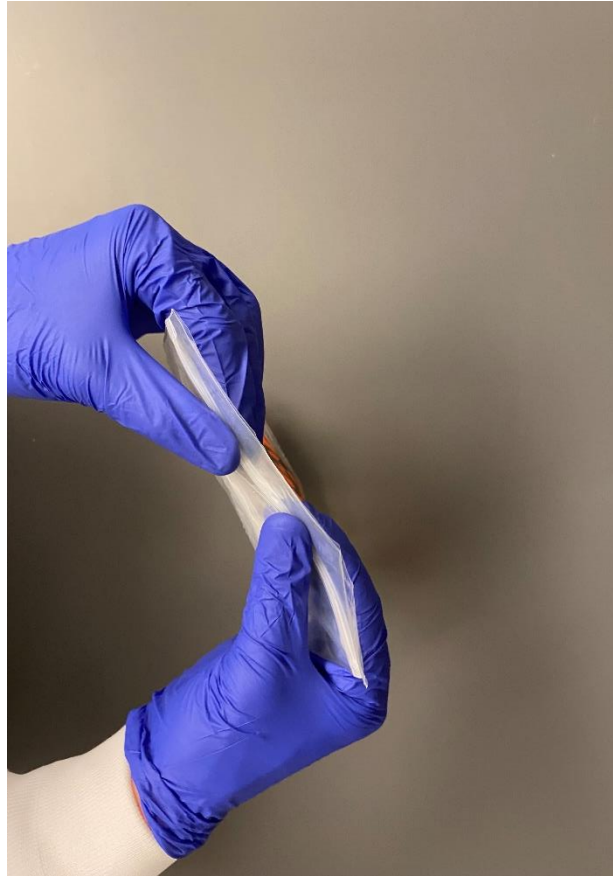
- Do NOT use a test tube if the transport media is bright yellow, green, or cloudy.

Assembling a self-collection kit: Main compartment



Place the sterile swab, test tube, and absorbent material in the main compartment of the biohazard bag.

Assembling a self-collection kit: External pouch



Add the collection info sheet and test requisition into the outer pouch of the bag for easier and safer access.

Specimen collection for lab-based PCR testing



* Refer to [COVID-19 Guidance: Testing of Individuals in Pharmacies](#) for further details and recommendations.

Step 1: Collect the specimen

- Hand hygiene prior to handling testing kits.
- For on-site collection, follow recommended infection prevention and control (IPAC) measures.*

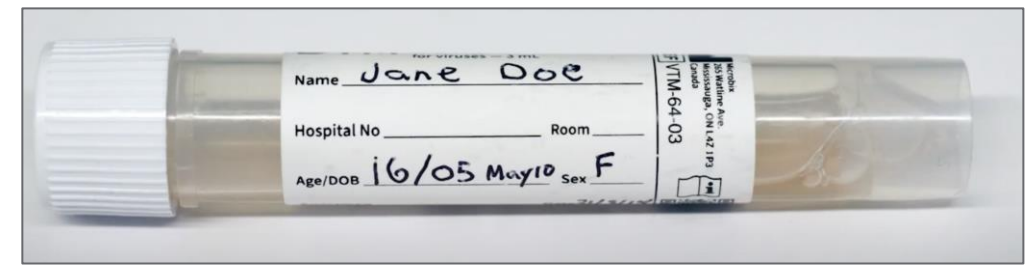
- Always label the test tube with:

1. Date of collection,
2. Patient's full name,

AND

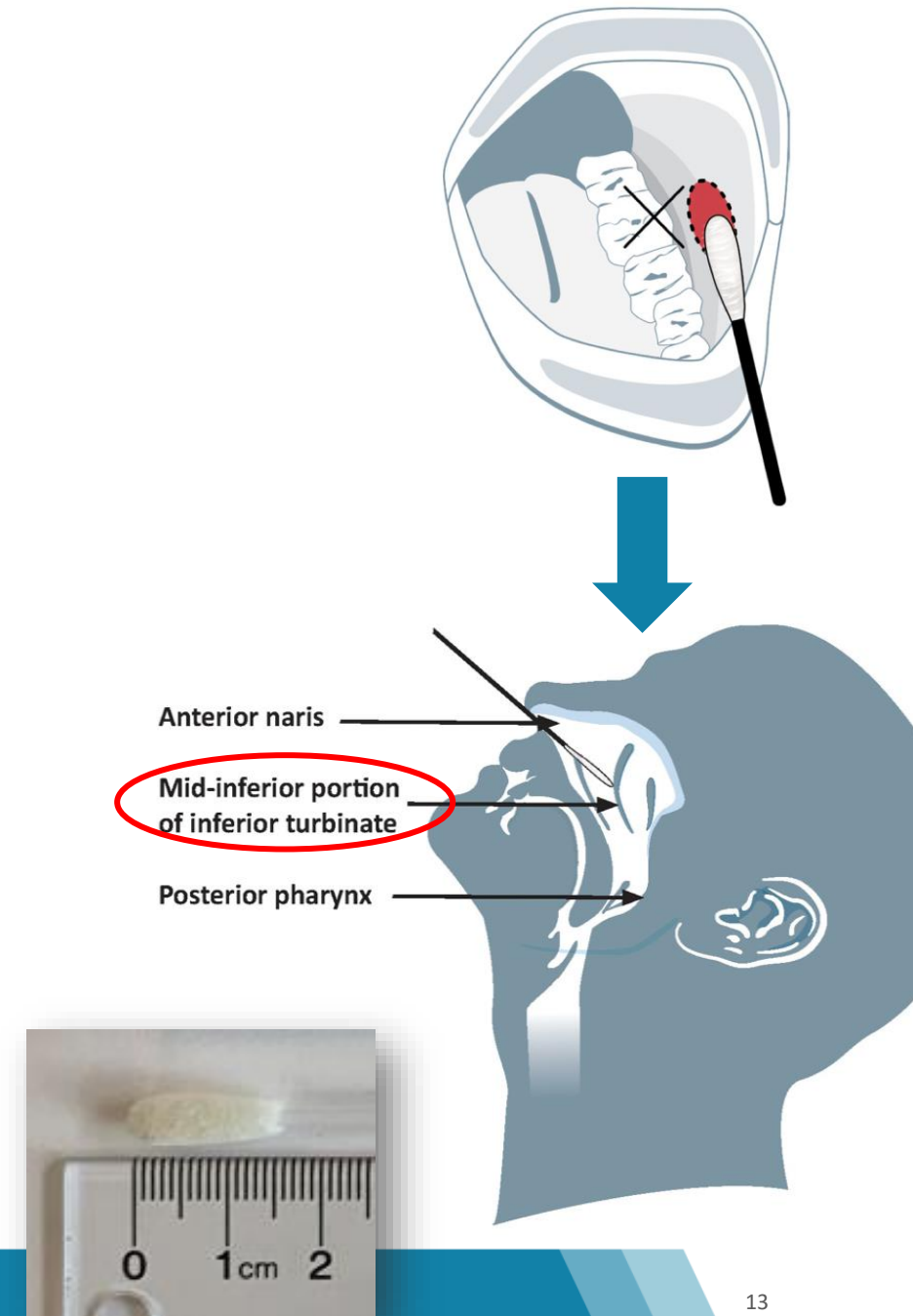
3. At least one additional unique identifier (e.g., Health Card number or date of birth)

- If using a sticker, affix the sticker to the tube longitudinally.



