

Date:	March 20, 2020
To:	All Medical Staff and Northern Health Clinical Leadership
From:	<ul style="list-style-type: none"> • Penny Anguish, Northern Interior Chief Operating Officer and Northern Health EOC Operational Lead • Lisette Vienneau, Regional Director Diagnostic Services • Medical leads: Dr. Saqba Farooq, Dr. Shehab Elshazy and Dr. Elliot Rapp
Re:	COVID Outbreak Response – Medical Imaging Services Update

British Columbia's health authorities have been directed to move all hospitals in the province to Outbreak Response Phase 2, meaning hospitals will shift to undertaking only urgent and emergency Imaging/Image guided procedures and will postpone all non-urgent scheduled Imaging/Image guided procedures. Because every patient encounter is unique, individual care decisions must always represent unique interactions between caregivers and the patient.

Phase 1 – Prioritize Urgent Patients

Target: To be begin immediately

Immediately initiate postponement of booked elective Imaging.

Suspend all P4/P5 [ELECTIVE] imaging for all modalities

Phase 2 – Postponement of All Elective Patients, Prioritize Urgent and Emergent Patients

Target: Phase 2 to begin Friday March 20th at end of business day

Eliminate all elective cases including Breast Screening

Suspend P3 and P4/P5 [ELECTIVE] imaging for all modalities. All services will prioritize all requisitions immediately with respect to urgency. Clinical decision regarding urgency remains with the local Radiologist and referring Clinician. Some P3s will not be suspended, such as obstetrical ultrasounds, which need to be performed in a timely manner.

Phase 3 – Postponement of All Elective and Urgent Patients, Preserve Access for Emergent Patients Only

Target: To be determined by Northern Health EOC

This phase will begin if critical levels of resources/personnel is reached. In this phase, all elective and most essential work would cease and only emergency imaging would be performed.

Suspend P2 for all modalities for outpatients only. Before this is done, all essential studies should be reassessed by local Radiologists as P2s may need to be upgraded to P1. P2 will not be suspended for ER or inpatients. For outpatient bookings in Phase 3,

sometime sensitive P3 studies will need to be reassessed on a case by case basis. All services will prioritize all requisitions immediately with respect to urgency.

Definitions:

- *'Elective' is defined as priorities 3, 4 and 5*
- *'Urgent' is defined as priorities 2*
- *'Emergent' is defined as priority 1*

For further information or questions please contact the medical leads – Dr. Saqba Farooq, Dr. Shehab Elshazy and Dr. Elliot Rapp Dr. through Lisette Vienneau, Regional Director, and Diagnostic Services (Lisette.vienneau@northernhealth.ca)