

EXPANDED DETAILS

Virtual appointment information

Information about virtual care can be found at: <u>https://www.albertadoctors.org/leaders-</u>partners/ehealth/virtual-care

Post COVID Definitions

- Acute COVID-19: Signs and symptoms of COVID-19 for up to 4 weeks.
- Ongoing symptomatic COVID-19: Signs and symptoms of COVID-19 from 4 to 12 weeks.
- Post-COVID-19 Syndrome / Long COVID: Signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks and are not explained by an alternative diagnosis.

NICE Guideline [NG188], "COVID-19 rapid guideline: managing the long-term effects of COVID-19" (published December 18, 2020). Online at <u>https://www.nice.org.uk/guidance/ng188</u>

This pathway is intended to identify rehabilitation needs for:

- Patients with confirmed or suspected COVID-19 diagnosis with ongoing symptoms beyond 4 weeks
- Patients with long standing medical or functional issues as a result of a previous or suspected COVID-19 diagnosis

Common symptoms:

- Respiratory dyspnea, cough, chest pain
- Neurological fatigue, headache, loss of smell (anosmia), cognitive impairment, loss of taste (ageusia)
- Musculoskeletal muscle/joint pain (myalgia/arthralgia)
- Mental health sleep impairments, depression, anxiety

Establish/confirm date of initial COVID-19 diagnosis

Establishing the date of symptom onset & date of COVID-19 diagnosis is important for determining if the patient is in the acute recovery phase or if they are experiencing long COVID symptoms.

Red Flags

- Severe shortness of breath at rest
- Difficulty breathing
- Pain or pressure in chest
- Cold, clammy or pale molted skin
- New onset of confusion
- Blue lips or face
- Becoming difficult to rouse
- Coughing up blood
- Reduced urine output
- Return of cough after period of improvement* may signal development of COVID pneumonia
- Return of fever after afebrile period* may signal development of COVID pneumonia
- Oxygen Saturation
 - Helpful tool to indicate disease severity when available
 - If previously healthy lungs or previously documented normal O2 sat a new reading of < 92% is a red flag
 - If underlying lung disease with documented low normal O2 sat at baseline a new reading of < 90% is a red flag
 - If patient on home oxygen normally and their O2 requirements increase with COVID illness this is a red flag

Red Flag transfer with considerations for goals of care

If Goals of Care are established:

C1 or C2	R1, R2, R3, M1, M2
Severe respiratory distress/pain → RAAPID for in- hospital palliation or community palliative paramedic program	Emergent issues → RAAPID or EMS
Evidence of progressive respiratory failure without distress → palliative home care	Stable but needs short intervention (oxygen support, fluids) → <u>Specialist Advice Line</u>
	Stable but needs longer term intervention → <u>Specialist Advice Line</u>

Safety Net Flags

- Socially isolated (Lives alone, unable to connect with others through technology, little to no social network)
- Lack of caregiver support if needed
- Inability to maintain hydration (Diarrhea, vomiting, cognitive impairment, poor fluid intake)
- Food/financial insecurity
- Currently receives homecare support

- Challenges with health literacy or ability to understand treatment recommendations or isolation expectations.
- Unable to self-manage

Self-monitoring information and resources

At this time, patients and families should be directed to AHS for resources around self-monitoring information. This can be found at: <u>https://www.albertahealthservices.ca/topics/Page16997.aspx</u>

For specific patient advice on how to self-manage and red flag details, please visit: <u>https://myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=custom.ab_covid_19_symptom_mgmt_00</u> <u>1</u>

https://myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=custom.ack9673ahs

There is increasing evidence that smoking cessation may help to reduce the impact of COVID-19. Patient information and supports can be found at <u>https://www.albertaquits.ca/topics/smoking-vaping-covid-19</u>.

Patients should also be counseled on advanced care planning, including: choosing an agent, communicating their values and documenting these in a Personal Directive. Information can be found at <u>www.conversationsmatter.ca</u>.

Post-COVID-19 Rehabilitation Screening Tool

Sample Script: The purpose of this screening tool is to evaluate any functional concerns or lingering symptoms you may be experiencing as a result of COVID-19. This will help us determine what rehabilitation supports you may require moving forward.

