Interim COVID-19 Testing Guidance for Healthcare Providers

Test all patients with symptoms consistent with COVID-19

Healthcare providers should test all patients with new onset of symptoms consistent with COVID-19, regardless of their age or health status. COVID-19 patients may present with

- Cough, or
- Shortness of breath or difficulty breathing

OR at least two of:

- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

Other patients should be tested per clinical judgment. Rapidly testing all patients with symptoms consistent with COVID-19 is critical to identifying and isolating cases, quarantining their contacts, and suppressing community spread. While this guidance expands the groups of persons eligible for testing, prioritizing testing of certain symptomatic persons may be necessary until adequate test supplies are available.

If resources are limited, prioritize the following symptomatic patients for COVID-19 testing

- Hospitalized patients with severe lower respiratory illness
- Workers in healthcare facilities, congregate living settings, critical infrastructure and public safety/first responders
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters
- Persons identified through public health cluster and selected contact investigations
- Persons at higher risk of severe outcome
- Persons who are pregnant and in labor or scheduled for delivery

At present, limit testing of asymptomatic persons to:

- Close contacts of a case (if a close contact tests negative, these individuals still need to remain in quarantine for 14 days after their last date of exposure)
- Individuals exposed to COVID-19 during an outbreak in a congregate setting (e.g., long term care facility, shelters, correctional settings, agricultural workers, meat-packing plants, etc.)
- Persons from racial and ethnic minority groups disproportionately affected by adverse COVID-19 outcomes—currently African Americans, Hispanics and Latinos, American Indians and Alaska Natives

If adequate supplies are available, testing asymptomatic people can be considered for:

- Persons who are pregnant and present in labor
- People undergoing procedures that increase the risk of aerosolized particle spread
- People undergoing invasive surgical procedures (if possible, test within 48 hours of procedure)
Testing is not generally recommended for new asymptomatic admissions to a healthcare or long-term care facility, unless to a healthcare facility is using the information for cohorting.

**Educate all patients you test**

If COVID-19 is being considered, whether testing is performed or not, provide the following guidance documents to patients, and emphasize isolation for ill persons and self-quarantine for exposed contacts.

- **Patients with confirmed or suspected COVID-19**
- **Patients who were exposed to a confirmed COVID-19 case**
- **Unexposed patients with COVID-19 symptoms**

**Request testing supplies and personal protective equipment (PPE)**

If you do not have PPE, contact your local emergency management agency to request and receive these items. If you represent a Tribal Nation or a Local Health Jurisdiction, testing specimen collection supplies can be ordered using the [Specimen Collection Request Portal](https://www.cdc.gov/coronavirus/2019-ncov/lab/guidelines-clinical-specimens.html).

**Swabs for COVID-19 testing**

Any upper respiratory specimen type in the table below is acceptable for testing symptomatic and asymptomatic persons. A lower respiratory specimen should be obtained in those with severe lower respiratory disease requiring intubation or other invasive lower respiratory procedure such as bronchoscopy or bronchoalveolar lavage.

<table>
<thead>
<tr>
<th>Specimen type</th>
<th>Healthcare provider collection</th>
<th>Supervised self-collection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nasal (anterior nares)</td>
<td>Flocked or spun polyester swab with plastic shaft</td>
<td>Flocked or spun polyester swab with plastic shaft</td>
</tr>
<tr>
<td>Nasopharyngeal</td>
<td>Synthetic swab with wire shaft</td>
<td>No</td>
</tr>
<tr>
<td>Nasal mid-turbinate</td>
<td>Flocked tapered swab</td>
<td>Flocked tapered swab</td>
</tr>
<tr>
<td>Nasal/nasopharyngeal wash/aspirate</td>
<td>If swab not possible</td>
<td>No</td>
</tr>
<tr>
<td>Oropharyngeal</td>
<td>If nasal or NP specimen not available. Use synthetic fiber swab with plastic shaft.</td>
<td>No</td>
</tr>
<tr>
<td>Sputum, tracheal aspirate, BAL, pleural fluid, lung biopsy</td>
<td>Sterile container</td>
<td>No</td>
</tr>
</tbody>
</table>

**Specimen Collection**

Follow directions on the test menu of the laboratory performing the test for specimen collection instructions, submission forms, and shipping requirements. Washington law requires healthcare providers to **include the patient’s name, date of birth, address and phone number**. The Washington State Insurance Commissioner has ordered that testing for COVID-19 be at no additional cost to patients.

- Collect a single nasal, mid-turbinate or nasopharyngeal (NP) specimen using a synthetic swab and place in 2-3 ml viral transport media – if VTM is not available, check with the receiving
laboratory whether saline is an acceptable substitute.


**In general, send specimens to commercial laboratories**

There are currently more than 25 laboratories in Washington performing diagnostic testing for COVID-19. In general, healthcare providers should send specimens for COVID-19 testing to commercial or academic laboratories. Follow directions on the laboratory’s test menu for specimen collection instructions, submission forms, and shipping requirements.

**For certain situations, send specimens to the Public Health Laboratories (PHL)**

Specimens from the following patients can be tested at the Washington State Public Health Laboratories:

- Workers in healthcare facilities, congregate living settings, critical infrastructure and public safety/first responders
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters
- Persons identified through public health cluster and selected contact investigations
- Patients with no health insurance

PHL will fax its results to the submitter and local health jurisdiction (LHJ). For PHL testing, collect specimens and send with the COVID-19 submission form including submitter name, address, phone number, and fax number. For complete instructions on specimen collection and submission to PHL, see COVID-19 at: https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/PublicHealthLaboratories/MicrobiologyLabTestMenu


**Interpreting test results**

The preferred diagnostic test for COVID-19 is a PCR-based test. At this point in time, specimens sent to CLIA-certified labs for PCR-based tests have demonstrated higher sensitivity and fewer false negatives than currently available point-of-care tests. While increasingly available, serology or antibody tests are not recommended for making a diagnosis of COVID-19 or to reliably determine whether or not someone has experienced a past infection with COVID-19. Indeterminate results do not rule out COVID-19 infection. False negative results can occur. If indicated and suspicion is high, a person with a negative test should be retested and complete recommended quarantine or self-monitoring.

**Testing of Unaccompanied Minors**

Youth and young adults, under the age of 18, presenting for care without their parents or guardians can be tested under the following circumstances:

- If they are legally emancipated

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov
• If they are living homeless
• If they are considered a ‘Mature Minor’

“Mature Minor Doctrine” if the provider deems they are capable of understanding or appreciating the consequences of a medical procedure. In determining whether the patient is a mature minor, providers will evaluate the minor’s age, intelligence, maturity, training, experience, economic independence or lack thereof, general conduct as an adult and freedom from the control of parents.