



June 12, 2020

COVID-19 Weekly Testing Summary

On May 1, the Oregon Health Authority (OHA) released its COVID-19 <u>Strategic Testing Plan</u> for Oregon. The Strategic Testing Plan includes the following goals:

- 1. Test more people living in Oregon for COVID-19 based on testing guidelines, which were revised on June 2. These guidelines recommend testing all people with symptoms, and if resources are limited, recommend prioritizing testing higher-risk groups, including direct care or service workers, front-line workers, people whose first language is not English and people who identify as Black, African American, Latino, Latina, Latinx, American Indian/Alaska Native, Asian, Asian-American, Pacific Islander, or as having a disability. Data shows us that people in these communities are at higher risk for COVID-19 infection. The new guidance also expands testing recommendations for asymptomatic people to include close contacts of a person with COVID-19 and people exposed to COVID-19 in non-healthcare congregate settings (e.g. residential care facility, agricultural settings, food-packing plants, prisons, shelters, etc.), and seasonal agricultural workers arriving in Oregon.
- 2. Use all available resources in Oregon, so all symptomatic people are tested for COVID-19.

The Strategic Testing Plan is an essential component of active surveillance, which includes case investigation and contact tracing, to better understand and stop the spread of disease.

Summary of Oregon test results through 6/12/2020

	Pre-	2/29-	3/7-	3/14-	3/21-	3/28-	4/4-	4/11-	4/18-	4/25-	5/2-	5/9-	5/16-	5/23-	5/30-	6/6-	Total
	2/28	3/6	3/13	3/20	3/27	4/3	4/10	4/17	4/24	5/1	5/8	5/15	5/22	5/29	6/5	6/12	to date
Positive	1	12	35	66	348	437	472	414	392	402	453	438	255	304	413	765	5,207
Negative	3	122	466	1,460	7,050	7,434	9,318	8,683	8,779	12,282	14,028	16,349	15,433	17,143	20,126	22,136	160,812
Total	4	134	F01	1 526	7 200	7 071	0.700	0.007	0 171	12 694	1 / / 01	16 707	15 600	17 447	20 520	22 001	166,019
results	4	134	201	1,520	7,396	7,071	9,790	9,097	9,1/1	12,084	14,461	10,787	15,000	17,447	20,539	22,901	100,019
%	25.0%	0.00/	7 00/	4 20/	4.7%	5.6%	4.8%	4.6%	4.3%	3.2%	3.1%	2.6%	1.6%	1.7%	2.0%	2 20/	3.1%
positive	25.0%	9.0%	7.0%	4.5%	4.7%	5.0%	4.6%	4.0%	4.5%	5.2%	5.1%	2.0%	1.0%	1.7%	2.0%	3.3%	5.1%

As of June 12, Oregon's cumulative positive testing rate is 3.1% of tests performed. This is considerably lower than the national average of 11%. Oregon's number of tests performed has been steadily increasing week after week, but the number of positive cases and the test positivity rate have increased significantly this week. This suggests increasing numbers of

individuals with COVID-19, which is expected now that most counties are in Phase 1 or Phase 2 of reopening. Recent large workplace outbreaks have also contributed to these increases. We will continue to monitor these trends.

Of note, this is the first week we have reached the threshold of testing 2% of the Oregon population, the benchmark set by the CDC ELC Enhancing Detection supplement.

Testing capacity

In mid-May, the OSPHL, Kaiser Permanente, and Interpath laboratories went live with the Hologic Panther instrument, which increased the state's testing capacity. Based on the current received inventory volumes and what has been distributed, the state's weekly testing capacity remains at 37,702.

Currently the OSPHL utilizes a validated Abbott Architect IgG assay to support serosurveillance work and is capable of reporting approximately 200 specimens per day.

Testing resources

OHA continues to fill requests for commercial laboratory testing through Quest and LabCorp. These contracts are designed to provide access to COVID-19 testing for entities that do not have access to laboratory testing through their own health system or commercial laboratory contracts. Commercial testing requests by local emergency managers are made via the ECC's OpsCenter platforms.

The Oregon Public Health Clinical Laboratory Consortium is coordinating testing capacity of partner laboratories to perform testing for high risk and vulnerable populations if the Oregon State Public Health Laboratory is at capacity.

This week, OHA has received its weekly allocation of 50 boxes of Abbott ID NOW test cartridges (24 tests per box). The Abbott ID NOW instruments have been distributed to areas of the state that do not have in-house laboratory testing or have high COVID-19 case counts.

OHA continues to supply all laboratories and hospitals that have the Abbot ID Now with Abbott ID Now test kits. The CDC International Reagent Resource (IRR) will supply states with 50 boxes of test kits and six packs controls through an automatic shipment each week.

This week, Oregon received its sixth shipment of testing swabs, universal transport media for specimen collection kits, and certain testing supplies and reagents from the US Department of Health and Human Services (HHS). These ongoing supplies will be available for counties and tribes to request through their Emergency Managers using OpsCenter.

OHA continues to explore opportunities to expand collection and testing services.

Supply chain issues

OHA has received information that additional Cepheid test cartridge availability will continue to be limited, as the supplier is at production capacity and is planning to stop COVID-19 production so they can begin production on their other testing supplies (Flu, etc.).

Technical assistance

Oregon hospital laboratories and OSPHL continue to meet weekly to share technical information, updates about testing efforts, and information about supply-chain barriers. The OSPHL continues to provide technical assistance to laboratories who reach out for help implementing COVID-19 testing. OHA continues to evaluate COVID-19 testing platforms as they become available.

Congregate care settings

OSPHL continues to prioritize its testing to identify and control clusters of COVID-19 disease in congregate care settings, including long-term care and correctional facilities. As of May 1, OHA's testing guidance includes a separate document with criteria for COVID-19 testing at OSPHL.