This survey will take 5-10 minutes to complete. If there are topics you do not wish to comment on or if you are not currently experiencing issues in an area, please indicate N/A. The first part of the survey will focus on your functional abilities and the second part of the survey will look at the symptoms you are currently experiencing.

Considerations for Completion:

- The purpose of this screening tool is to identify rehabilitation needs of patients who have been diagnosed or were suspected to have COVID-19.
- This tool can be administered at any time during the patient's journey but it is important to consider the natural progression of the illness when determining rehabilitation needs. Depending on the severity of symptoms & functional impairment, some clients may be better served by starting with a self-management program before being referred to more specialized rehabilitation.
- This tool can be completed by any health care provider.



Part 1: Post-Covid-19 Functional Status Scale (PCFS)

FIGURE 1 Patient self-report methods for the Post-COVID-19 Functional Status (PCFS) scale. a) Flowchart. b) Patient questionnaire. Instructions for use: 1) to assess recovery after the SARS-CoV-2 infection, this PCFS scale covers the entire range of functional limitations, including changes in lifestyle, sports and social activities; 2) assignment of a PCFS scale grade concerns the average situation of the past week (exception: when assessed at discharge, it concerns the situation of the day of discharge); 3) symptoms include (but are not limited to) dyspnoea, pain, fatigue, muscle weakness, memory loss, depression and anxiety; 4) in case two grades seem to be appropriate, always choose the highest grade with the most limitations; 5) measuring functional status before the infection is optional; 6) alternatively to this flowchart and patient questionnaire, an extensive structured interview is available. The full manual for patients and physicians or study personnel is available from https://osf.io/qgpdv/ (free of charge).

Adapted from: Klok FA, Boon GJAM, Barco S, et al. The Post-COVID-19 Functional Status scale: a tool to measure functional status over time after COVID-19. Eur Respir J 2020; 56: 2001494 [https://doi.org/10.1183/13993003.01494-2020] is licensed under CC BY NC 4.0.

Part 2: Post-Covid Symptom Checklist

Sample Script: The next part of the survey we will be discussing any symptoms you are <u>currently</u> experiencing as a result of COVID-19. The symptoms are divided into categories which will help us determine how to best direct your recovery. If you have no symptoms in a category, please indicate N/A and we will move on to the next section. If you are unsure, we will ask more detailed questions. For each question, please indicate if your symptoms are <u>worse</u>, the <u>same</u> or <u>better</u> than before your illness.

