





Respiratory Illness and COVID-19 Protocols – Clerkship

The health and safety of patients, students and faculty is our priority, as we support students with their education as future physicians. Respiratory illnesses are common, and can pose risks to patients, colleagues and staff. COVID-19, specifically, can pose additional risk to those who are vulnerable. As developing health professionals, medical students are leaders and role models and are expected to exercise responsibility for personal health, to support their own well-being and the health of others.

Clinical Patient Interactions related to COVID-19:

- Fully vaccinated* **Year 3, 4 and 5** clerks **are expected to participate in the routine care of patients who are COVID-19 positive** where the opportunity arises in their clinical education.
- Fully vaccinated* **Year 3, 4 and 5** clerks **may participate in AGMPs on patients who are COVID-19 positive** where the opportunity arises in their clinical education.
- Participation in care of patients with COVID-19, like participation in the care of other patients, assumes that appropriate PPE and clinical supervision are available and clinical supervisor and students are comfortable with this involvement. Note that opportunities to participate in care of COVID-19 positive patients will vary depending on the clinical setting and may not always be available.
- Clerks who are not fully vaccinated will not participate in any direct care of patients confirmed positive for COVID-19, including not participating in AGMPs on COVID-19 positive patients. Clerks who are unable to participate in the care of patients with COVID-19 due to vaccination status or other accommodatable reason may apply for [accommodations through Access and Equity Services \(AES\)](#).
- If any SHA protocols in a clinical unit would preclude clerks' involvement in the care of COVID-19 positive patients, those SHA protocols must be followed.
- This applies to clinical learning in Saskatchewan; on visiting electives, policies at the medical school where the elective is being completed will apply.

*Fully vaccinated = has completed a Health Canada-approved COVID-19 vaccine primary series. Note that it is strongly recommended that students also receive all boosters for which they are eligible.

Patient Situation	Clerk Situation	Clerk involvement in Care
Patient has no symptoms of COVID-19 (screen negative)	All clerks (Year 3, 4, 5) regardless of vaccination status	
Patient has symptoms of COVID-19 (screen positive) but no positive test results (screen positive)	All clerks (Year 3, 4, 5) regardless of vaccination status	
Patient is confirmed + for COVID-19 (including AGMPs)	Any clerks not fully vaccinated	
	Fully Vaccinated Year 3, 4, 5 Clerks	

This document provides guidance on protocols to follow related to COVID-19 for University of Saskatchewan medical students in clerkship. It is informed by University, Public Health and SHA guidance, including:

- [USask COVID-19 Information](#)
- The [Saskatchewan Communicable Disease Manual](#)
- Saskatchewan Health Authority (SHA) [Health Care Workforce Screening & Return to Work Questionnaire](#)

The following scenarios will help guide you, should you have questions, concerns, or possible exposure to COVID-19:

Scenario 1 – What do I do if I experience viral-like symptoms (including, but not limited to cough, sore throat, fever)?

COVID-19 symptoms are similar to any other respiratory virus. If you have [symptoms of COVID-19](#), stay home. If you are already on campus or in a clinical setting and start to feel ill, immediately advise your preceptor, leave the session/clinical setting, and go directly home and self-isolate.

- a. Stay home and [self-isolate](#), regardless of your vaccination status.
- b. If feasible, do a home rapid antigen test (RAT).
 - If you have a positive home RAT, then you have COVID-19. Continue to self-isolate. Follow the steps in Scenario 4, below.
 - If you have a negative RAT, it does not guarantee that you do not have COVID-19, as RATs can be falsely negative. If you continue to have symptoms, even with a negative RAT, stay home until you are feeling better.
- c. **Returning to Learning activities:**
 - a. Returning to **on-campus activities** –return to on-campus activities once you are symptom-free, following the University guidelines.
 - b. Returning to clinical sessions in **clinical settings or community placements** – Due to the risk of transmission to potentially vulnerable patients and to avoid transmission within health care settings, follow the [Heath Care Workforce Screening & Return to Work Guidance](#) for timing of return to program.
- d. Contact the [appropriate UGME administrative staff](#) as per the [Clerkship Attendance and Absence policy](#).
- e. Work with administrator/Rotation Coordinator to schedule missed learning opportunities following [the Clerkship Attendance and Absence Policy](#).
- f. If you have confirmed COVID-19, we suggest you inform your close contacts (anyone you were in close contact with, without appropriate PPE, in the 2-3 days prior to developing symptoms or testing positive). If you were in a clinical setting, notify the clinical manager in the clinical facility. Please contact UGME and/or OSA if you need any support or have questions.
- g. Please contact UGME and/or OSA if you need any support or have questions.

