April 4, 2020

Significant recent changes are highlighted in red text

Guidance for health systems regarding COVID-19 testing

Given growing availability of commercial testing options and less dependence on the Oregon State Public Health Laboratory (OSPHL) for testing, providers now have access to more expanded testing based on clinical judgment. Public Health approval is not needed for this testing.

The charge of OSPHL requires prioritized testing for certain groups. Criteria for testing at OSPHL have been revised and are described below.

Asymptomatic persons and those with symptoms that do not necessitate medical evaluation are not recommended for testing at this time. Individuals with mild symptoms that do not necessitate medical evaluation should remain at home until 72 hours after any fever or cough resolve. Persons with mild or moderate COVID-19-like illness who seek testing risk exposing others in healthcare settings, including members of the public, other patients, and healthcare workers. Evaluation and testing of such persons in a healthcare setting consumes resources that may become extremely limited, including personal protective equipment (PPE), swabs and viral transport media used to collect diagnostic specimens, and ties up clinical resources, including healthcare staff and rooms.

Testing at clinical laboratories

1. Clinicians can order COVID-19 testing at their discretion through clinical laboratories, including some Oregon hospital laboratories as well as commercial reference labs such as LabCorp and Quest Diagnostics.
   a. Clinicians do not need to routinely notify the local public health authority (LPHA) or the Oregon Health Authority (OHA) when evaluating patients with respiratory illness or ordering COVID-19 testing.
   b. Because COVID-19 and influenza (which is treatable) can present in similar fashion, while influenza is circulating, an influenza test should be ordered prior to ordering COVID-19 testing.
   c. Employers are responsible for making testing available to their healthcare workers who should be tested according to the recommendations below.

2. Recommendations for COVID-19 testing at clinical laboratories: persons in the following groups with fever, cough, or dyspnea:
   a. Healthcare workers and first responders (EMS, public safety workers)
   b. Patients with worsening symptoms
   c. Patients 60 years of age or older
   d. Patients with underlying medical conditions, including, but not limited to hypertension, diabetes, cardiovascular disease, lung disease, and immunocompromising conditions
   e. Pregnant women
   f. Patients who had contact with a suspect or lab-confirmed COVID-19 patient within 14 days of their symptom onset
3. Patients presenting with respiratory symptoms should be masked. Providers should use standard, contact, and droplet precautions with eye protection for the evaluation or treatment of a patient with respiratory symptoms.

4. If a patient does not have a clinical need to be sent to an emergency department or a hospital, do not send them there.
   a. Patients with respiratory symptoms should be advised to self-isolate at home until 72 hours after both fever and cough (if present) resolve.
   b. Discuss with symptomatic patients a plan to seek appropriate medical care should symptoms worsen.

5. Avoid any aerosol-generating procedures, including respiratory therapy treatments (e.g., nebulized medications), that are not immediately required for patient care. Note that collection of nasopharyngeal (NP) and oropharyngeal (OP) swabs and nasopharyngeal washes are not considered aerosol-generating procedures.

**Testing at Oregon State Public Health Laboratory**

1. Expedited testing approval for COVID-19 testing at the Oregon State Public Health Laboratory.
   a. A patient who meets all of the following criteria will be approved for testing:
      i. Clinical need for admission to an inpatient facility;
      ii. Evidence of viral lower respiratory infection; and
      iii. While influenza is circulating, an influenza test ordered.
   b. For such patients, clinicians must submit an electronic request for testing through a Confidential Oregon Morbidity Report, found at [healthoregon.org/howtoreport](http://healthoregon.org/howtoreport):
      i. Click the button for “Online Morbidity Report.”
      ii. Select COVID-19.
      iii. Answer all three clinical questions.
      iv. Complete all of the requested information.
      v. Public health officials will review the electronic submission for record-keeping.
   c. For such patients, you do not need to call your local public health authority or Oregon Health Authority for approval.
   d. Collect, package and ship the specimen, along with a completed Virology/Immunology Test Request form. See Sections 4 and 5 for details.

2. Symptomatic persons (fever, cough, or dyspnea) in a facility or group setting (e.g., healthcare facility, residential care facility, school, or corrections) not meeting the criteria in Section 1 will be tested for COVID-19 at OSPHL.
   a. OSPHL will test 1–5 specimens per facility and potentially more if there are persons requiring hospitalization (to aid in choosing appropriate infection prevention precautions in the hospital setting).
   b. Oregon law requires reporting of any cluster of illness to the LPHA. Wait for public health approval of testing before submitting specimens to OSPHL.
   c. Collect, package and ship the specimen, along with a completed Virology/Immunology Test Request form.
3. Patients seen at tribal health centers, NARA Indian Health Clinic, and Chemawa Indian Health Center who have fever, cough, or dyspnea may be tested for COVID-19 at OSPHL.

4. Collecting specimens

   a. Specimens should be collected under appropriate precautions:
      
      i. Nasopharyngeal swabs should be collected under standard and contact, and droplet precautions with eye protection: facemask, eye protection, gown, and gloves.
      
      ii. Induction of sputum and collection of other specimens involving aerosol-generating procedures (see Section 6.c.) should be done under standard, contact, and airborne precautions with eye protection.
         1. If available, place the patient in an airborne infection isolation room (AIIR).
         2. The healthcare provider should be wearing full airborne precaution personal protective equipment: a respirator (N95 or better), eye protection, gown, and gloves.

   b. OSPHL will test one specimen per patient.
      
      i. Lower respiratory specimens (bronchoalveolar lavage fluid, endotracheal aspirate, or sputum) are preferred if feasible. Otherwise, upper respiratory specimens are acceptable, with nasopharyngeal swab preferred; oropharyngeal swab, nasal mid-turbinate swab, bilateral anterior nares swab, or nasal wash are also acceptable.
      
      ii. If more than one specimen is received, OSPHL will test only the highest-preference specimen.

   c. Refrigerate specimens (2°–8° C) until they can be sent to OSPHL. If >72 hours are anticipated for specimen storage and transport prior to testing, freeze at -70°C or below.

5. Sending specimens and forms

      
      i. Complete the form. In the “OTHER/MOLECULAR” section, mark the checkbox indicating “Other,” and type or write in “2019-nCoV” or “COVID-19” on the line provided.
      
      ii. Incorrectly completed or incomplete test request forms cause a delay in testing.
      
      iii. Transport specimens at refrigerated temperatures (2°–8° C).
      
      iv. Send specimens so that they will be received at OSPHL during expanded business hours:
          1. Monday–Friday, between 7:00 AM and 5:00 PM.
          2. Saturday and Sunday, between 10:00 AM and 12:00 noon.

6. Infection prevention for patients with suspected or confirmed COVID-19

   a. Use standard and contact, and droplet precautions with eye protection: facemask, eye protection, gown, and gloves.

   b. Use standard, contact, and airborne precautions with eye protection when performing aerosol-generating procedures: N95 respirator or better, eye protection, gown, and gloves.

   c. For more details, including a list of aerosol-generating procedures, see OHA’s Provisional Guidance: Clinical Care and Healthcare Infection Prevention and Control for COVID-19 at [healthoregon.org/hcp covid19](http://healthoregon.org/hcp covid19).