Cardiorespiratory Symptoms?		Neurological Symptoms?	
	Yes □ N/A □ Unsure		Yes □ N/A □ Unsure
Shortness of breath at rest? □ N/A	□ Worse □ Same □ Better	Difficulty controlling the movement of your body?	□ Worse □Same □ Better
Shortness of breath with activity? □ N/A	□ Worse □ Same □ Better	Difficulty eating, drinking or swallowing (i.e. choking)? □ N/A	□ Worse □ Same □ Better
Lingering cough or noisy breathing? N/A	□ Worse □ Same □ Better	Difficulty controlling your: Bowels? □ N/A	□ Worse □ Same □ Better
Chest pain at rest? □ N/A	□ Worse □ Same □ Better	Bladder? 🗆 N/A	□ Worse □ Same □ Better
Chest pain with activity?	□ Worse □ Same □ Better	Issues with concentration, thinking or memory? □ N/A	□ Worse □ Same □ Better
Dizziness, fainting or loss of consciousness?	□ Worse □ Same □ Better	Difficulty hearing?	☐ Worse☐ Better
□ N/A		Difficulty seeing? □ N/A	□ Worse □ Same □ Better
Musculoskeletal Symptoms		Other Symptoms?	Yes 🗆 N/A 🗆 Unsure
	s? Yes	Other Symptoms?	Yes IN/A Unsure
Generalized muscle	Yes □ N/A □ Unsure □ Worse □ Same	Extreme	🗆 Worse 🛛 Same
Generalized muscle weakness? □ N/A Muscle or joint pain?	Yes N/A Unsure Worse Same Better Worse Same	Extreme fatigue/exhaustion? □ N/A Worse after physical or	□ Worse □ Same □ Better
Generalized muscle weakness? □ N/A Muscle or joint pain? □ N/A Difficulty walking?	Yes N/A Unsure Worse Same Better Worse Same Better Worse Same Better	Extreme fatigue/exhaustion? □ N/A Worse after physical or mental activity? Have you lost your taste or	 □ Worse □ Same □ Better □ Yes □ No
Generalized muscle weakness? □ N/A Muscle or joint pain? □ N/A Difficulty walking? □ N/A Difficulty doing own washing & dressing?	Yes N/A Unsure Worse Same Better	 □ Extreme fatigue/exhaustion? □ N/A Worse after physical or mental activity? Have you lost your taste or sense of smell? Have you been eating less than usual for more than 1 	 □ Worse □ Same □ Better □ Yes □ No □ Yes □ No
Generalized muscle weakness? □ N/A Muscle or joint pain? □ N/A Difficulty walking? □ N/A Difficulty doing own washing & dressing? □ N/A Difficulty doing your usual activities (i.e. leisure or work)? □ N/A Mood Related Symptoms?	Yes N/A Unsure Worse Same Better	 □ Extreme fatigue/exhaustion? □ N/A Worse after physical or mental activity? Have you lost your taste or sense of smell? Have you been eating less than usual for more than 1 week? Have you lost or gained a significant amount of 	 □ Worse □ Same □ Better □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
Generalized muscle weakness? □ N/A Muscle or joint pain? □ N/A Difficulty walking? □ N/A Difficulty doing own washing & dressing? □ N/A Difficulty doing your usual activities (i.e. leisure or work)? □ N/A Mood Related Symptoms?	Yes N/A Unsure Worse Same Better	 Extreme fatigue/exhaustion? N/A Worse after physical or mental activity? Have you lost your taste or sense of smell? Have you been eating less than usual for more than 1 week? Have you lost or gained a significant amount of weight without trying? Issues with pain or 	 □ Worse □ Same □ Better □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Lost □ Gained □ Worse □ Same

*Upon completion, providers should ask clients about additional symptoms that may have been missed.

Adapted from: Sivan M, Halpin S, Gee J. Assessing long term rehabilitation needs in COVID-19 survivors using a telephone screening tool (C19-YRS tool). ACNR. 2020; 19 (4): 14-7. doi: <u>https://doi.org/10.47795/NELE5960</u> is used under <u>CC BY 4.0</u>.

Scoring/Evaluation:

Rehabilitation needs should be determined using a combination of the PCFS scale and the symptom checklist.

PCFS Grade 0 to 1 (mild functional impairment):

Consider universal rehabilitation interventions (self-management resources)

PCFS Grade 2 to 3 (moderate functional impairment):

Consider targeted rehabilitation interventions

PCFS Grade 3 or 4 (severe functional impairment):

• Consider **personalized** rehabilitation interventions

See tables below for universal, targeted and personalized rehabilitation options in your zone. Please note, **all** patients should be given access to self-management resources.

Post COVID-19 Rehabilitation: Edmonton Zone Resources

Universal Rehabilitation / Self-Management Resources

- Services available to all Albertans.
- **Note**: All patients should receive self-management information.

Post COVID self-management document - <u>After COVID-19: Information and resources to help you recover</u> (alberta.ca)

PCNs offer many services, such as pulmonary rehab, supervised exercise programs, mental health workshops. PCNs also offer individualized supports to patients including nurses, exercise specialists, registered dietitians, behavioral health consultants and social workers. Considering reaching out to your PCN team to see if your patients' needs can be met within the Medical Home.

