COVID-19 testing guidance – Updated 3.10.2020

As COVID-19 testing is made available through commercial laboratories in Oregon, the Public Health Division would like to reiterate the current symptoms profile for the disease hoping that this would assist with the decision making process for testing regarding COVID-19. This information has been adapted from the current investigative guidelines developed by the Oregon Health Authority that can also be found at: https://www.oregon.gov/oha/PH/DISEASECONDITIONS/COMMUNICABLEDISEASE/REPORTINGCOMMUNICABLEDISEASE/REPORTINGGUIDELINES/Documents/Novel-Coronavirus-2019.pdf

Symptoms for COVID-19
Symptoms may include fever, sore throat, dry cough, dyspnea, myalgias, and fatigue. Fever may not be present in the very young, very old, immunosuppressed, or people taking antipyretics. Gastrointestinal symptoms have been reported by some patients prior to developing fever and lower respiratory tract signs and symptoms. Reported complications have included pneumonia, acute respiratory distress syndrome, cardiac events, and death. Published case series indicate that cases tend to have lymphopenia.

Incubation period
Published data from 425 patients found a mean incubation period of 5 days with a 95th percentile of the distribution of 12 days. From this study and what we know of other coronaviruses, we consider the range to be 2–14 days.

Suspect case
A PUI is a person with:

- Fever* OR signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath) AND has had close contact** with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset
- Fever* AND signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) AND a history of travel from an affected geographic area*** or a high-risk setting (e.g., cruise ship, long-term care facility, or other institutional setting) within 14 days of symptom onset
- Evidence of viral lower respiratory infection AND a negative influenza test

*Measured to be >100.4° F (38° C) or subjective fever may not be present in some patients, such as the very young, elderly, immunosuppressed, or those taking antipyretics. Clinical judgment should be used to guide testing of patients in such situations.
**Close contact is defined as:**

- Being within 6 feet of a COVID-19 case for a prolonged period of time. Close contact can include caring for, living with, visiting, or sitting within 6 feet of a confirmed novel coronavirus patient in a healthcare waiting area, or on an airplane.
- Having direct contact with infectious secretions of a novel coronavirus case (e.g., being coughed on) if such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, eye protection), criteria for PUI consideration are met.

***Affected geographic areas with widespread or sustained community transmission***

**Testing guidance for the health system**

Specimens from the lower respiratory tract (e.g., bronchial lavage, endotracheal aspirate, sputum) are preferred. Upper respiratory tract specimens (nasopharyngeal is better than oropharyngeal) are also acceptable for testing. Choice of specimen collection may rely upon the setting where specimen collection occurs. Specimens should be collected as soon as possible after a PUI is identified, regardless of symptom onset date. Specimens should be collected while using proper PPE, which means gowns, gloves, facemask (surgical/procedural mask), and eye protection for either pharyngeal swabs. For lower respiratory specimen collection, these procedures may aerosolize respiratory fluids and the use of N95 masks are still recommended. Use a private room and keep the door closed. Mask the patient with a regular facemask during any movement within the clinic or facility.

Please follow guidelines from the commercial labs that are posted on their websites for specimen collection and shipping:

- **LabCorp:** [https://files.labcorp.com/labcorp-d8/2020-03/LabCorp_Coronavirus_%28COVID-19%29_Q%26A_March_10_2020.pdf](https://files.labcorp.com/labcorp-d8/2020-03/LabCorp_Coronavirus_%28COVID-19%29_Q%26A_March_10_2020.pdf)

Keep in mind that not all Quest or LabCorp laboratories in Oregon handle the COVID-19 test and ensure that you are shipping the samples to the proper labs!

**Communication with the Public Health Division**

We are kindly requesting that you inform us of any COVID-19 testing that is being performed by any of your providers in your facility. The specific information we are requesting from you is twofold:

1. Name, contact information, and DOB of the patient you tested. The form also asks for symptom profile and potential epidemiological connections to other risk categories. We’d like to monitor testing and results for patients not admitted to the hospital to see if this expanded testing reveals cases that would not have been found otherwise.
2. The organizations involved in the response. Facilities and partners need to be documenting those who had contact with a patient who is being tested. We want to know if the patient was transported by ambulance or transferred from another facility - or even if there was a previous medical encounter that fits within the symptom onset dates.

We are asking that you relay this information to us for each test ordered, through the attached form via secure email at: [covid19.testing@chw.coos.or.us](mailto:covid19.testing@chw.coos.or.us)

This information is extremely important to us as it will ensure that we are as efficient as possible regarding contact tracing and investigation in case the test results come back positive.

Please do not hesitate to get back to us with any questions at [covid19.questions@chw.coos.or.us](mailto:covid19.questions@chw.coos.or.us)