May 11, 2020

Honorable Governor Kate Brown
c/o Jennifer Andrew
254 State Capitol
Salem, OR 97301-4047

RE: Benton County Application for Phase One Reopening

Dear Governor Brown,

The Benton County Board of Commissioners formally requests the Governor’s Office and Oregon Health Authority find our attached application for Phase One Reopening. Benton County’s economy has been adversely affected by the COVID-19 Pandemic while Benton County residents have been compliant with the Governor’s Executive Orders in an effort to “Stay Home, Save Lives”.

In collaboration with the Benton County Health Department, Public Health Administrator, County Administrator, Sheriff, and Emergency Management, this application details how Benton County will go above and beyond to ensure the safe and responsible reopening of our community. Outlined below is Benton County’s process to address each required prerequisites to open.

With these measures in place, and strict monitoring of our Phase One Reopening, we are confident we can progress forward in a responsible and safe manner that takes our community’s mental, physical, and economic health into consideration.

Please contact us if there are any additional questions.

Sincerely,

Pat Malone, Board of Commissioners, Chair

Charlie Fustin, Public Health Administrator

Dr. Bruce Thomson, Health Officer

Scott Jackson, Sheriff
Benton County COVID-19
Phase One Reopening Application

Prepared based on Governor Kate Brown’s
Public Health Framework for Reopening Oregon

Submitted to Oregon Health Authority and the Governor’s Office

May 11, 2020
Introduction

Benton County, Oregon is located in the Willamette Valley and has population of 92,101 according to 2018 census data. Within Benton County, there are approximately 2,800 businesses including the largest university in the State of Oregon (Oregon State University). The economic and social impacts of COVID-19 on these businesses are severe. According to the Bureau of Labor Statistics, the unemployment rate in Benton County is currently 2.9% (as of April 29th, 2020). May 2020 statistics are not currently available. Because of this impact to the community, Benton County is formally requesting the Governor's Office and Oregon Health Authority permission to initiate phase one reopening in a responsible and safe manner to support the physical health and safety of our community as well as the economic health and stability of our community.

Unemployment Claims for Benton County

Within Benton County, the hospital system is operated by Samaritan Health Services (SHS). Good Samaritan Regional Medical Center is the primary hospital in Benton County. The COVID-19 Pandemic (DR-4499) is being handled in partnership by the Benton County Health Department and Benton County Sheriff's Office Emergency Management. All coordination of services and resources is facilitated by the Benton County Emergency Operations Center.

As of May 11, 2020, the total number of COVID-19 positive cases in Benton County is 47 with five fatalities and only one hospitalization.

In this application, Benton County has outlined how local government will go above and beyond the minimum requirements to support a safe and responsible phase one reopening.
Prerequisites for a Phased Reopening of Oregon

1. Declining prevalence of COVID-19

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Responsibility</th>
<th>Does County Meet?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. The percentage of emergency department visits for COVID-19-like illnesses (CLI) are less than the historic average for flu at the same time of year.</td>
<td>State Data</td>
<td>✓ YES</td>
</tr>
<tr>
<td>b. A 14-day decline in COVID-19 hospital admissions.</td>
<td>State data</td>
<td>✓ YES</td>
</tr>
</tbody>
</table>

➢ The percentage of Emergency Department visits for COVID-19-like illnesses (CLI) are less than the historic average for influenza at this time of year. This data can be found in the state database ESSENCE.

Good Samaritan Data

COVID-19 Positive Cases and PUI

![Graph showing COVID-19 Positive Cases and PUI over time]

Good Samaritan Data

COVID-19 Positive Cases and PUI

![Graph showing COVID-19 Positive Cases and PUI over time]
This data is collected twice daily and indicates a steady decline in COVID-19 hospitalizations over the last 30 days.

Benton County Health Department and the Emergency Operations Center will track COVID-19 hospitalizations on a daily basis using ORPHEUS data so that it aligns with OHA data.

### 2. Minimum Testing Regimen

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Responsibility</th>
<th>Does County/Region Meet?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regions able to administer testing at a rate of 30 per 10k per week</td>
<td>Health Region</td>
<td>✓ YES</td>
</tr>
<tr>
<td>Sufficient testing sites accessible to underserved communities - include this information at county level, but will be assessed at region</td>
<td>Health Region</td>
<td>✓ YES</td>
</tr>
</tbody>
</table>

- *See the attached letters* from the Good Samaritan Regional Medical Center CEO and Chief Medical Officer that attests to the ability to conduct testing capacity at more than the required 30 per 10K people in all the counties that Samaritan Health System operates in (Linn, Lincoln, and Benton).