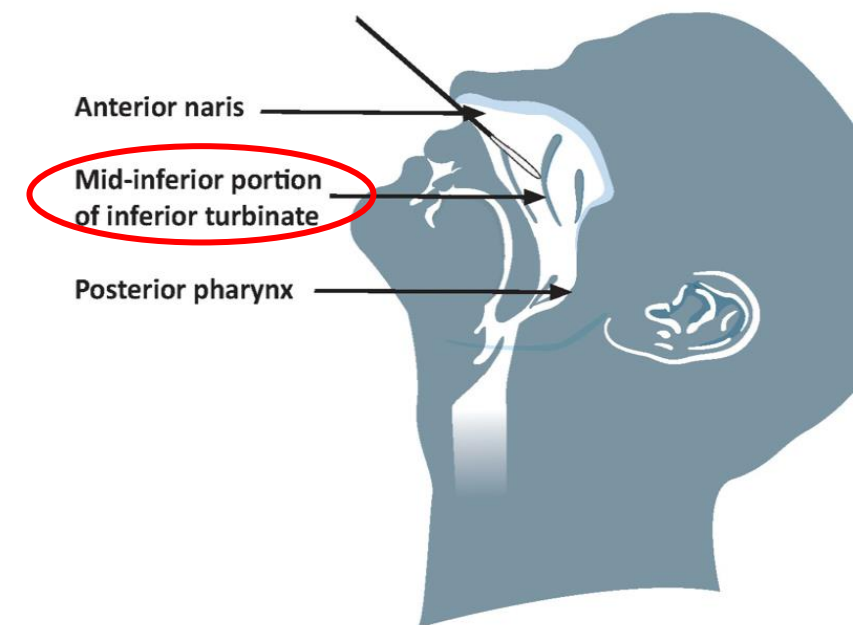
Preferred specimen collection type: Combined oral and nasal sampling

- Combined oral and nasal sampling is another preferred specimen type for patients **NOT at risk** of severe disease.
 - Risks of **severe COVID-19 infection** include: age > 50, obesity, immunosuppression, or cardiovascular/lung/metabolic/kidney/liver disease.
- Combined oral-nasal sampling provides adequate accuracy (~95%) compared to NP sampling in most settings.
- Collection can be performed by any individual.
 - *Step 1 (oral collection)*: can be taken from both cheeks (+/- the posterior tongue) or throat.
 - *Step 2 (nasal collection)*: insert all of the soft tip end into one nostril (*i.e.* up to 2.5 cm), rotate the swab 5-10 times against the inside wall of the nose, then remove and repeat into the other nostril.



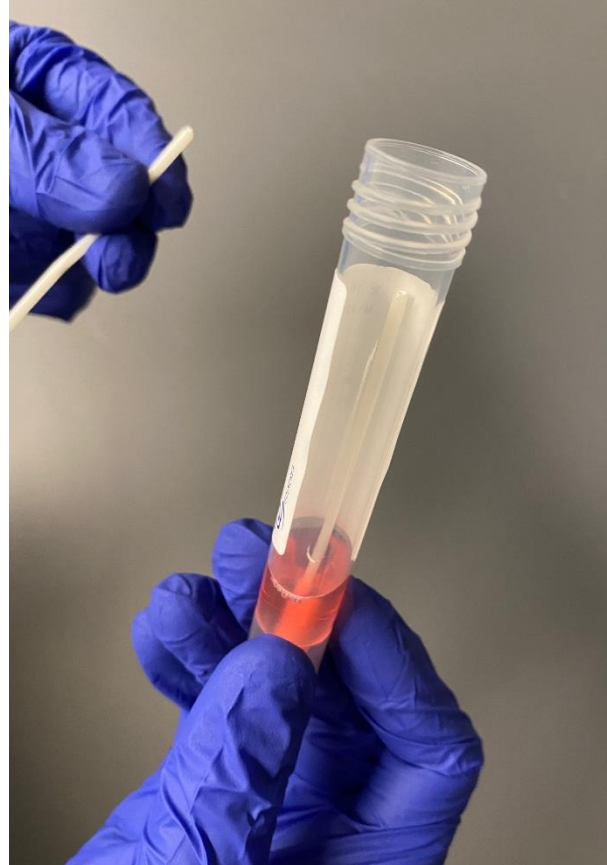
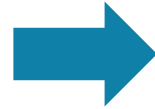
Specimen collection type NOT preferred: Nasal sampling

- Nasal sampling is **not** a preferred specimen type.
- Combining this method with oral sampling is **preferred** as sensitivity is lower (~85%) using nasal sampling alone compared to combined oral-nasal sampling (~90-95%).
 - See earlier slide on combined oral and nasal sampling for further instructions.



*Note: inserting the swab up to shorter distances (e.g., anterior nares) is **discouraged**, especially if not combined with oral sampling.

Step 2: Place collected specimen swab in test tube



Once the sample is collected, break the swab handle at the breakpoint before closing the cap tightly.



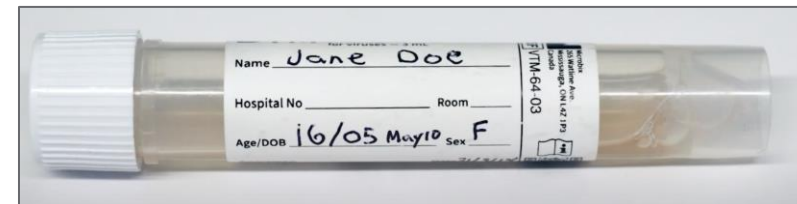
- Do NOT fold the swab instead of breaking it at the breakpoint.
 - If the swab is folded instead of broken, the test tube cap may not close properly and cause leakage.
 - It can also be a safety risk when opening the tube in the lab.

Step 3: Place test tube in the biohazard specimen bag



Confirm the test tube cap is closed tightly and properly to avoid leakage.