Scenario 2 - What do I do if come into contact with someone who is COVID positive? *

*An individual who has either a positive PCR test or a positive rapid antigen test is COVID positive. They may have been infectious for 2-3 days before developing symptoms.

- a. If you have any [symptoms](#) of COVID-19, follow steps in Scenario 1.
- b. If you do **not** have any symptoms of COVID-19:
 - You may continue to attend school and your clinical learning activities.
 - Self-monitor for symptoms of COVID-19.
 - We suggest doing a RAT testing intermittently over the next 10 days, particularly if your contact was a household contact

Scenario 3– What do I do if I have a positive Home Rapid Antigen test or PCR test?

Home Rapid antigen testing (RAT) has high specificity (if you have a positive RAT you likely have COVID) but it does not have a high sensitivity (a negative test does not exclude you having COVID). If you have [symptoms](#) that might be COVID-19, follow steps in Section 1.

If you have a positive home rapid antigen test, please do the following:

- a. Stay home and self-isolate. You do not need any additional testing.
- b. **Returning to on-campus activities** – Stay home and [self-isolate](#) for 5 days from the date of your test result, or until 24 hours after fever has resolved (without use of fever-reducing medications) and your symptoms have significantly improved for 48 h, whichever comes later. If you meet this criteria, you may return to campus on day 6.
- c. **Returning to clinical settings or community placements** – Follow the [Heath Care Workforce Screening & Return to Work Guidance](#). Note that Day Zero is the day that you had your positive RAT, or developed symptoms, whichever came first. The earliest you can return is Day 6, if you are feeling better.
- d. Contact the appropriate UGME administrative staff as per the [Clerkship Attendance and Absence policy](#).
- d. We suggest you inform your close contacts (anyone you were in close contact with, without appropriate PPE, in the 2-3 days prior to developing symptoms or testing positive). If you were in a clinical setting, notify the clinical manager in the clinical facility.

- e. Please contact UGME and/or OSA if you need any support or have questions.

Scenario 4 – What do I do if there is a COVID-19 outbreak on the clinical unit where I am placed?

The [SHA COVID-19 Outbreak Guidelines](#) allow health sciences students to remain on outbreak units.

What this means to me as a learner?

- Students who are on or may be placed on a confirmed outbreak unit (COVID-19, influenza or other outbreaks) during their clinical experience will be notified by the UGME office and receive a memo from SHA outlining any relevant steps to take.
- If you have been providing clinical care on this unit with a confirmed COVID-19 outbreak, you may be required to having COVID-19 testing. If you are unsure whether the requirement for testing applies to you, please contact the Clinical Nurse Manager, or call Infection Prevention and Control at your site.
- You can continue to follow patients on outbreak units or attend outbreak units to do consults, as directly by your clinical supervisor. Ideally, you should limit time spent on outbreak units, unless you are cohorted to that unit (i.e., spending most of each day providing care on that unit).
- If you have specific needs related to being placed on an outbreak unit, contact the Office of Student Affairs.

Scenario 5 – What do I do about missed learning if I am sick?

Contingency plan for missed learning if self-isolation is required:

1. If learning cannot take place virtually – apply sick time from [Clerkship Attendance and Absence Policy](#).
2. If learning can be participated in virtually , student may not require additional time in rotation depending on whether objectives of rotation can be met.

All plans will be developed with the student by the UGME administrative staff, Rotation Coordinator and/or Year Chair.

Scenario 6 - What if I have other questions, or specific needs?