- Additionally, Oregon State University (OSU), in collaboration with Willamette Valley Toxicology (a local certified lab), is conducting the TRACE study to assess the prevalence of COVID-19 in the city of Corvallis. This study adds an additional 1000 tests per week within the City of Corvallis alone. So far, this study has found that the estimated rate of infection of COVID-19 based on data is 2 for every 1,000 people. This breaks down to about 0.2% or approximately 184 cases in the entire County. With that in mind, Benton County is able to greatly surpass the minimum number of tests needed per 10k people in the region.

- Benton County Community Health Clinics (CHC), Corvallis Clinic, and Corvallis Family Medicine add another handful of tests each week based on symptomatic patients with the ability to expand testing as needed.

- There are numerous testing sites including testing at Good Samaritan Regional Medical Center, as well as mobile sites in Corvallis, Urgent Care clinics for the Corvallis Clinic and Samaritan Health Systems, Corvallis Clinic, Corvallis Family Medicine, and at three Benton County Community Health Clinics.

- The Benton County Emergency Operations Center (EOC), in collaboration with the Benton County Health Department, Good Samaritan Regional Medical Center, OSU, and Benton County Community Health Clinics, has put together detailed operational plans to support mobile testing capabilities. The plans include the identification of possible testing site locations in all rural communities and the ability to support multi-lingual needs and congregate site outbreaks.

- Benton County already has a pre-established contract with Quest Labs to process test results; however, we also have the ability to execute an emergency contract with Willamette Valley Toxicology Labs or work through Oregon Office of Emergency
Management and OHA to process labs with LabCorp. Benton County is fortunate to have both a certified lab in downtown Corvallis and a large research university like OSU.

### 3. Contact Tracing System

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Responsibility</th>
<th>Does County/Region Meet?</th>
</tr>
</thead>
<tbody>
<tr>
<td>County has 15 contact tracers per 100k people</td>
<td>County</td>
<td>✓ YES</td>
</tr>
<tr>
<td>County contact tracing workforce is reflective of the county and able to work in needed language</td>
<td>County</td>
<td>✓ YES</td>
</tr>
<tr>
<td>County is prepared to trace 95% of all new cases within 24 hours</td>
<td>County</td>
<td>✓ YES</td>
</tr>
</tbody>
</table>

- Benton County normally employs two full-time positions dedicated to infectious disease investigation and contact tracing, a Communicable Disease Nurse, Communicable Disease Epidemiologist. Early in the COVID-19 response, Benton County Health Department trained an additional six staff including public health nurses, a health data specialist, environmental health specialists, and health promotion specialists. By May 13th an additional eight staff will be fully trained bringing our total contact tracing staff to sixteen, thereby exceeding the mandate of 15/100,000 which translates to fourteen staff for Benton County’s population of 92,101. To assure 24/7 availability and staffing that is reflective of our population, during the following week an additional six community health workers will be trained and added to the contact tracing team, bringing the total to twenty-two. Of these, six (6) are Spanish-speaking, one (1) is Arabic-speaking, and one (1) is Russian speaking. We also have a growing list of community members willing to volunteer as contact tracers, many of them with prior training in communicable disease investigation, social work, public health, and nursing. Furthermore, there are discussions with OSU to train some of their Student Health Services medical staff in contact tracing to specifically support OSU students and provide additional surge capacity as needed. All of this provides Benton County the ability to sustain and expand the program significantly.

- A detailed contact tracing program has been developed and is being finalized and documented to support training of non-health department staff and/or volunteers (Benton County Health Department Comprehensive Contact Tracing Program).

### 4. Isolation Facilities

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Responsibility</th>
<th>Does County/Region Meet?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counties have hotel rooms available for those who cannot self-isolate</td>
<td>County</td>
<td>✓ YES</td>
</tr>
<tr>
<td>Counties provide a narrative of how they will respond to three different outbreak situations in the county (e.g. nursing home, jail, food processing facility, farmworker housing, other group living situation)</td>
<td>County</td>
<td>✓ YES</td>
</tr>
</tbody>
</table>

- Benton County has already received preapproval for non-congregate sheltering for individuals who cannot self-isolate (from Oregon Office of Emergency Management and FEMA Region X). While pursuing this service, we have had numerous conversations with...
hotels/motels as well as OSU. In the city of Corvallis, hotels are prohibited from discriminating against clients based on medical conditions or disability. Finally, we have discussed the emergency use of school facilities if no other non-congregate options are available. Wrap around service providers have already been identified and MOUs and costs have been established. See below for breakdown of a few scenarios.

