

Anti-Viral Fight!

Recommendations – Multiplex screening of hospitalized patients with respiratory symptoms and signs

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October 26th, 2022

RECIPIENTS :

For both HC : Care unit nurses and managers, COVID heads of mission, Physicians, Laboratories

CONTEXT :

The epidemiologic situation of the last year and a half raises fears of an extraordinary influenza and RSV season this year. In order to be able to act quickly, the DRSP (public health) wishes to better monitor the viruses in circulation.

DIRECTIVE :

For any patient hospitalized on a care unit (IHC and UTHC departments) with an acute respiratory infection, regardless of age, it is recommended to proceed to the routine COVID nasopharyngeal swab and send it to the lab for a multiplex analysis (rather than the current monoplex analysis). This directive is effective as soon as the respective laboratories have completed their quality control of the multiplex analyzes.

It is still recommended to do a monoplex analysis for any patient hospitalized on a care unit (IHC and UTHC departments) without an acute respiratory infection and for all family escorts.

Patient hospitalized <u>with</u> acute respiratory symptoms and signs	Multiplex analysis (Omnilab UTHC code = FLUVID) (Omnilab IHC code = BILRESPI)
Patient hospitalized <u>without</u> acute respiratory symptoms and signs	Monoplex analysis
Family escorts	Monoplex analysis

*Acute respiratory symptoms and signs include but are not limited to : cough, dyspnea, sputum, nasal congestion, rhinorrhea, sore throat, findings on lung auscultation, findings on lung imaging