If you have specific needs and would like to explore accommodation of these needs, please reach out to the Office of Student Affairs for support in bringing forward any accommodation requests. If you have any questions, please contact your Year Chair/ Year Site Coordinator (information below), Drs. Malin or McKague, and we will be happy to answer them. You are also welcome to direct questions through your class reps.

How can I keep myself, and others, as safe as possible?

In all learning activities, please consistently take the following steps to keep yourself, and everyone else, as safe as possible:

- Self-monitor daily for [symptoms of COVID-19](#) or other respiratory illnesses.
- Do home rapid antigen, testing regularly (recommended 2x/week).
- Follow all PPE recommendations for the unit you are on.
- If you are using PPE, regularly review techniques for [donning](#) and [doffing](#) it properly.
- Maintain hand hygiene.
- **If you have any symptoms of COVID-19 or other respiratory illnesses, even very mild, please stay home/go home until you are better**

Program Contacts:

Year and Site Chairs & SLIC Director:

Year 3 Chair	Dr. Schaana Van de Kamp	Saskatoon	schaana.v@usask.ca
Year 3/4 Site Coordinator Regina	Dr. Shade Onaolapo	Regina	Mofolashade.Onaolapo@saskhealthauthority.ca
Year 4/5 Chair	Dr. Ashley Selvig	Regina	ashley.selvig@usask.ca
SLIC Director	Dr. Geoff Zerr	Estevan, Meadow Lake, Melfort, LaRonge	geoff.zerr@usask.ca

UGME Administrative Staff to contact at your home site below.

Saskatoon –Tami Golding; tami.golding@usask.ca

Regina – Nicole Gates Willick; Nicole.GatesWillick@saskhealthauthority.ca

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Departmental and Rotation Clerical Support Staff: see [UGME Program Contacts List](#)

COVID-19 Protocol Change History

Date	Change
October 6, 2020	Clerkship COVID-19 protocols developed and posted to website
December 10, 2020	Staff/Faculty contacts updated
December 23, 2020 (applied when clerks returned to rotation January 4, 2021)	<i>Clinical Patient Interactions</i> updated <ul style="list-style-type: none"> - Clarification that clerks may see patients who screen + on basis of symptoms using SHA screening tool, but may not participate in care of COVID-19 confirmed + patients - Clarification that clerkship participation in AGMPs will be rotation-specific
January 13, 2021	Link to SHA document “Risk Classification for Asymptomatic HCWs with Potential Exposure” updated due to update to SHA document and link
Feb 8, 2021	Addition of new section related to procedure if a student is scheduled or participating in a learning experience on a clinical unit where there is a COVID-19 outbreak
July 12, 2021	Updated for the 2021-22 Academic Session
Sept 27, 2021	Addition of section on exposures outside of learning setting Addition of section on rapid antigen home testing
Dec 6, 2021	Updates to Clinical Interactions Addition of FAQs on clerks seeing COVID-19 positive patients Formatting changes to improve readability; links updated
Jan 5, 2022	Updates to testing and self-isolation information based on revised public health regulations
Jan 9, 2022	Update to reflect changes to SHA testing and screening, exclusion from work and N95 masking requirements
Jan 21, 2022	New guidance on what to do if unable to access a PCR test in a timely way, SHA link updates, program contact updates
Feb 28, 2022	Updates based on changes to provincial, SHA, and University testing and self-isolation/return to work policies, incorporation of RAT as a testing strategy if symptomatic
Mar 2, 2022	Incorporates updated (Mar 1, 2022) SHA Return to Work Guidelines for Health Care Workers
July 19, 2022	Updates to participation in care of patients with COVID-19; updates to scenarios with revised SHA guidance
October 20, 2022	Incorporates updated (Oct 13, 2022) SHA Return to Work Guide for Health Care Workers

February 9, 2023	SHA documents, COVID-19 Return to Work Guide for HCW, and Risk Classification for SHA HCW has been amalgamated into Health Care Workforce Screening & Return to Work Questionnaire with new URL.
Nov 28, 2023	Broadened to respiratory illness guidelines; updated links; updated program contacts
Mar 4, 2024	Minor updates to reflect changes in availability of RAT testing