**Scenarios**

**Nursing home:** Benton County is already dealing with an outbreak in a long-term care facility (LTCF). This involves constant communication and collaboration with our Communicable Disease Nurse, Public Health Director, and Health Officer. Through coordination with the individuals listed above, Benton County will be testing all of the care facility staff and residents and provide additional PPE as needed to support care. Currently, the facility has established an isolation wing with dedicated staff to support those individuals. However, if the need should arise, Benton County is ready to support individuals into non-congregate sheltering at hotels and/or in coordination with Good Samaritan Regional Medical Center.

**Jail:** Benton County Jail is operated by the Benton County Sheriff’s Office. Since the outbreak began, the jail facility has been screening individuals to reduce the likelihood of having an outbreak. If an outbreak were to occur at the facility, the Benton County Sheriff’s Office is prepared to provide transportation to facilities that can support isolation. In addition, inmates are currently set up to be in single occupancy cells. The Corrections staff and inmates have access to medical personnel and testing as needed. Furthermore, if the need were to arise for an isolation facility, the Benton County Sheriff’s Office plans to offer a law enforcement-monitored isolation facility at a large County owned facility. This has been vetted by Benton County Sheriff’s Office command staff and Emergency Management.

**Food Processing Facility:** In the instance of an outbreak at a food processing facility, the Benton County Health Department will conduct the standard contact tracing and support a mobile testing site at the facility to test employees. In addition, if individuals do NOT have an option to self-isolate, the Benton County Health Department in collaboration with OHA will provide hotel sheltering.

**OSU Residence Hall:** In alignment with other institutions of higher education in Oregon, OSU leadership, housing and dining staff, and OSU’s COVID-19 Resumption and Continuity Leadership Team have developed frameworks, matrices, and planning guides to safely and gradually resume on-site operations in close partnership with the County. University resumption planning contains comprehensive prevention and mitigation strategies, including testing, tracing, containment and support. OSU has personnel available to assist the Benton County Public Health Contact Tracing team as needed. OSU will also create isolation areas within residence halls on the OSU campus to support self-isolation of COVID-19 positive residential students. Isolation plans for residential students include the provision of medical monitoring and support and wrap around services, such as food delivery, custodial services, and assistance in continuing academic progress. In the event of multiple cases occurring within a residence hall, the university will work with county health authorities on appropriate containment measures, such as isolating cases to a designated floor or wing. This has been vetted by OSU, Benton County Health Department, and Benton County Emergency Management.
## 5. Finalized Sector Guidance

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Responsibility</th>
<th>Does County/Region Meet?</th>
</tr>
</thead>
<tbody>
<tr>
<td>State guidance</td>
<td>State</td>
<td>✓ YES</td>
</tr>
<tr>
<td>Public Information (see below)</td>
<td>County</td>
<td>✓ YES</td>
</tr>
<tr>
<td>Sector Education plan</td>
<td>County</td>
<td>✓ YES</td>
</tr>
</tbody>
</table>

- Benton County Emergency Operations Center has established an Economic Recovery Team. In collaboration with the Benton County Joint Information Center, a webpage has been established that has all the Statewide Sector Guidance including infographics, signs to be posted, and best practices to support a safe reopening.

- The Economic Recovery Team has created a process to educate businesses on the state requirements, guidance, and best practices. Benton County EOC is creating a webpage and will utilize their call bank number for public health safety related complaints. The webpage will be operational by Friday 5/15/2020.

- An extensive social media campaign and media releases will also help guide business owners to informational resources (e.g. Business Oregon’s ORPIN page to find PPE).

- Benton County plans to further support businesses in reopening by offering specific guidance on a ‘request” basis.

## 6. Sufficient Health Care Capacity

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Responsibility</th>
<th>Does County/Region Meet?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region must be able to accommodate a 20% increase in hospitalizations</td>
<td>Health Region</td>
<td>✓ YES</td>
</tr>
</tbody>
</table>

- See the attached attestation from the Good Samaritan Regional Medical Center CEO and Chief Medical Officer. The attestation states that GSRMC has the capacity within Linn, Benton, and Lincoln counties to support a surge of COVID-19 patients. The standard surge capacity at GSRMC is an additional 20% bed capacity and broken down below.

- Good Samaritan Regional Medical Center has the following capacity:
  - Normal beds: 208
  - Surge capacity: 20
  - ICU beds: 14
  - Ventilators: 28

- Additionally, Benton County Emergency Operations Center in collaboration with GSMRC, Corvallis Clinic, Benton County Community Health Clinic, Ambulance Service Area providers, OSU, and Public Health have a written Alternate Care Site plan that can support additional hospital surge capacity. This plan was completed in early April and is ready to initiate if needed. The Benton County EOC holds twice daily briefings and checks in with GSRMC to track their hospital census data and surge status. The Benton County EOC and GSRMC have established trigger points to initiate the Alternate Care Site surge plan. The
Alternate Care Site plan adds an additional 30-50 bed capacity. Under extreme conditions, the total bed capacity for Benton County would be approximately 260 total.