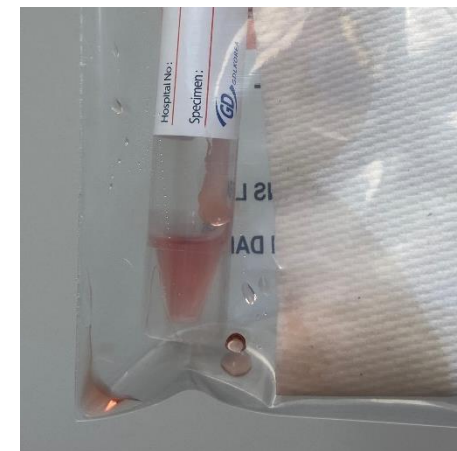
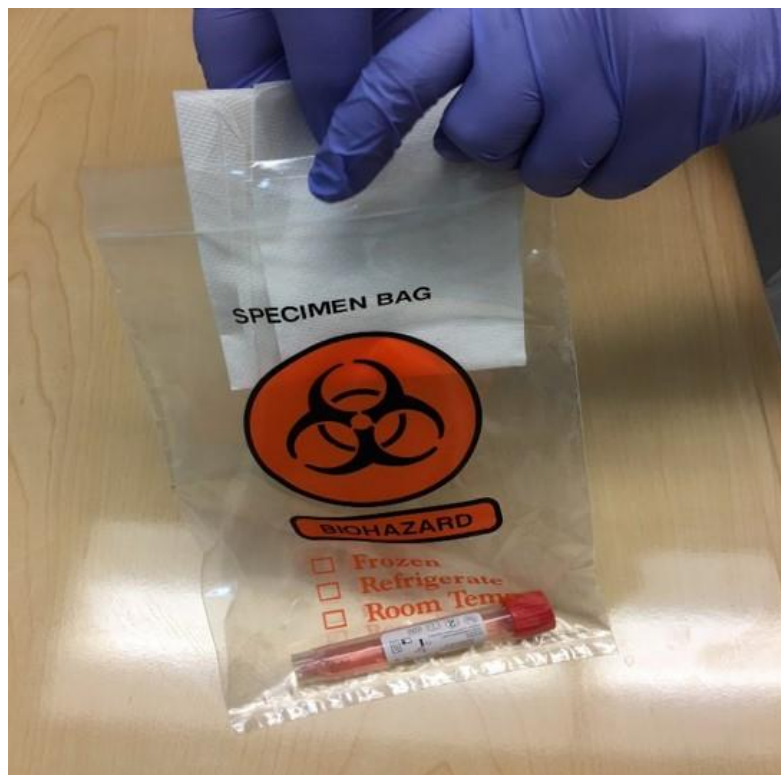
- Leaking specimens will be **rejected** by the laboratory.



Confirm the test tube is properly labelled.

- Unlabelled tubes will be **rejected** by the laboratory.

Step 4: Add absorbent material inside the main compartment of the biohazard bag next to the test tube

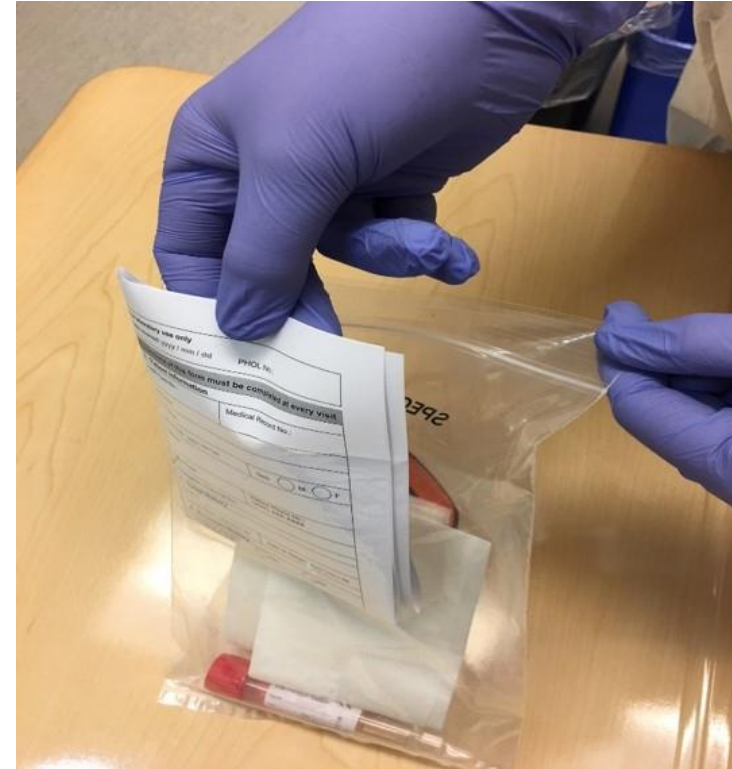
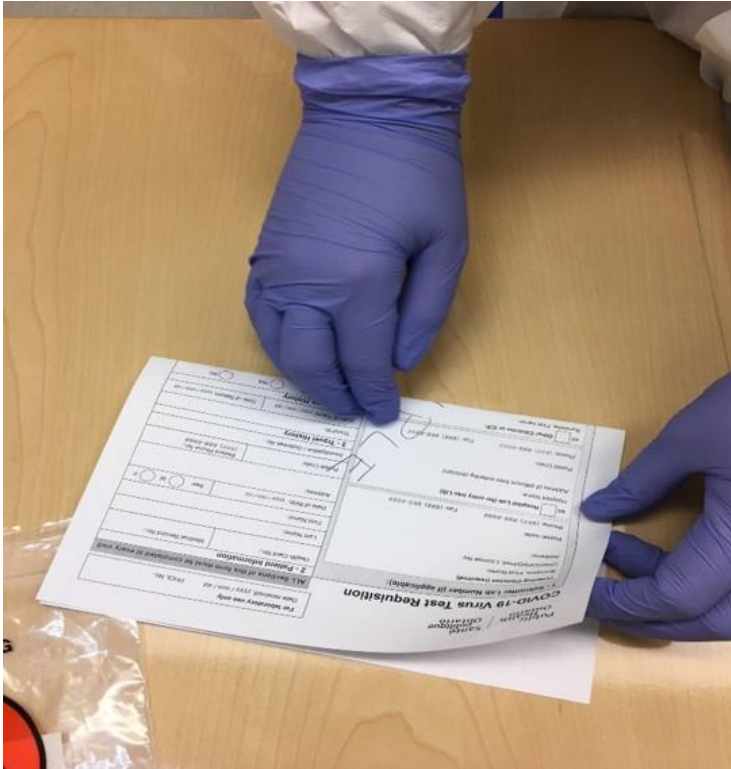


Do NOT process the specimen further if leakage is found.

- Leaking specimens will be **rejected** by the laboratory.

Absorbent material must be sufficient to absorb the entire content of the tube in the event of spillage (paper towel can be used).

Step 5: Insert *COVID-19 Virus Test Requisition* sheet into the external pouch of the biohazard bag



Confirm ALL required fields are filled in the requisition.

- Requisitions with missing information will be **rejected** by the laboratory.

Completion and verification of the requisition



COVID-19 and respiratory virus test requisition form

Make sure to use the most current version of Public Health Ontario's COVID-19 test requisition available at: <https://www.publichealthontario.ca/-/media/documents/lab/2019-ncov-test-requisition.pdf?la=en>

