

Updated testing guidelines for novel coronavirus (COVID-19)

Summary of updates

- Changes to testing guidelines based on an increase in testing capacity in BC
 - Any physician can order a test for COVID-19 for symptomatic individuals based on their clinical judgement, with new groups of people recommended and prioritized for testing if symptomatic
 - New labelling categories for specimens
- New criteria for tests of clearance of positive COVID-19 cases requiring hospitalization
- Clarification of previous MHO update (March 23) in regard to HCW testing and return-to-work

COVID-19 testing is recommended and prioritized for the following groups with NEW ONSET respiratory or gastrointestinal symptoms (includes fever, cough, shortness of breath, sore throat, rhinorrhea, nasal congestion, loss of sense of smell, loss of appetite, chills, vomiting, diarrhea, headache, fatigue, and myalgia):

- Residents and staff of Long Term Care Facilities
- Patients requiring or likely requiring admission to hospital, and patients needing to enter hospital for ongoing treatment, including pregnant women in their 3rd trimester and people receiving chemotherapy, radiation, or hemodialysis
- Health care workers, including community pharmacists
- Residents of remote, isolated or Indigenous communities
- People who are homeless or have unstable housing
- People living and working in congregate settings such as shelters, work-camps, correctional facilities, group homes, assisted living facilities and seniors' residences
- Essential services providers, including first responders (police, firefighters, paramedics)
- Returning travellers identified at a point of entry to Canada
- Individuals part of an investigation of a cluster or outbreak (based on the direction from Public Health)

Please see below for **new labelling instructions** for some of the above categories.

DO NOT test for COVID-19 in asymptomatic individuals. Please see below the **tests of clearance update** for the only exception to this recommendation.

Any physician can order a test for COVID-19 based on their clinical judgement

For **symptomatic** individuals that do not fall in the above listed categories, physicians can order a test for COVID-19 based on clinical judgement. Note that most patients with lab-confirmed disease have mild to moderate symptoms and recover at home with limited medical intervention.

False negative results can occur early in the course of infection and in severely infected patients

Over the past two months, we have come to better understand the accuracy of the COVID-19 test. We have found that false negative results can occur early in the course of the infection, implying that a negative RNA test does not definitively rule out COVID-19 infection.

Advise patients with COVID-19 to seek medical care if symptoms do not improve 5-7 days following symptom onset

In retrospective studies of critically ill patients, onset of dyspnea occurred at a median time of 6.5 days after symptom onset, and progression to respiratory distress occurred quickly thereafter (median 2.5 days after onset of dyspnea).

Specimen Labelling

If applicable, please indicate one of the following codes on the specimen label to assist with processing:

The Fraser Health Medical Health Officers are available for medical consultations at 604-587-3828 or 1-877-342-6467 (M-F, 0830-1630 hrs) or after hours at 604-527-4806.

- **HCW1** – Health Care Worker – Direct Care
- **HCW2** – Health Care Worker – Non Direct Care
- **UPC** – Urgent and Primary Care Centre
- **LTC** – Long Term Care Facility
- **OBK** – Outbreak
 - **Including homeless populations**
- **HOS** – Hospital (Inpatient)
- **CMM** – Community (Outpatient)

Tests of clearance of positive COVID-19 cases requiring hospitalization

- For **cases who require hospitalization**, two negative tests at least 24 hours apart are required before being considered cleared from self-isolation. These tests are to be taken at least 10 days after the onset of symptoms and once symptoms are resolved. These patients can be discharged prior to the end of their 10 day infectious period, if they are deemed appropriate by their MRP to self-isolate and recover at home. The clearance tests do not need to be collected prior to discharge, and can be done at a GP's office or at an assessment centre.
- For all mild COVID-19 cases and health care workers **who do not require hospitalization**, negative tests of clearance are not required to determine discontinuation of self-isolation. Patients in this category are considered cleared 10 days after the onset of symptoms and once symptoms are resolved, whichever is longer. Note that a residual dry cough may persist for weeks; therefore, if this is the only symptom at the end of the isolation period, these patients may come off self-isolation.

Clarification of previous MHO update (March 23) in regard to HCW testing and return-to-work:

- Health care workers who have respiratory symptoms and are tested for COVID-19 must **self-isolate while awaiting test results**.
- If the test is **negative**, health care workers may return to work once their symptoms have resolved. Note that a residual dry cough may persist for weeks; therefore, if this is the only symptom remaining, health care workers may return to work.
- If the test is **positive**, health care workers must self-isolate for 10 days after the onset of symptoms, and may return to work after the 10th day provided they are asymptomatic. A residual dry cough is acceptable.
 - A negative test of clearance **for health care workers who have tested positive** and did not require hospitalization is not required before returning to work.
- Asymptomatic health care workers who are returning from travel outside Canada may return to work but should otherwise self-isolate for 14 days

*The Fraser Health Medical Health Officers are available for medical consultations at
604-587-3828 or 1-877-342-6467 (M-F, 0830-1630 hrs) or after hours at 604-527-4806.*