Premier Health Diagnostic Testing for CoVID-19 4/20/2020

- 1. Baseline testing
 - a. Single NP swab sent for SARS-COV-2 RNA, qualitative when there is a clinical concern for active infection
 - i. Indications for testing may include acute pulmonary infections, acute diarrhea without clear etiology
 - ii. Routine screening of asymptomatic patients or asymptomatic health care workers is not indicated at this time
- 2. Repeat testing
 - a. If the initial test is negative and a clinical concern for CoVID-19 still exists, repeat testing can be performed
 - i. Repeat testing is discouraged in cases where an alternative diagnosis has been confirmed (i.e. bacteremia, sepsis of an identified etiology)
 - ii. Repeat testing must occur at least 24 hours after the original NP swab
 - iii. Repeat testing should NOT be performed on patients who test negative and are being discharged to home
- 3. Clearance of infection and removal from CoVID-19 isolation
 - a. Repeat testing for clearance of the infection is only required for patients who require testing for discharge purposes (i.e. going to an ECF or inpatient rehab) or have a prolonged and ongoing admission to the hospital of greater than 2 weeks
 - b. NP swab for SARS-COV-2 RNA, qualitative should be repeated on day 17 from the onset of their symptoms
 - In a stable patient <u>not</u> on the ventilator, if repeat PCR testing is negative at least 17 days after the onset of symptoms, patient may be removed from isolation if there is no further clinical concern for ongoing infection (afebrile for 3 days)
 - d. If the patient remains on the ventilator, then 2 consecutive negative tests are required before they are removed from CoVID-19 isolation
 - e. If the patient tests positive for ongoing viral shedding on day 17, they shall remain in isolation and testing shall be repeated around day 21 from the onset of symptoms. Repeat testing should occur every 3-4 days until the PCR is negative
 - f. Infectious Diseases service must clear the patient to be removed from the HRRU
- 4. Special circumstances
 - a. Davita dialysis units currently requires a negative CoVID-19 PCR before resuming regular HD if there was a clinical concern for COVID-19 infection
 - b. Fresenius dialysis units currently require 2 negative CoVID-19 PCR tests prior to being released back to their HD unit
 - c. Most ECF's require a single negative PCR prior to accepting a patient back but only when there was a clinical concern for infection and the patient was undergoing an evaluation. Recommend discussion with discharge planners to determine specific requirements of an individual facility.