<table>
<thead>
<tr>
<th>Criteria</th>
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<tbody>
<tr>
<td>Hospitals in region are reporting PPE supply daily through HOSCAP</td>
<td>County (hospital)</td>
<td>✓ YES</td>
</tr>
<tr>
<td>Hospitals in region must have 30 day supply of PPE depending on their size</td>
<td>County (hospital)</td>
<td>✓ YES</td>
</tr>
<tr>
<td>Counties must have sufficient PPE for first responders.</td>
<td>County</td>
<td>✓ YES</td>
</tr>
</tbody>
</table>

- See attached attestation from the Good Samaritan Regional Medical Center CEO and Chief Medical Officer attesting to sufficient PPE with at LEAST a 30 day supply across the Samaritan Health System (Linn, Lincoln, and Benton). Additional PPE coordination is being handled by OHA Region 2 Liaisons.

- See attached attestation from the Benton County Board of Commissioners about PPE

- Benton County Emergency Operations Center and Emergency Management are maintaining an accurate and active inventory of the PPE stockpile. This PPE will be used to support hospital surges, alternate care sites, long term care facilities, and first responders, as needed. Benton County EOC is monitoring both the GSRMC PPE status on a daily basis as well as receiving burn rates from long term care facilities and other first responder agencies. The Benton County EOC has letters of attestation from first responder agencies attesting to adequate and sufficient PPE for front-line staff. Corvallis Fire Department and the Benton County Sheriff’s Office are planning to purchase a H2O2 sanitizing system to support the sanitization of ambulances, fire apparatus, patrol vehicles, jail cells, equipment, and PPE in accordance with CDC guidelines.

Thank you for taking the time to consider our application for Phase One Reopening. If you have any questions or need additional details, please contact:

Bryan Lee
Emergency Manager
Benton County
bryan.lee@co.benton.or.us
541-231-0224

Charlie Fautin
Public Health Administrator
Charlie.fautin@co.benton.or.us
541-766-6840
May 11, 2020

Honorable Governor Kate Brown
c/o Jennifer Andrew
254 State Capitol
Salem, OR 97301-4047

RE: PPE Attestation Benton County Application for Phase One Reopening

Dear Governor Brown,

The Benton County Board of Commissioners formally attests that the County has sufficient Personal Protective Equipment (PPE) for all first responders and enough PPE to supply the Good Samaritan Regional Medical Center should a significant surge occur. Our PPE inventory is updated daily to reflect any deliveries of PPE to first responder organizations, clinics, or the hospital. We have letters of attestation to at least 30 days of PPE from the Ambulance Service Area provider (Corvallis Fire), Law Enforcement, County Fire agencies, and Good Samaritan Regional Medical Center (GSRMC). The PPE inventory is maintained by the Benton County Emergency Operations Center and PPE is allocated based on OHA guidelines and decisions by the Benton County PPE Allocation Committee.

Please contact us if there are any additional questions.

Sincerely,

Pat Malone, Board of Commissioners, Chair

Charlie Fautin, Public Health Administrator

Dr. Bruce Thomson, Health Officer

Scott Jackson, Sheriff
Hospital Attestation to Resume Non-Emergent or Elective Procedures

On April 27, 2020, the Governor issued Executive Order 20-22, that allowed hospitals to resume non-emergent or elective procedures, by May 1, 2020 at the earliest, if a hospital is in compliance with Oregon Health Authority (OHA) guidance. The guidance issued by OHA on April 29, 2020, requires hospitals to have adequate personal protective equipment (PPE) on hand and to attest to OHA prior to resuming non-emergent or elective procedures, that the hospital meets OHA standards.¹

This attestation form must be signed by an individual with legal authority to act on behalf of the hospital or health system.

I, Robert J. Turngren (printed name), on behalf of Samaritan Health Services, Inc. (name of hospital or health system), attest to the following (please check any of the boxes that apply and supply any additional information):

☑ The hospital or health system intends to resume non-emergent or elective procedures by (insert date) May 1, 2020

☑ The hospital or hospitals within the health system have adequate medical grade PPE supplies that meet applicable National Institute for Occupational Safety and Health and U.S. Food and Drug Administration regulations for performing non-emergent or elective procedures.

☐ As a large hospital (as defined in OHA guidance) the hospital has an adequate 30-day supply of PPE on hand that is appropriate to the number and type of procedures to be performed or an open supply chain, as that is defined in OHA’s guidance.