Public Health Ontario Santé publique Ontario		COVID-19 and Respiratory Virus Test Requisition	
		For laboratory use only Date received (yyyy/mm/dd): PHOL No.:	
ALL Sections of this form must be completed at every visit			
1 - Submitter Lab Number (if applicable):		2 - Patient Information	
Ordering Clinician (required) Surname, First Name: OHIP/CPSO/Prof. License No.: Name of clinic/facility/health unit: Address: Postal code: Phone: Fax:		Health Card No.: Medical Record No.: Last Name: First Name: Date of Birth (yyyy/mm/dd): Sex: <input type="radio"/> M <input type="radio"/> F Address: Postal Code: Patient Phone No.:	
<input type="checkbox"/> Hospital Lab (for entry into LIS) Hospital Name: Address (if different from ordering clinician): Postal Code: Phone: Fax:		3 - Travel History Travel to: Date of Travel (yyyy/mm/dd): Date of Return (yyyy/mm/dd):	
<input type="checkbox"/> Other Authorized Health Care Provider: Surname, First name: OHIP/CPSO/Prof. License No.: Name of clinic/facility/health unit: Address: Postal code: Phone: Fax:		4 - Exposure History Exposure to probable, or confirmed case? <input type="radio"/> Yes <input type="radio"/> No Exposure details: Date of symptom onset of contact (yyyy/mm/dd):	
6 - Specimen Type (check all that apply)		5 - Test(s) Requested	
Specimen Collection Date (yyyy/mm/dd): (required) <input type="checkbox"/> NPS <input type="checkbox"/> Throat Swab <input type="checkbox"/> Saliva (Swish & Gargle) <input type="checkbox"/> Deep or Mid-turbinate Nasal Swab <input type="checkbox"/> Throat + Nasal <input type="checkbox"/> Saliva (Neat) <input type="checkbox"/> Oral (Buccal) + Deep Nasal <input type="checkbox"/> BAL <input type="checkbox"/> Anterior Nasal (Nose) <input type="checkbox"/> Other (Specify):		<input type="radio"/> COVID-19 Virus <input type="radio"/> Respiratory Viruses <input type="radio"/> COVID-19 Virus AND Respiratory Viruses	
8 - COVID-19 Vaccination Status		7 - Patient Setting / Type	
<input type="radio"/> Received all required doses >14 days ago <input type="radio"/> Unimmunized / partial series / ≤14 days after final dose <input type="radio"/> Unknown		<input type="checkbox"/> Assessment Centre <input type="checkbox"/> Family doctor / clinic <input type="checkbox"/> Outpatient / ER not admitted Only if applicable, indicate the group: <input type="checkbox"/> ER - to be hospitalized <input type="checkbox"/> Deceased / Autopsy <input type="checkbox"/> Healthcare worker <input type="checkbox"/> Institution / all group living settings <input type="checkbox"/> Inpatient (Hospitalized) Facility Name: <input type="checkbox"/> Inpatient (ICU / CCU) <input type="checkbox"/> Remote Community <input type="checkbox"/> Confirmation (for use ONLY by a COVID testing lab). Enter your result (NEG / POS / or IND): <input type="checkbox"/> Unhoused / Shelter <input type="checkbox"/> Other (Specify):	
9 - Clinical Information		CONFIDENTIAL WHEN COMPLETED	
<input type="checkbox"/> Asymptomatic <input type="checkbox"/> Fever <input type="checkbox"/> Pregnant <input type="checkbox"/> Symptomatic <input type="checkbox"/> Pneumonia <input type="checkbox"/> Other (Specify): Date of symptom onset (yyyy/mm/dd): <input type="checkbox"/> Cough <input type="checkbox"/> Sore Throat		The personal health information is collected under the authority of the Personal Health Information Protection Act, s.36(1)(c)(iii) for the purpose of clinical laboratory testing. If you have questions about the collection of this personal health information please contact the PHO laboratory Manager of Customer Service at 416-235-6556 or toll free 1-877-604-4567. Form No. F-SD-SCG-4000 (21/07/22).	

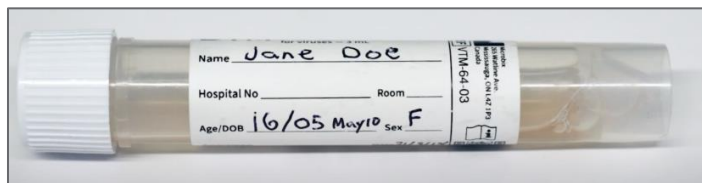
Section 1: Submitter information

- Ordering clinician should be a qualified health care provider (e.g., registered pharmacist).
- Fax numbers require registration and authorization through PHO's Customer Service Centre.
 - Non-validated fax numbers will result in report delivery by Canada Post.
- If your site is associated with a hospital laboratory, please fill in the **'cc Hospital Lab'** subsection.
- If results will be forwarded to an additional health care provider (e.g. primary care provider), please fill in the **'cc Other Authorized Health Care Provider'** subsection.

1 - Submitter Lab Number (if applicable):	
Ordering Clinician (required)	
Surname, First Name:	
OHIP/CPSO/Prof. License No:	
Name of clinic/ facility/health unit:	
Address:	Postal code:
Phone:	Fax:
cc <input type="checkbox"/> Hospital Lab (for entry into LIS)	
Hospital Name:	
Address (if different from ordering clinician):	
Postal Code:	
Phone:	Fax:
cc <input type="checkbox"/> Other Authorized Health Care Provider:	
Surname, First name:	
OHIP/CPSO/Prof. License No.:	
Name of clinic/ facility/health unit:	
Address:	Postal code:
Phone:	Fax:

Section 2: Patient information

- Provide full patient details including name, date of birth, address, postal code, phone number, and Health Card number (if available).
 - Middle names may be entered in the ‘first name’ section.
 - Important to use the patient’s current address and postal code for contact tracing (may differ from permanent address)
 - Information should match the information on the patient’s Health Card (if available)



- Mismatched information will be **rejected** by the laboratory.

Confirm the information on the requisition matches the label on the test tube.

2 - Patient Information	
Health Card No.:	Medical Record No.:
Last Name:	
First Name:	
Date of Birth (yyyy/mm/dd):	Sex: <input type="radio"/> M <input type="radio"/> F
Address:	
Postal Code:	Patient Phone No.:
Investigation or Outbreak No.:	

Include the investigation number or outbreak number if applicable for the individual being tested.

Details on outbreak numbers versus investigation numbers

Number Identification	Outbreak Number	Investigation Number (e.g., screen testing)
Number provided by	Public Health Unit	Ontario Health and Public Health Ontario
Number format	<p>XXXX-YYYY-#####</p> <p>XXXX - PHU code</p> <p>YYYY – Year when outbreak was declared</p> <p>##### – sequential number for this episode</p>	<p>LTS-#### (Long-Term Care STAFF)</p> <p>LTR-#### (Long-Term Care RESIDENT)</p> <p>RHS-#### (Retirement Home STAFF)</p> <p>RHR-#### (Retirement Home RESIDENT)</p> <p>EDU-ZZZZ-P-#### (Education PUPIL)</p> <p>Other numbers as assigned for the facility</p>
Used for	Outbreaks only, as directed by the PHU	Screen testing for routine activities
Validity of number	<p>For the duration of the active outbreak</p> <p>Do not re-use number after outbreak is over</p>	Ongoing, can be used repeatedly for the purpose of screen testing
Tests ordered	<p>COVID-19 on all patients</p> <p>Respiratory viruses if required by PHU*</p> <p>*Up to 4 <i>symptomatic</i> patients per outbreak</p>	COVID-19 on all patients

For a list of investigation number, contact OH or your local LHIN.

Sections 3, 4, and 5: Travel history, exposure history, and test(s) requested

- Provide any recent international travel history, or exposure to a probable or confirmed case of COVID-19.
- Include the date of symptom onset for probable or confirmed cases if available.

