Provisional guidance for health systems regarding COVID-19 testing
March 11, 2020

National and Oregon Health Authority (OHA) guidance recently expanded the criteria for COVID-19 testing, deferring the testing decision in large part to clinicians. Given growing availability of commercial testing options, providers may decide to proceed with testing on the basis of clinical judgment. Public Health approval is **not** needed for this testing.

For high-risk cases and those with epidemiological links such as contact with a confirmed COVID-19 case, the Oregon State Public Health Laboratory (OSPHL) continues to prioritize specimens per established criteria, as described below. OSPHL has capacity to test approximately 80 specimens per day.

**Outpatient clinics**

1. Clinicians in the community can order COVID-19 testing at their discretion through commercial labs, including LabCorp and Quest Diagnostics.
   a. Clinicians do not need to routinely notify the local public health authority (LPHA) or OHA when evaluating patients with respiratory illness or ordering COVID-19 testing.
   b. An influenza test should be completed prior to ordering COVID-19 testing.
2. 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.
3. If a patient does not have a **clinical** need to be sent to the 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 fever and cough (if present) resolve.
   b. Discuss a plan to seek appropriate medical care should symptoms worsen.
4. Avoid any aerosol-generating procedures, including respiratory therapy treatments (i.e. nebulized medications), that are not immediately required for patient care.
   a. Nasopharyngeal (NP) and oropharyngeal (OP) swabs are **not** considered aerosol-generating procedures.

**Inpatient facilities**

1. Clinicians in the community can order COVID-19 testing at their discretion through commercial labs, including LabCorp and Quest Diagnostics.
   a. Clinicians do not need to routinely notify the local public health agency (LPHA) or OHA when evaluating patients with respiratory illness or ordering COVID-19 testing.
   b. An influenza test should be completed prior to ordering COVID-19 testing.
2. For expedited testing approval for COVID-19 testing at the Oregon State Public Health Laboratory
   a. A patient who meets all three 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. Tested negative for influenza
b. For such patients, clinicians must submit an electronic request for testing through a Confidential Oregon Morbidity Report, found at 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. A completed Virology/Immunology Test Request form must accompany the specimen. See Section 5.a. for details.
d. For such patients, you do not need to call your local public health authority or Oregon Health Authority for approval.

3. Patients not meeting the criteria in #2 may be considered for COVID-19 testing if they meet any of the following criteria:
   i. Fever or symptoms of lower respiratory illness (e.g., cough, shortness of breath), and close contact with a laboratory-confirmed COVID-19 patient in the 14 days before symptom onset;
   ii. Fever and symptoms of lower respiratory illness (e.g., cough, shortness of breath), and history of travel from affected geographic areas with widespread COVID-19 transmission in the 14 days before symptom onset; or
   iii. Fever with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization and without alternative explanatory diagnosis (e.g., influenza).
   a. For such patients, clinicians must contact the OHA epidemiologist on call (971-673-1111, option 3) to obtain approval prior to submitting specimens to OSPHL.

4. Collecting specimens
   a. Specimens should be collected under appropriate precautions:
      i. Nasopharyngeal and oropharyngeal swabs should be collected under standard, contact, and droplet precautions with eye protection.
         1. The healthcare provider should be wearing full droplet precaution personal protective equipment, including a facemask, eye protection, gown, and gloves.
      ii. Induction of sputum and collection of other specimens involving aerosol-generating procedures should be collected 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, including a respirator (N95 or better), eye protection, gown, and gloves.
   b. OSPHL will test 1–2 specimens per patient.
      i. Specimen priority in descending order is bronchoalveolar lavage fluid or endotracheal aspirate, then sputum, then nasopharyngeal swab, then oropharyngeal swab.
      ii. If more than 2 specimens are received, OSPHL will test only the highest-priority ones.
      iii. Please avoid sending only oropharyngeal swabs.
   c. Refrigerate specimens (2°–8° C) until they can be sent to OSPHL. If >72 hours is anticipated for specimen storage/transport prior to testing, freeze at -70°C or below.
5. Sending specimens and forms  
      i. Complete the OSPHL Virology/Immunology Test Request 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 as to 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. Clinical care of patients being tested and healthcare infection prevention  
   a. Use standard, contact, and droplet precautions with eye protection when caring for patients with suspected or confirmed COVID-19 patients (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, please see OHA’s Provisional Guidance: Clinical Care and Healthcare Infection Prevention and Control for COVID-19 at healthoregon.org/hcpcovid19.