☐ As a small hospital (as that is defined in OHA guidance), the hospital has an adequate 14-day supply of PPE that is appropriate to the number and type of procedures to be performed on hand or an open supply chain, as that is defined in OHA’s guidance.

¹ The guidance can be found at https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2322u.pdf.

OHA 2322V (4/30/2020)
As a health system, PPE supplies on hand were calculated at a health system level and the PPE requirements can be met for each of the hospitals within the health system listed below.

If a health system is submitting this attestation, please list all of the hospitals in the system for which this attestation applies:

Good Samaritan Regional Medical Center, Samaritan Albany General Hospital,
Samaritan Lebanon Community Hospital, Samaritan North Lincoln Hospital,
Samaritan Pacific Communities Hospital.

I certify that the responses in this attestation are accurate and complete. I understand that if OHA determines that a hospital is not in compliance with the PPE requirements, OHA may require the hospital to cease performing non-emergent or elective procedures for a specified period of time.

Robert J. Turngren, SVP, Chief Medical Officer
Printed name and title

Signature

April 30, 2020
Date
May 7, 2020

Benton County Board of Commissioners
205 NW 5th St.
Corvallis, OR 97330

Dear Commissioners:

In response to your request, Samaritan Health Services provides this update on our bed surge capacity planning, personal protective equipment (PPE) supply chain reliability and commitment to daily PPE reporting to the Oregon Health Authority. Attached is our communication we have provided to the Oregon Health Authority around starting elective and non-urgent procedures.

Bed Surge Capacity
Samaritan activated our Incident Command structure on March 12, 2020, to begin planning for an anticipated surge of COVID-19 patients. We developed a four-phase surge plan to accommodate the needs of our communities. Specific to Benton County the Good Samaritan Regional Medical Center plan includes both ensuring adequate ICU beds as well as acute care beds. Fortunately, the anticipated surge was avoided by the quick action and strict adherence to the Governor’s “Stay Home, Save Lives” order. Good Samaritan Regional Medical Center has adequate bed capacity to accommodate an increase in volume if we experience a future surge of COVID-19 patients. Samaritan reports bed capacity as well as ventilator usage to the Oregon Health Authority through the HOSCAP system. We have committed to continuing this reporting of bed capacity to the Oregon Health Authority.

PPE Supply Chain Reliability
Samaritan immediately began work to ensure we have access to adequate PPE to accommodate the expected surge. As a result, Samaritan has contracts in place that allow for sustained PPE supply.

PPE Reporting to Oregon Health Authority
Samaritan reports PPE to the Oregon Health Authority through the HOSCAP system. We have committed to continuing this reporting of PPE to the Oregon Health Authority.

Samaritan Health Services is committed to maintaining our preparedness and stands ready to serve the needs of our communities.

Sincerely,

Douglas R. Boysen, JD, MHA
President & Chief Executive Officer

Robert J. Turngren, MD, MBA
Senior Vice President & Chief Medical Officer
APPLICATION

All Samaritan Health Services (SHS) clinicians.

DEFINITIONS

- NONE

INSTRUCTION STEPS

**PRIORITY FOR TESTING:**

Symptomatic Patients:
- All patients with clinical concern for COVID-19

    Have a high index of suspicion for COVID-19 in symptomatic healthcare workers, first responders, patients in long-term care facilities or other congregate living facilities, patients over age 60, pregnant women, immunosuppressed patients and those at high risk of transmission to others.

Asymptomatic Patients:
- Scheduled for a surgical procedure
- Scheduled for an obstetric procedure or in active labor
*No other asymptomatic patients should be tested at this time

1. **SYMPTOMATIC INPATIENT TESTING GUIDANCE**
   A. BAL/sputum is the preferred specimen type for inpatients. Next best would be nasopharyngeal swab followed by oropharyngeal swab.
   B. Sputum and BAL samples will be sent to the Oregon State Public Health Laboratory (OSPHL) and requires additional online documentation (see instructions below)
   C. As of April 13, 2020, nasopharyngeal swabs will be sent to Legacy Laboratories
   D. If inpatient testing is pursued, please alert your local infection preventionist

2. **NASOPHARYNGEAL SWAB**
   A. Order SARS-CoV-2 (COVID-19) AND ISOLATION PANEL (aka COVID)
      1) This will default to Coronavirus SARS-CoV-2 by PCR (Legacy) and Special Droplet and Contact Isolation Status.
         i. For BAL/Sputum samples, deselect the Legacy order and select the OPHL test and follow the instructions below:

---

If printed, this document is current for this date only: May 7, 2020
Current Work Instructions can be found on the SHS intranet.
3. **BAL or SPUTUM**
   A. Ordering clinician must first submit an electronic request at
      http://www.healthoregon.org/howtoreport
      1) Click the button for “Online Morbidity Report.”
      2) Select COVID-19.
      3) Answer the clinical questions.
      4) Complete all requested information.
   B. Order SARS-CoV-2 (COVID-19) AND ISOLATION PANEL (aka Covid)
      1) This will default to Coronavirus SARS-CoV-2 by PCR (Legacy) and Special Droplet
         and Contact Isolation Status. You will deselect the Legacy order and select the OPHL
         test instead.