3 - Travel History		
Travel to:		
Date of Travel (yyyy/mm/dd):	Date of Return (yyyy/mm/dd):	
4 - Exposure History		
Exposure to probable, or confirmed case?	<input type="radio"/> Yes <input type="radio"/> No	
Exposure details:		
Date of symptom onset of contact (yyyy/mm/dd):		
5 - Test(s) Requested		
<input type="radio"/> COVID-19 Virus	<input type="radio"/> Respiratory Viruses	<input type="radio"/> COVID-19 Virus AND Respiratory Viruses

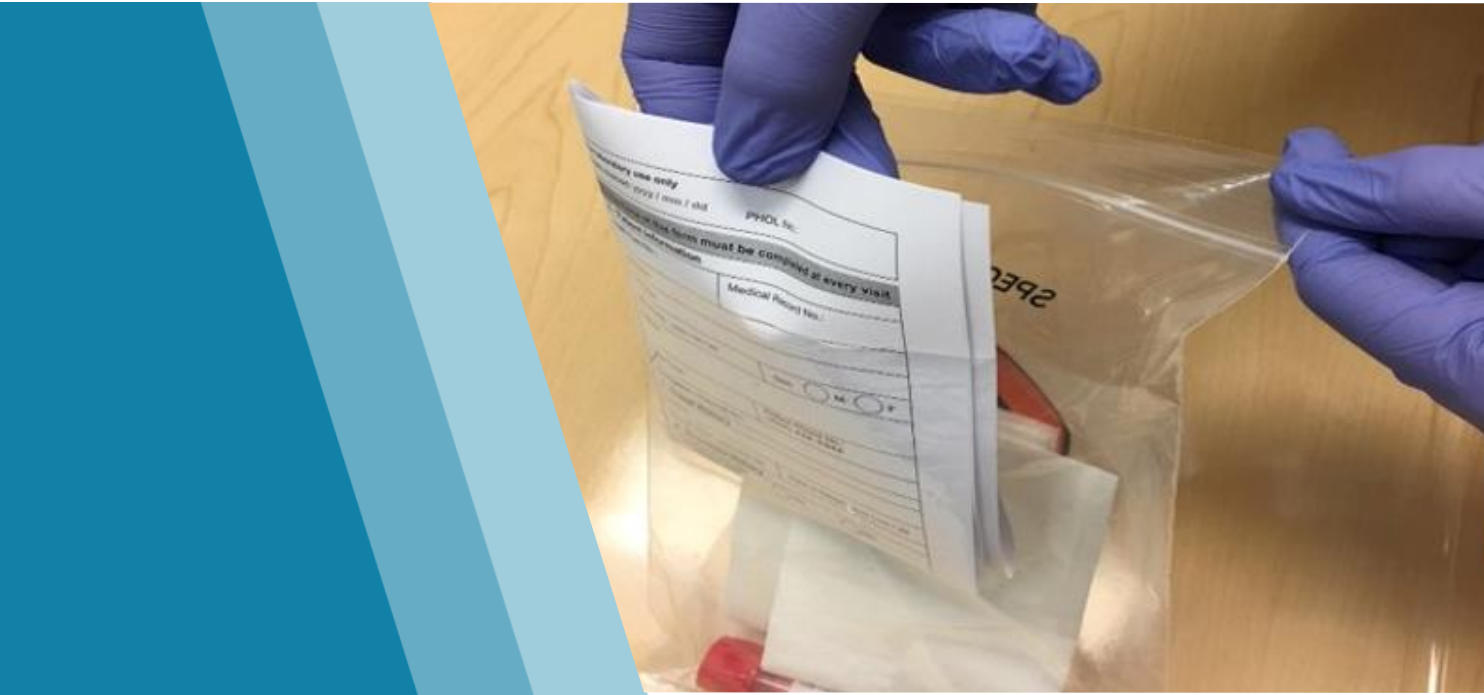
- Select **‘COVID-19 Virus’** in the ‘Test(s) Requested’ section.
- Testing for respiratory viruses other than COVID-19 is not indicated in the community
 - Testing for other respiratory viruses is currently reserved for paediatric populations seen in the emergency department, hospitalized patients, outbreak-associated patients, or patients in institutions with acute respiratory illness.

Sections 6, 7, 8, and 9: Specimen type, patient setting/type, COVID-19 vaccination status, and clinical information

- Provide as many details as possible regarding each of the required sections below.
- Do not forget to fill the “Specimen Collection Date” subsection (highlighted yellow here) once the specimen has been collected.

6 - Specimen Type (check all that apply)			7 - Patient Setting / Type		
Specimen Collection Date (yyyy/mm/dd): (required)			<input type="checkbox"/> Assessment Centre	<input type="checkbox"/> Family doctor / clinic	<input type="checkbox"/> Outpatient / ER not admitted
<input type="checkbox"/> NPS	<input type="checkbox"/> Throat Swab	<input type="checkbox"/> Saliva (Swish & Gargle)	Only if applicable, indicate the group:		
<input type="checkbox"/> Deep or Mid-turbinate Nasal Swab	<input type="checkbox"/> Throat + Nasal	<input type="checkbox"/> Saliva (Neat)	<input type="checkbox"/> ER - to be hospitalized	<input type="checkbox"/> Deceased / Autopsy	
<input type="checkbox"/> Oral (Buccal) + Deep Nasal	<input type="checkbox"/> BAL	<input type="checkbox"/> Anterior Nasal (Nose)	<input type="checkbox"/> Healthcare worker	<input type="checkbox"/> Institution / all group living settings	
<input type="checkbox"/> Other (Specify):			<input type="checkbox"/> Inpatient (Hospitalized)	Facility Name:	
8 - COVID-19 Vaccination Status			<input type="checkbox"/> Inpatient (ICU / CCU)	<input type="checkbox"/> Confirmation (for use ONLY by a COVID testing lab). Enter your result (NEG / POS / or IND):	
<input type="radio"/> Received all required doses >14 days ago	<input type="radio"/> Unimmunized / partial series / ≤14 days after final dose	<input type="radio"/> Unknown	<input type="checkbox"/> Remote Community		
9 - Clinical Information			<input type="checkbox"/> Unhoused / Shelter		
<input type="checkbox"/> Asymptomatic	<input type="checkbox"/> Fever	<input type="checkbox"/> Pregnant	<input type="checkbox"/> Other (Specify):		
<input type="checkbox"/> Symptomatic	<input type="checkbox"/> Pneumonia	<input type="checkbox"/> Other (Specify):			
Date of symptom onset (yyyy/mm/dd):	<input type="checkbox"/> Cough				
	<input type="checkbox"/> Sore Throat				

Test packaging, storage and transport



Storage requirements and expected transport timelines

- Specimens self-collected at home should be kept at **room temperature** and transported to drop-off site ideally within 2 hours.
- Specimens collected on site should be kept **refrigerated (2-8°C)** and ideally transported same day to the lab.



Specimens should not be stored in refrigerators with vaccines, medications, unused supplies, or any food products to limit cross-contamination.

- If no dedicated refrigerator available, specimens may be stored in clean rigid outer container (e.g., Styrofoam cooler box) with an ice pack.
- If expected duration of storage or shipment is greater than 72 hours, specimens should be kept **frozen (-20 to -70°C)** if a freezer is available.

Packaging of specimens for ground transportation to the lab

The following packaging instructions are:

- Valid for the duration of the exemption period from the *Temporary Certificate TU-0764* (consult with Transport Canada for expiry date);
- Valid for ground transportation between two points within Canada only;
- Suggested guidelines only.