Program	Primary Symptoms	Referral Information
Sub-acute (Continuing Care) - Provides short term medical and nursing interventions and rehab in a bedded option to restore and optimize health, avoid further loss of function and increase activities tolerance prior to discharge.		Method of referral is through Home Care or Transition Coordinators
Restorative Care Units (Continuing Care) - Time- limited, multi-disciplinary, intensive, goal oriented and client-centred rehabilitation service in a bedded option. Provides rehabilitation to support functional independence with ADLs including twice daily group exercise classes.		Method of referral is through Home Care or Transition Coordinators
Inpatient Unit (Fort Saskatchewan Community Hospital) - short term community occupational therapy services focused on enabling client to live safely and independently in preparation for discharge	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	

Targeted Rehabilitation

• Services designed for groups of people with a common need.

Program	Primary Symptoms	Referral Information
Supervised Exercise Program	Musculoskeletal, respiratory	STEP Forward - InformAlberta.ca
Pulmonary Rehab	Respiratory	Breathe Easy Program - Pulmonary Rehabilitation Program - InformAlberta.ca

Outpatient Respiratory Clinics	Respiratory	Respiratory Therapy -
	respiratory	<u>Community - InformAlberta.ca</u>
Inpatient/Outpatient Rehab (Cross Cancer Institute) Assessment/Triage/Outpatient Rehab/Mental Health (ENPCN) -	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	updated -
The COVID-19 Recovery Clinic is a multi-disciplinary program that provides individualized screening and referral to clinician resources including: Nursing, Mental Health, Dietitians, Exercise Specialists and Pharmacy. We are also connected with several different Specialists including: Cardiology, Pulmonary, Rheumatology, Gastroenterology, ENT and Neurology.		
Post COVID Clinic (Kaye Edmonton Clinic) Numerous other ambulatory clinics; Plastics, Trauma, CF, Hematology, Acute Burns, NMD, MS, Rheumo, Multiple other Medicine & Surgery Units, Post-Transplant		
Inpatient (Acute Care) and Outpatient Rehab (Misericordia Community Hospital) - Family Medicine, Internal Medicine, ICU, Cardiac, Ortho, Gen Surgery, Geriatric Assessment - not operating currently, centralized, consult service for any of the units- cover all of the units, sought out on a consult basis, some standing orders to assess and treat for functional needs Outpatients: SLP- VFSS services, ALS patients, can see some limited other community, previously some communications but not since COVID OT: Community Cognitive Assessments- Plastics Upper Extremity - Lower Extremity assessments (case by case) footwear, orthotics assessment pre COVID PT: may see post COVID patients if MSK or post -op, self pay , certified hand therapist PT, general MSK, post surgical , Osteoperosis (transitioned to virtual) Better Balance (on hold) Inpatient across - Including Wound	Musculoskeletal	
Care team and SLP, SHP, PT/OT&SW as required, recent		

referrals to EZVH for SLP; outpatient plastics, complex ortho,	
transplants, rheumo, burns (UAH - WMC/MAZ)	

Personalized Rehabilitation

• Designed to meet the unique needs of an individual

Program	Primary Symptoms	Referral Information
Addiction and Mental Health Access 24/7	Depression, anxiety Psychosocial	https://albertareferraldirectory. ca/PublicSearchController?dire ct=displayViewServiceAtFacility &serviceAtFacilityId=1122569 &pageNumberToDisplay=1&pu blicSearch=true
Occupational Therapy services for Chronic Disease Management	Psychosocial	<u>Occupational Therapy Services</u> <u>for Chronic Disease</u> <u>Management -</u> <u>InformAlberta.ca</u>
Community Aids for Independent Living	N/A	<u>Community Aids for</u> <u>Independent Living -</u> <u>InformAlberta.ca</u>
Community Rehabilitation Interdisciplinary Services (CRIS)	Musculoskeletal, neurological, psychosocial	<u>Community Rehabilitation</u> <u>Interdisciplinary Service -</u> <u>InformAlberta.ca</u>
Complex Orthopedic Physiotherapy	Neurological	Not Listed
CHOICE (Continuing Care) - The goal of the program is to keep older people healthy and living at home. Clients in the CHOICE program benefit from a combination of services brought together and coordinated in one program: 24 hour telephone number, in home assistance, a day centre, and medical services. the programs responds in a timely manner to a client's changing health and rehab needs.		Not Listed
Inpatient Unit (Devon General Hospital)- short term community occupational therapy services focused on enabling client to live safely and independently through working on self-management of chronic conditions. (PTI)	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	n/a
Inpatient Unit (Devon General Hospital) - Provides short term rehab in a bedded option to restore and optimize health, avoid further loss of function and increase activities tolerance prior to discharge. (OTI)	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	n/a