4. **SYMPTOMATIC OUTPATIENT or ED WITHOUT NEED FOR ADMISSION TESTING GUIDANCE**
   Severely ill patients who will be transferred to a higher level of care should not be tested in an
   outpatient setting.
   A. **How to Send Testing in Outpatient Setting**
      1) Enter Epic Order COVID 19 PATIENT ORDER & MONITORING (it orders a test and
         monitoring)
      2) If patient is already being seen in the office:
         a) Collect specimen using droplet precautions (face mask, eye protection), and contact
            precautions (gown and gloves)
            i. Acceptable sources are nasopharyngeal swabs
         b) Place swab in viral transport media, affix specimen label
         c) Double bag specimen and place form in outer bag
         d) Arrange delivery to nearest hospital laboratory
      3) If patient is being seen in the office, but the clinic lacks appropriate PPE or specimen
         collection supplies, inform the patient that a member of the care team will be reaching
         out to schedule a time for the specimen to be collected at one of the SHS COVID-19
         Testing Centers.
      4) If patient is seeking care through a phone visit or E-visit:
         a) After ordering, inform the patient that a member of the care team will be reaching
            out to schedule a time for the specimen to be collected at one of the SHS COVID-19
            Testing Centers.

5. **ASYMPTOMATIC PATIENTS (PRE-PROCEDURE OR OB ONLY)**
   A. Use Epic order: Asymptomatic – Coronavirus – SARS-CoV-2 by PCR (Legacy) (aka
      COVID)
   B. Isolation precautions are not recommended for asymptomatic inpatients at this time
   C. [Testing Protocol for Asymptomatic Surgical Patients](#)
   D. [Universal Screening for Labor & Delivery due to COVID-19](#)

6. **CDC Specimen Collection Guidance**

**ATTACHMENTS**
- NONE

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If printed, this document is current for this date only: May 7, 2020
Current Work Instructions can be found on the SHS intranet.
REFERENCES
- Testing Kit Information – SHS Insider > Emerging Pathogens

REVIEW/REVISION HISTORY

<table>
<thead>
<tr>
<th>Date of Revision</th>
<th>Revision #</th>
<th>Revision / Review</th>
<th>Revision Description</th>
<th>Collaborated With</th>
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</thead>
<tbody>
<tr>
<td>3/16/2020</td>
<td>0</td>
<td>New</td>
<td>SHS Coronavirus Task Force: Infectious Disease, Infection Prevention, Patient Care Services, Emergency Management, Administration, Project Management</td>
<td></td>
</tr>
<tr>
<td>3/18/2020</td>
<td>1</td>
<td>Revision</td>
<td>Update in priority for inpatient and outpatient testing, updated order instructions.</td>
<td>SHS Coronavirus Task Force</td>
</tr>
<tr>
<td>3/19/2020</td>
<td>2</td>
<td>Revision</td>
<td>Added list of high risk symptoms</td>
<td>SHS Coronavirus Task Force</td>
</tr>
<tr>
<td>3/28/2020</td>
<td>3</td>
<td>Revision</td>
<td>Updated inpatient testing guidance per OHA</td>
<td>SHS Coronavirus Task Force</td>
</tr>
<tr>
<td>4/14/2020</td>
<td>4</td>
<td>Revision</td>
<td>Significant updates to testing priority information and instructions for where labs will be sent. Addition of information for asymptomatic screening. Changed name from “Coronavirus Testing Guidance.”</td>
<td>SHS Coronavirus Task Force</td>
</tr>
<tr>
<td>4/14/2020</td>
<td>5</td>
<td>Revision</td>
<td>Clarification of Lab Ordering in Epic</td>
<td>SHS Coronavirus Task Force</td>
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<tr>
<td>4/21/2020</td>
<td>6</td>
<td>Revision</td>
<td>Expansion of testing priority to include all patients with a clinical concern for COVID-19.</td>
<td>SHS Coronavirus Task Force</td>
</tr>
</tbody>
</table>

Select
May 11, 2020

Benton County Board of Commissioners
205 NW 5th St.
Corvallis, OR 97330

Dear Commissioners:

In response to your request, Samaritan Health Services provides this update on testing capacity and access to testing in Benton County.