Always refer to the latest edition of the *Transportation of Dangerous Goods Regulations* (TDGR) and requirements listed in the [Temporary Certificate TU-0764](#).

Additional supplies for ground transportation to the lab



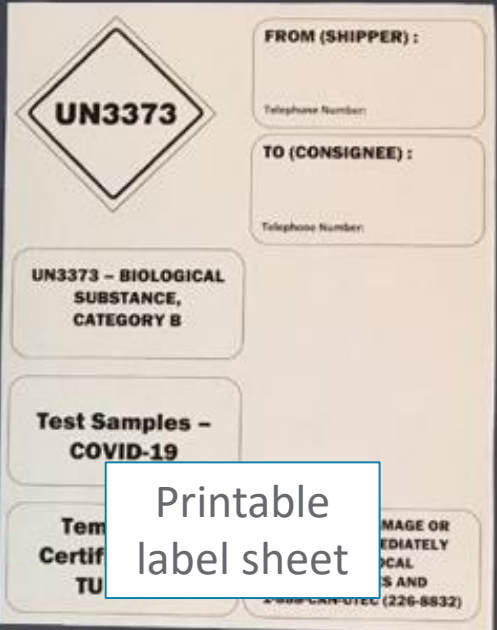
Sealable plastic bag



Rigid packaging
(e.g., cardboard box)

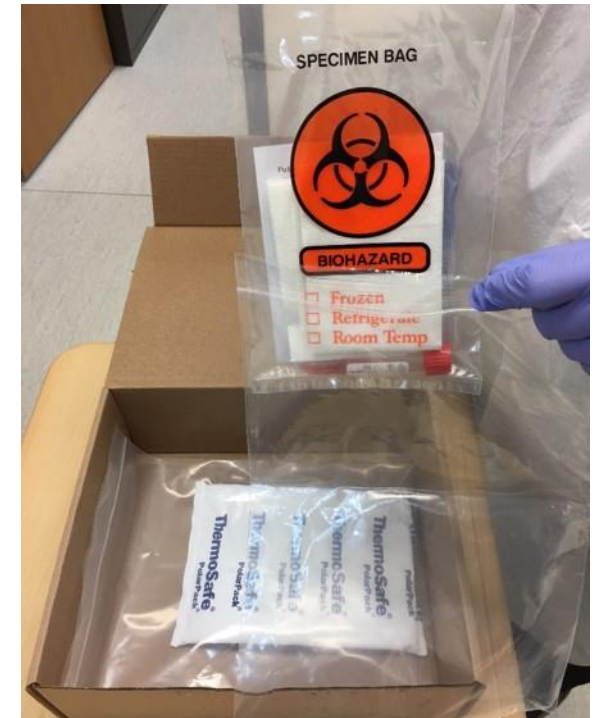
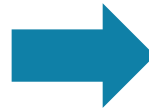


Ice pack



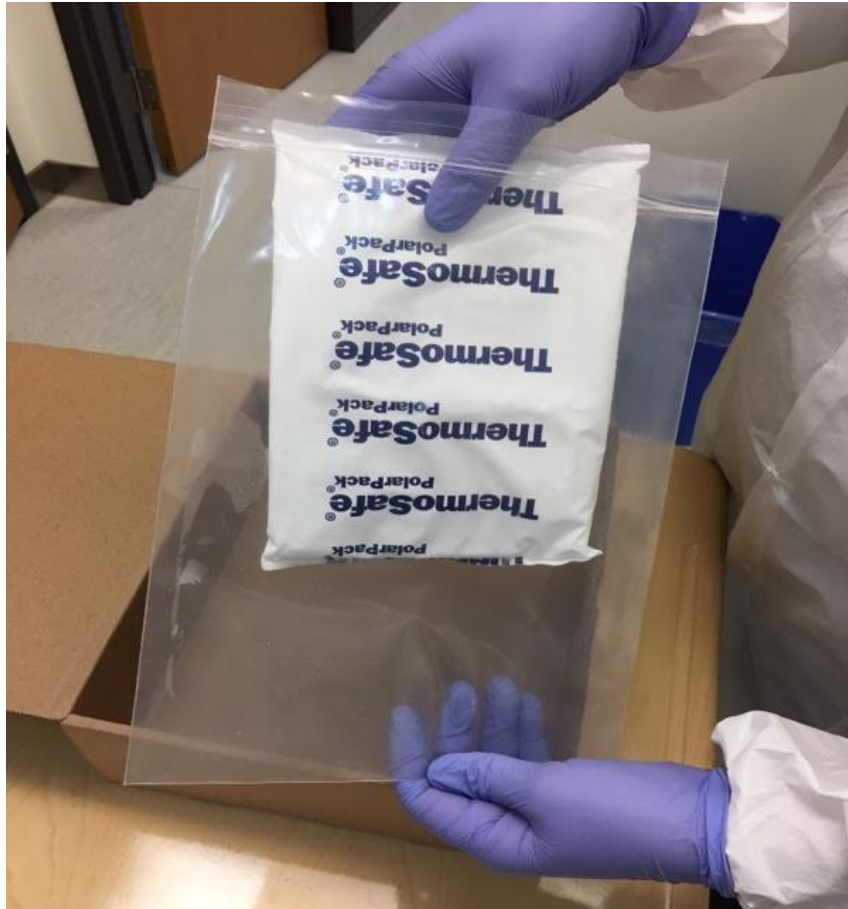
Printable label sheet

Step 1: Place sealed biohazard bags containing specimens into sealable plastic bag and place in outer rigid packaging



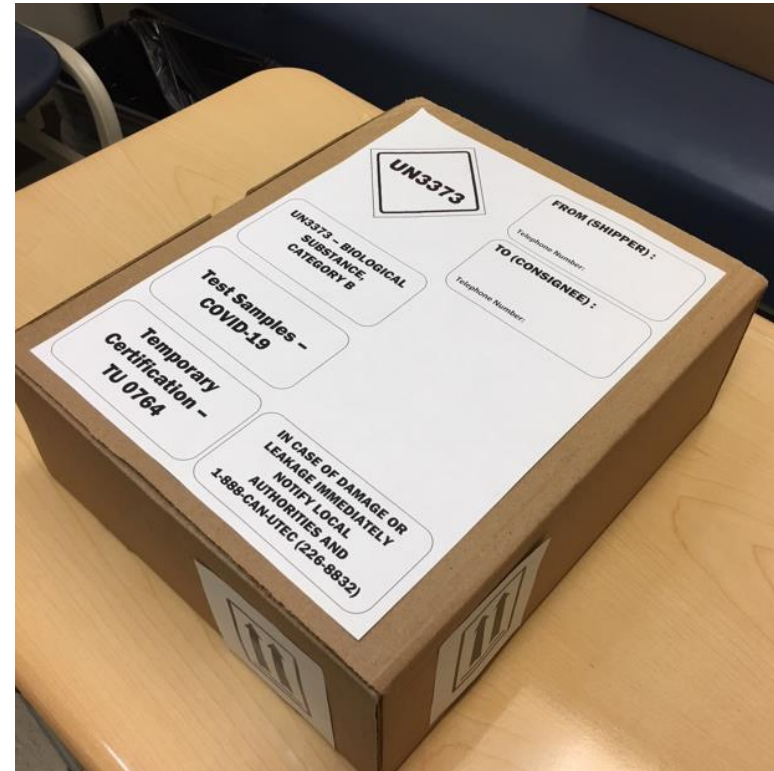
Each outer rigid packaging should have a maximum of 800 test samples (4 L total volume).

