

March 13, 2020

UPDATED Interim Guidance for Clinicians Evaluating, Reporting, and Requesting Diagnostic Testing for Possible COVID-19 Cases

GUIDANCE SUBJECT TO CHANGE. Please read this guidance in its entirety.

Summary

- The expanding global outbreak of respiratory infections due to a novel coronavirus (COVID-19) has been declared a pandemic and is being closely monitored by the WHO, CDC, and state public health officials. For the most up-to-date information about the outbreak, visit <https://www.cdc.gov/coronavirus/2019-ncov/index.html> and <https://dph.georgia.gov/novelcoronavirus>.
- COVID-19 clinical presentation varies in severity from asymptomatic infection or mild illness to severe or fatal illness. Symptoms include fever and signs of respiratory illness (e.g., cough, shortness of breath); case-patients can also develop pneumonia and some reports suggest the potential for clinical deterioration during the second week of illness, although the full spectrum of clinical illness remains unknown.
- **All novel respiratory virus infections (including COVID-19) have now been added to the list of diseases that are immediately notifiable by law in Georgia.**

Recommendations for clinicians evaluating patients at your facility

1. Obtain a detailed history for **ALL** patients being evaluated with fever and acute respiratory illness. Important questions include:
 - a. Have you traveled in the last two weeks?
 - b. Have you been in contact with anyone with laboratory confirmed COVID-19 in the last two weeks?
2. If COVID-19 is suspected, appropriate PPE should immediately be utilized by the patient and healthcare professional. Patients should be asked to wear a surgical mask upon arrival and be evaluated in a private room with the door closed, ideally an airborne infection isolation room, if available. Ideally, healthcare personnel entering the room should use standard precautions, contact precautions, airborne precautions, and use eye protection (e.g., goggles or a face shield).
 - a. **CDC has recently made updates to its infection prevention guidance in healthcare facilities, and has changed the level of PPE required:** <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>. Facemasks are an acceptable alternative when the supply chain of N95 masks or respirators cannot meet the demand. During this time, available respirators should be prioritized for procedures that are likely to generate respiratory aerosols, which would pose the highest exposure risk to the healthcare provider. Eye protection, gloves, and gowns remain in the recommendations, although if gowns are in limited supply, they may be reserved for aerosol-generating procedures or other situations described at the above link.
3. Clinicians who suspect COVID-19 infection in a patient may contact the Georgia Department of Public Health (DPH) at 1-866-PUB-HLTH (1-866-782-4584) to request testing at the Georgia Public Health Laboratory (GPHL). The testing request system is also available online at <https://dph.georgia.gov/covid-19-online-testing-request>. The clinician will be asked

to complete an online form containing demographic, exposure, and clinical information, and a medical epidemiologist will review the request within 24 hours. **At this time, laboratory testing for COVID-19 performed at the GPHL MUST be approved and coordinated by DPH following triage. If testing is approved, laboratory submission forms and instructions will be emailed.** Only requests initiated by a provider can be considered. Patients should not be directed to contact the Georgia Department of Public Health about COVID-19 testing.

- a. Those that are hospitalized due to respiratory illness of unknown etiology, DIRECT contacts (a person that was within 6 feet of a confirmed case for greater than 10 minutes), and healthcare workers that were exposed will be prioritized to receive testing at GPHL at this time. These criteria may change as GPHL testing capacity increases.
 - b. We recommend performing a rapid influenza test and respiratory viral panel (if available) prior to requesting testing at GPHL.
 - c. For appropriate sample collection guidelines, please see: <https://dph.georgia.gov/covid-19-online-testing-request> and <https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html>. Many facilities have the appropriate swabs, viral transport media, and PPE needed to **collect clinical specimens for COVID-19 testing. NP swabs are the only clinical specimens needed, according to recent CDC guidance.** DPH does not send supplies for sample collection. The patient does not need to be referred to an ED.
4. Patients with **mild illness** who do not require medical care or who are not a DIRECT contact of a confirmed COVID-19 case (meaning the person has NOT been within 6 feet of a confirmed case for greater than 10 minutes, will not meet criteria to be tested at GPHL but can be tested at commercial labs—see below:
- a. These patients should self-isolate at home until symptoms resolve. If respiratory symptoms worsen, they may need to be re-evaluated. Guidance for safe home care can be found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>.
 - b. If you want to test these patients for COVID-19, commercial laboratory testing is the best option. Commercial laboratories are expected to conduct a substantial number of COVID-19 tests going forward. Currently, the primary source of testing is LabCorp, but we expect other laboratories will be testing in the near future as well, including Quest and ARUP. Neither LabCorp nor Quest will collect specimens at their facilities. Providers should contact LabCorp or Quest regarding supplies needed for testing.
5. CDC has updated the risk assessment and recommendations for HCP exposed to a COVID-19 patient to allow for additional flexibility as described below: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>. Facilities could consider allowing asymptomatic HCP who have had an exposure to a COVID-19 patient to continue to work after options to improve staffing have been exhausted and in consultation with their occupational health program. These HCP should still report temperature and absence of symptoms each day prior to starting work. Facilities could have exposed HCP wear a facemask while at work for the 14 days after the exposure event if there is a sufficient supply of facemasks. If HCP develop even mild symptoms consistent with COVID-19, they must cease patient care activities, don a facemask (if not already wearing), and notify their supervisor or occupational health services prior to leaving work.

For more information

- Georgia DPH COVID-19 guidance and up-to-date information: <https://dph.georgia.gov/novelcoronavirus>

- CDC's guidance for healthcare professionals: <https://www.cdc.gov/coronavirus/2019-nCoV/guidance-hcp.html>
- For the latest CDC updates on the outbreak: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Clinicians who have other questions unrelated to testing triage, may call 1-866-PUB-HLTH (1-866-782-4584) and ask for a Medical Epidemiologist.