Inpatient Unit (Fort Saskatchewan Community Hospital) - Provides short term rehab in a bedded option to restore and optimize health, avoid further loss of function and increase activities tolerance prior to discharge. (Therapy Assistant) Inpatient Unit (Fort Saskatchewan	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes Lymphedema, change in	n/a n/a
Community Hospital) - Provides short term rehab in a bedded option to restore and optimize health, avoid further loss of function and increase activities tolerance prior to discharge. (Physiotherapist I)	balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	
Outpatient Cardiac Rehab	Referral is not symptom based.	<u>Alberta Referral Directory -</u> <u>Service At Facility Data Entry</u>
Specialized Rehabilitation Outpatient Program (SROP) - Adult	Functional issues: balance or mobility, communication, cognition, mood/coping/adjustment	https://albertareferraldirectory. ca/PublicSearchController?dire ct=displayViewServiceAtFacility &serviceAtFacilityId=1006093 &pageNumberToDisplay=1&pu blicSearch=true
Rehabilitation Medicine Inpatient and Outpatient and Virtual	Fatigue, deconditioning, functional decline	not updated for COVID specific
Post COVID Clinic (Kaye Edmonton Clinic) - Numerous other ambulatory clinics; Plastics, Trauma, CF, Hematology, Acute Burns, NMD, MS, Rheumo, Multiple other Medicine & Surgery Units, Post-Transplant - Respirologist led clinic, for the assessment, treatment and follow up of post COVID patients with respiratory complications/ ambulatory clinics, self-descriptive		
Inpatient Rehab - Pediatric, Adult & Geriatric (Glenrose Rehabilitation Hospital)		
Inpatient Unit (Leduc Community Hospital) - Provides short term rehab in a bedded option to restore and optimize health, avoid further loss of function and increase activities tolerance prior to discharge. (PTI)	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	
Inpatient Unit/Emergency (Leduc Community Hospital) - Provides short term rehab in a bedded option to restore and optimize health, avoid further loss of function and increase activities tolerance prior to discharge (RTI)	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	n/a

Inpatient Unit (Leduc Community Hospital) - short term community occupational therapy services focused on enabling client to live safely and independently as preparation for discharge (OT)	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	n/a
Inpatient Unit/Emergency (Leduc Community Hospital) - short term crisis intervention, patient/family education, resource referral and advocacy, in inpatient, emergency and outpatient settings	Financial, guardianship, mental health, living arrangements needs	n/a
Inpatient (Acute Care) and Outpatient Rehab (Misericordia Community Hospital) - Family Medicine, Internal Medicine, ICU, Cardiac, Ortho, Gen Surgery, Geriatric Assessment - not operating currently , centralized, consult service for any of the units- cover all of the units, sought out on a consult basis, some standing orders to assess and treat for functional needs Outpatients: SLP- VFSS services, ALS patients, can see some limited other community , previously some communications but not since COVID OT: Community Cognitive Assessments- Plastics Upper Extremity - Lower Extremity assessments (case by case) footwear, orthotics assessment pre COVID PT: may see post COVID patients if MSK or post -op, self pay , certified hand therapist PT, general MSK, post surgical , Osteoperosis (transitioned to virtual) Better Balance (on hold)	Musculoskeletal	
Inpatient Rehab and Outpatient Rehab Therapy for hand Therapy, wound clinic, urogyne/pelvic pain, Home nutrition (Royal Alexandra Hospital)	Musculoskeletal	
Outpatient Cardiac Rehab	Referral Is not symptom based	<u>Alberta Referral Directory -</u> Service At Facility Data Entry
Virtual acute care hospital - UAH/Home Care (UAH Virtual Hospital) - Home based acute care - admitted to EZVH GIM physician with support from virtual hospital team (complex care coordination with integrated	Medicine Side- COPD, Heart Failure	