Step 2: Place ice pack in outer packaging

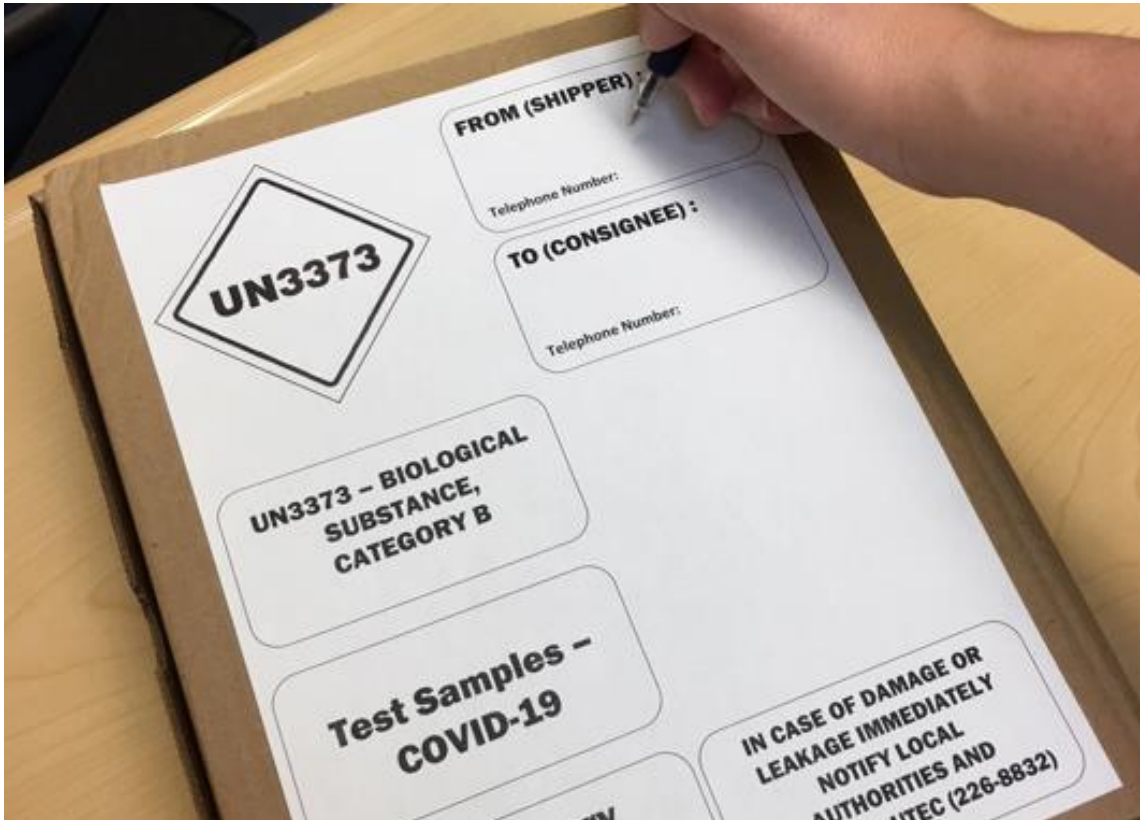


- Ice packs should be placed in the outer rigid packaging to preserve specimen during transport.
- Ensure the ice pack is placed in a sealable plastic bag to prevent wetness due to condensation.
- The ice pack should be of appropriate size and placed in the box in a way to limit movement of the pack during transport (otherwise it may hit and damage the sample tubes).
- Couriers are not required to use refrigerated trucks for shipping as long as specimens are transported with an ice pack.

Step 3: Print PDF of labels and tape on sealed cardboard box



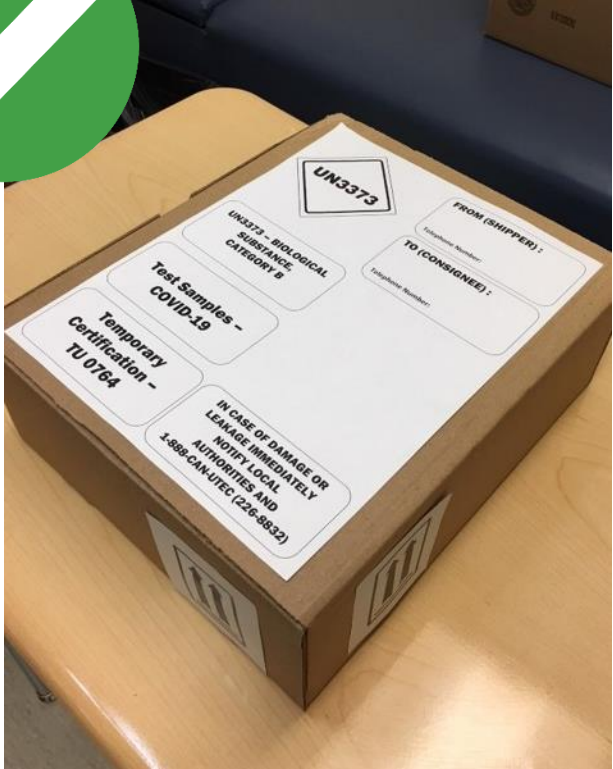
Step 4: Complete the address (To/From)



Complete the address and telephone number for both labels:

- From (shipper)
- To (consignee)

Package is ready to be transported!



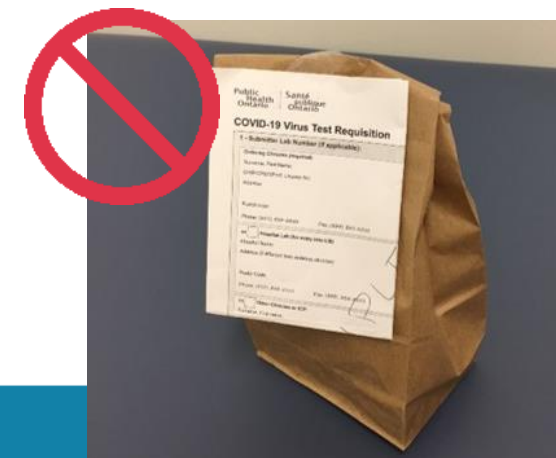
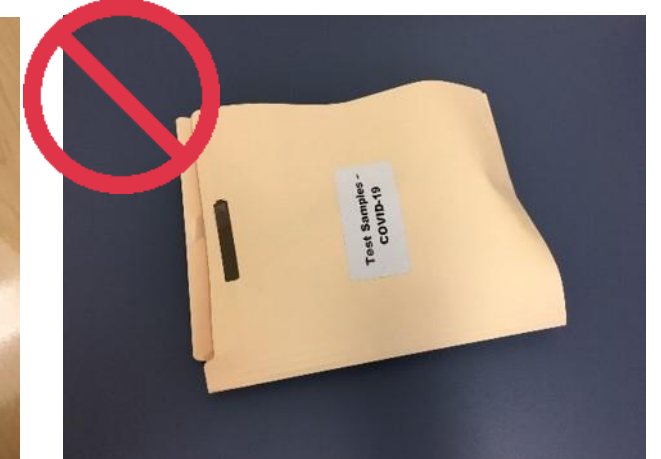
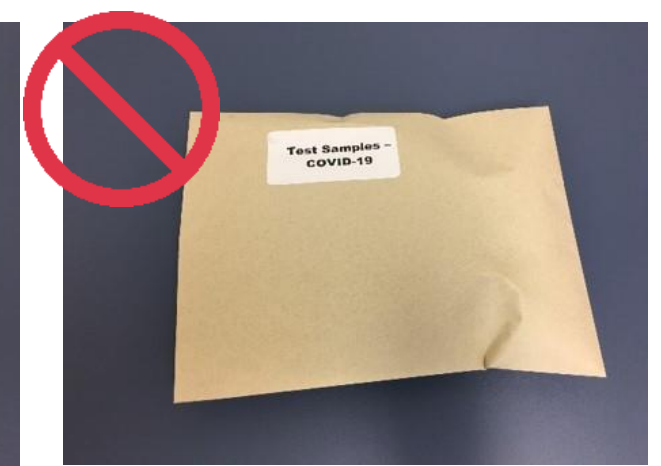
Unacceptable packaging