**Test Capacity**
Samaritan Health Services operates one hospital, a mobile COVID-19 testing site, as well as two Urgent Cares and multiple primary care clinics in Benton County that are capable of performing COVID-19 tests. Samaritan has adopted the testing guidance (attached) which prioritizes all patients with symptoms consistent with COVID-19 for testing. In addition, asymptomatic patients that will be receiving a scheduled surgical or OB procedure are also prioritized for testing in the region.

Additional information on the locations currently offering COVID-19 testing in Benton County can be found on page two. In the last week (May 1 – May 8, 2020) Samaritan administered 904 COVID-19 tests in Linn, Benton and Lincoln Counties. Samaritan maintains additional capacity in order to increase the number of tests administered. In Benton County specifically for the same time period, a total of 507 COVID-19 tests were administered. The average turnaround time on the tests performed system-wide was 1.3 days through Legacy Health Laboratory.

Samaritan is currently administering COVID-19 tests 7 days a week through its various facilities. The mobile COVID-19 testing sites have the capacity to administer 138 tests per day, our urgent care and emergency departments are also able to administer testing in excess of that number. Samaritan closely monitors the testing demand in the region and will adjust the hours of operation of the COVID-19 testing sites if necessary, in order to meet the community need.

**Access to Testing**
Samaritan Health Services has established a public facing website samhealth.org/coronavirus that lists a variety of information for patients who are seeking COVID-19 testing and/or treatment. In addition, Samaritan has created a free-assessment using a MyChart E-Visit that all patients in our region can complete whether they are an established Samaritan patient or a new patient. The assessment screens patients for symptoms consistent with COVID-19 and clinicians can order a COVID-19 test for the patient following the assessment.

In addition to information on our website, we have also sent an email to more than 140,000 patients in both English and Spanish, sent press releases to local newspapers, promoted the availability of testing on our social media platforms and communicated with our Counties to help share the information with our communities.

Samaritan Health Services is committed to maintaining our preparedness and stands ready to serve the needs of our communities.

Sincerely,

Douglas R. Boysen, JD, MHA
President & Chief Executive Officer

Robert J. Turngren, MD, MBA
Senior Vice President & Chief Medical Officer
Samaritan Benton County Locations for COVID-19 Testing:

1. **Good Samaritan Regional Medical Center Emergency Department**
   a. Open 7 days a week, 24 hours per day
   b. 3600 NW Samaritan Drive, Corvallis, OR 97330

2. **Samaritan COVID-19 Testing Site – Corvallis**
   a. Monday-Friday 9 am – 1 pm
   b. 2555 NE Belvue, Corvallis, OR 97330

3. **Samaritan Urgent Care Walk-In Clinic – Corvallis**
   a. Monday – Friday, 9 am – 8 pm, Saturday 9 am – 6 pm, Sunday 10 am – 6 pm
   b. 5234 SW Philomath Blvd., Corvallis, OR 97333

4. **Samaritan Urgent Care Walk-In Clinic – North Albany**
   a. Monday – Friday, 9 am – 8 pm, Saturday 9 am – 6 pm, Sunday 10 am – 6 pm
   b. 400 NW Hickory St # 303, Albany, OR 97321

5. **SamCare Express Corvallis**
   a. Asymptomatic COVID-19 Screening Tests Only
   b. Saturday, 9 am – 6 pm & Sunday 10 am – 6 pm
   c. 990 NW Circle Blvd, Suite 101, Corvallis, OR 97330
APPLICATION

All Samaritan Health Services (SHS) clinicians.

DEFINITIONS

- NONE

INSTRUCTION STEPS

PRIORITY FOR TESTING:

Symptomatic Patients:
- All patients with clinical concern for COVID-19

Have a high index of suspicion for COVID-19 in symptomatic healthcare workers, first responders, patients in long-term care facilities or other congregate living facilities, patients over age 60, pregnant women, immunosuppressed patients and those at high risk of transmission to others.

Asymptomatic Patients:
- Scheduled for a surgical procedure
- Scheduled for an obstetric procedure or in active labor

*No other asymptomatic patients should be tested at this time

1. SYMPTOMATIC INPATIENT TESTING GUIDANCE
   A. BAL/sputum is the preferred specimen type for inpatients. Next best would be nasopharyngeal swab followed by oropharyngeal swab.
   B. Sputum and BAL samples will be sent to the Oregon State Public Health Laboratory (OSPHL) and requires additional online documentation (see instructions below)
   C. As of April 13, 2020, nasopharyngeal swabs will be sent to Legacy Laboratories
   D. If inpatient testing is pursued, please alert your local infection preventionist