plan of care, complex medication management, self management support- education with remote digital monitoring, primary care attachment		
Virtual acute care hospital - UAH/Home Care (UAH Virtual Hospital) - Virtual outpatient- stays under the care of community provider and receives support and services of virtual hospital team	Surgical Side, Gen Surg, Ortho and UroGyne	
Inpatient Unit (Westview Health Clinic) - Provides short term rehab in a bedded option to restore and optimize health, avoid further loss of function and increase activities tolerance prior to discharge.	Lymphedema, change in balance, strength, ROM, scar tissue or cording, pain, cancer related fatigue, change in sensation, ADL, Speech, language, voice, swallowing changes, cognitive changes	n/a

Other Services

• Services outside of rehabilitation that can offer support to patients following COVID-19.

Program	Primary Symptoms	Referral Information
Psychiatrist Consult (Glenrose Rehabilitation Hospital)		
Inpatient Rehab (Sturgeon Community Hospital) - Occupational Therapy Outpatient Clinic specific to upper limb therapy		

BACKGROUND

About this pathway

Authors and conflict of interest declaration

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DISCLAIMER

This pathway represents evidence-based best practice but does not override the individual responsibility of health care professionals to make decisions appropriate to their patients using their own clinical judgment given their patients' specific clinical conditions, in consultation with patients/alternate decision makers. The pathway is not a substitute for clinical judgment or advice of a qualified health care professional. It is expected that all users will seek advice of other appropriately qualified and regulated health care providers with any issues transcending their specific knowledge, scope of regulated practice or professional competence.

PROVIDER RESOURCES

Greenhalgh Trisha, Koh Gerald Choon Huat,	
Car Josip. Covid-19: a remote assessment in	https://www.bmj.com/content/bmj/368/bmj.m1182.full.pdf
primary care <i>BMJ</i> 2020; 368 :m1182	
Information for Primary Care Providers: novel	https://www.elbertabaoltboonvisco.co/tanico/Daga160E6.comv
coronavirus (COVID-19)	https://www.albertahealthservices.ca/topics/Page16956.aspx
Scientific Advisory Group	https://www.albertahealthservices.ca/topics/Page17074.aspx
Oxford COVID-19 Evidence Service Team	
Nuffield Department of Primary Care Health	https://www.cebm.net/covid-19/are-there-any-evidence-based-
Sciences University of Oxford: How should we	ways-of-assessing-dyspnoea-breathlessness-by-telephone-or-
assess dyspnea (breathlessness) by	<u>video/</u>
telephone or video?	
Novel Coronavirus (COVID-19) Frequently	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-
Asked Questions – for Community Physicians	covid-19-primary-care-faq.pdf
Post-COVID Pulmonary clinic information	https://www.pcnconnectmd.com/wp-
	content/uploads/2020/12/PostCOVID-Letter-to-Family-
	Physicians-Dec2020.pdf

PATIENT RESOURCES

Information for Albertans: COVID-19	https://www.albertahealthservices.ca/topics/Page16944.aspx
COVID-19 info for Albertans	https://www.alberta.ca/coronavirus-info-for-
	albertans.aspx?utm_source=google&utm_medium=sem&utm_ca
	mpaign=Covid19&utm_term=beinformed&utm_content=v7&gclid
	=EAlalQobChMI-
	obwtuPK6AIVeyCtBh1ijAQUEAAYASAAEgLsQPD_BwE
How to manage symptoms	https://myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=c
	ustom.ab covid 19 symptom mgmt 001
Smoking cessation	https://www.albertaquits.ca/topics/smoking-vaping-covid-19
Alberta Healthy Living Program: COVID-19	These classes are open to all zones/any Albertan over the age
classes for Albertans – Helping You Feel	of 18 and are free of charge
Better After COVID-19	https://www.albertahealthservices.ca/assets/programs/ps-cdm-
	calgary-after-covid-19-online-courses.pdf
Getting Healthy after COVID-19	https://www.albertahealthservices.ca/topics/Page17397.aspx