Do not use:

- Grocery bags
- Envelopes
- Garbage bags
- File folders
- Paper bags
- Gloves

Risks:

- Samples could get lost/delayed
- Risk to public if sample leaks
- Risk of fine by Transport Canada



Arranging for transportation

- Pharmacies must arrange their own appropriate courier services (private, shared, or self-courier) to the receiving lab.
- Courier services should ideally be timed for same-day transport of specimens and drop off to the receiving lab.
- Transportation should be to the closest PHO location offering COVID-19 testing (not all PHO locations offer COVID-19 testing).

PHO Laboratory Sites Offering COVID-19 Testing

Public Health Unit	Testing Lab
<ul style="list-style-type: none"> • Brant County Health Unit • Hamilton Public Health Services • Region of Waterloo, Public Health 	<p>PHO Hamilton 250 Fennell Ave. W Hamilton, Ontario L8N 3R5</p>
<ul style="list-style-type: none"> • Haliburton, Kawartha, Pine Ridge District Health Unit • Hastings and Prince Edward Counties Health Unit • Kingston, Frontenac and Lennox & Addington Health Unit • Peterborough Public Health 	<p>PHO Kingston 181 Barrie Street Kingston, Ontario K7L 4V8</p>
<ul style="list-style-type: none"> • Chatham-Kent Health Unit • Grey Bruce Health Unit • Huron Perth Health Unit • Lambton Health Unit • Middlesex-London Health Unit • Niagara Region Public Health Department • Wellington-Dufferin-Guelph Health Unit • Windsor-Essex County Health Unit 	<p>PHO London Unit 102, 1200 Commissioners Rd. E. London, Ontario N5Z 4R3</p>

Public Health Unit	Testing Lab
<ul style="list-style-type: none"> • Eastern Ontario Health Unit • Leeds, Grenville and Lanark District Health Unit • Ottawa Public Health • Renfrew County and District Health Unit 	<p>PHO Ottawa 2380 St. Laurent Blvd. Ottawa, Ontario K1G 6C4</p>
<ul style="list-style-type: none"> • Northwestern Health Unit • Thunder Bay District Health Unit 	<p>PHO Thunder Bay 336 South Syndicate Ave. Thunder Bay, Ontario P7E 1E3</p>
<ul style="list-style-type: none"> • Algoma Public Health Unit • North Bay Parry Sound District Health Unit • Porcupine Health Unit • Sudbury and District Health Unit • Timiskaming Health Unit 	<p>PHO Timmins 67 Wilson Avenue Timmins, Ontario P4N 2S5</p>
<ul style="list-style-type: none"> • Durham Region Health Department • Halton Region Health Department • Peel Public Health • Simcoe Muskoka District Health Unit • Toronto Public Health • York Region Public Health Services 	<p>PHO Toronto 661 University Avenue Toronto, Ontario M5G 1M1</p>

Result Communication and Follow-up Actions



Receiving test reports from the laboratory

- Pharmacies must be registered with the lab before requisition forms and specimens are processed.
- Test reports are faxed to the authorized submitter listed on the test requisition.
- Pharmacies must ensure that their fax system is private, secure, available after hours, and adequately maintained (e.g., sufficient paper at hand).
- Turnaround times for test results vary based on test volumes across the provincial laboratory network.
- If a Health Card number was provided on the requisition, results will also be available for patients through the [COVID-19 Test Result Viewer](#) portal.

Communicating results to the patient

- Pharmacies are responsible for communicating test results where appropriate:

Test result	Interpretation	Follow-Up Actions
Positive	COVID-19 infection detected	<ul style="list-style-type: none"> Inform patient Direct patient to self-isolate and seek medical advice if feeling unwell Lab will notify public health unit Public health unit will contact patient for contact tracing
Negative	No evidence of COVID-19 infection	<ul style="list-style-type: none"> Inform patients that have no health card number on their requisition as they will be unable to access their results online
Indeterminate	Either a low level of virus present or a non-specific signal when there is no virus present	<ul style="list-style-type: none"> Inform patient Direct patient to have another specimen collected as soon as possible to avoid further delays
Cancelled or rejected	Testing not performed due to poor quality specimen (e.g., leaking, incomplete information)	<ul style="list-style-type: none"> Inform patient Direct patient to have another specimen collected as soon as possible to avoid further delays

Key Contacts

- To obtain COVID-19 swab kits, please submit your order via the following Ontario Health link: <https://ehealthontario.on.ca/en/health-care-professionals/digital-health-services>
- For ordering providers - Public Health Ontario Customer Service Centre: CustomerServiceCentre@oahpp.ca
- For any other issues or questions not related to testing or results: OPDPinfo@ontario.ca

Resources

- Ontario Ministry of Health. COVID-19 Guidance: Testing of Individuals in Pharmacies, version 2 [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [cited 2021 Nov 29]. Available from: https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_guidance_asymptomatic_testing_pharmacies.pdf
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). Coronavirus disease 2019 (COVID-19) – PCR [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [cited 2021 Nov 29]. Available from: <https://www.publichealthontario.ca/en/laboratory-services/test-information-index/covid-19>
- Ontario Agency for Health Protection and Promotion (Public Health Ontario). COVID-19 PCR collection kits [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [cited 2021 Nov 29]. Available from: <https://www.publichealthontario.ca/en/laboratory-services/covid-19-pcr-collection-kits>
- Transport Canada. Temporary certificates [Internet]. Ottawa, ON: Government of Canada; 2020 [modified 2021 Jan 22; cited 2021 Nov 29]. Available from: <https://tc.canada.ca/en/dangerous-goods/temporary-certificates>
- Ontario Ministry of Health. COVID-19 (coronavirus) in Ontario [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [cited Nov 29]. Available from: <https://covid-19.ontario.ca/index.html>



For More Information About This Presentation, Contact:

CustomerServiceCentre@oahpp.ca

Public Health Ontario keeps Ontarians safe and healthy. Find out more at
PublicHealthOntario.ca