2. NASOPHARYNGEAL SWAB
   A. Order SARS-CoV-2 (COVID-19) AND ISOLATION PANEL (aka COVID)
      1) This will default to Coronavirus SARS-CoV-2 by PCR (Legacy) and Special Droplet and Contact Isolation Status.
      i. For BAL/Sputum samples, deselect the Legacy order and select the OPHL test and follow the instructions below:

If printed, this document is current for this date only: May 7, 2020
Current Work Instructions can be found on the SHS intranet.
3. **BAL or SPUTUM**
   A. Ordering clinician must first submit an electronic request at http://www.healthoregon.org/howtoreport
      1) Click the button for “Online Morbidity Report.”
      2) Select COVID-19.
      3) Answer the clinical questions.
      4) Complete all requested information.
   B. Order SARS-CoV-2 (COVID-19) AND ISOLATION PANEL (aka Covid)
      1) This will default to Coronavirus SARS-CoV-2 by PCR (Legacy) and Special Droplet and Contact Isolation Status. You will deselect the Legacy order and select the OPHL test instead.

4. **SYMPTOMATIC OUTPATIENT or ED WITHOUT NEED FOR ADMISSION TESTING GUIDANCE**
   Severely ill patients who will be transferred to a higher level of care should not be tested in an outpatient setting.
   A. **How to Send Testing in Outpatient Setting**
      1) Enter Epic Order COVID 19 PATIENT ORDER & MONITORING (it orders a test and monitoring)
      2) If patient is already being seen in the office:
         a) Collect specimen using droplet precautions (face mask, eye protection), and contact precautions (gown and gloves)
            i. Acceptable sources are nasopharyngeal swabs
         b) Place swab in viral transport media, affix specimen label
         c) Double bag specimen and place form in outer bag
         d) Arrange delivery to nearest hospital laboratory
      3) If patient is being seen in the office, but the clinic lacks appropriate PPE or specimen collection supplies, inform the patient that a member of the care team will be reaching out to schedule a time for the specimen to be collected at one of the SHS COVID-19 Testing Centers.
      4) If patient is seeking care through a phone visit or E-visit:
         a) After ordering, inform the patient that a member of the care team will be reaching out to schedule a time for the specimen to be collected at one of the SHS COVID-19 Testing Centers.

5. **ASYMPTOMATIC PATIENTS (PRE-PROCEDURE OR OB ONLY)**
   A. Use Epic order: Asymptomatic – Coronavirus – SARS-CoV-2 by PCR (Legacy) (aka COVID)
   B. Isolation precautions are not recommended for asymptomatic inpatients at this time
   C. [Testing Protocol for Asymptomatic Surgical Patients](#)
   D. [Universal Screening for Labor & Delivery due to COVID-19](#)

6. **CDC Specimen Collection Guidance**

**ATTACHMENTS**
- NONE
REFERENCES
- Testing Kit Information – SHS Insider > Emerging Pathogens

REVIEW/REVISION HISTORY

<table>
<thead>
<tr>
<th>Date of Revision</th>
<th>Revision #</th>
<th>Revision / Review</th>
<th>Revision Description</th>
<th>Collaborated With (i.e. Standardization Committee, VP’s, Quality, Risk)</th>
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<tr>
<td>3/16/2020</td>
<td>0</td>
<td>New</td>
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<td>SHS Coronavirus Task Force: Infectious Disease, Infection Prevention, Patient Care Services, Emergency Management, Administration, Project Management</td>
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<tr>
<td>3/18/2020</td>
<td>1</td>
<td>Revision</td>
<td>Update in priority for inpatient and outpatient testing, updated order instructions.</td>
<td>SHS Coronavirus Task Force</td>
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<tr>
<td>3/19/2020</td>
<td>2</td>
<td>Revision</td>
<td>Added list of high risk symptoms</td>
<td>SHS Coronavirus Task Force</td>
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<td>3/28/2020</td>
<td>3</td>
<td>Revision</td>
<td>Updated inpatient testing guidance per OHA.</td>
<td>SHS Coronavirus Task Force</td>
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<tr>
<td>4/14/2020</td>
<td>4</td>
<td>Revision</td>
<td>Significant updates to testing priority information and instructions for where labs will be sent. Addition of information for asymptomatic screening. Changed name from “Coronavirus Testing Guidance.”</td>
<td>SHS Coronavirus Task Force</td>
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<tr>
<td>4/14/2020</td>
<td>5</td>
<td>Revision</td>
<td>Clarification of Lab Ordering in Epic.</td>
<td>SHS Coronavirus Task Force</td>
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<td>4/21/2020</td>
<td>6</td>
<td>Revision</td>
<td>Expansion of testing priority to include all patients with a clinical concern for COVID-19.</td>
<td>SHS Coronavirus Task Force</td>
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Select