Title: New process for requesting laboratory testing at the Utah Public Health Laboratory (UPHL) for SARS-COV-2

Summary/Background:
On March 12th, 2020, Utah Department of Health (UDOH), launched a new online process for ordering and approval of testing patients with suspect COVID-19. UDOH has also broadened the testing criteria for some populations at risk for more severe disease or transmission of COVID-19. For providers considering testing, please also consider ordering testing through a commercial laboratory, if possible. If COVID-19 testing demand exceeds laboratory capacity, UDOH will prioritize testing for patients who meet clinical criteria AND have an epidemiologic risk factor. Asymptomatic patients will not be tested. The guidance is likely to change when there is widespread transmission of COVID-19 in Utah.

To request testing, please visit: UDOH COVID-19 Test Request Tool, which is also available at coronavirus.utah.gov. Providing false or incorrect answers will result in test cancellation. UDOH is relying on clinicians to be good stewards of our limited testing resources by following the below guidance.

UDOH is providing COVID-19 testing for patients who meet the following criteria:

<table>
<thead>
<tr>
<th>Clinical Features</th>
<th>&amp;</th>
<th>Epidemiologic Risk</th>
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<tbody>
<tr>
<td>1. Fever or signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath)</td>
<td>AND</td>
<td>Any person, including healthcare workers, who has had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset</td>
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<td>2. Fever or signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)</td>
<td>AND</td>
<td>A history of travel from affected geographic areas (see below) within 14 days of symptom onset</td>
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<tr>
<td>3. Fever and severe acute lower respiratory illness (e.g., imaging confirmed pneumonia, ARDS) without alternative explanatory diagnosis (e.g., influenza)</td>
<td>AND</td>
<td>No source of exposure has been identified</td>
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| 4. Fever or signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath) without alternative explanatory diagnosis (e.g., influenza) | AND | One of the following risk groups:  
  ● Hospitalized patients (to inform infection control)  
  ● Older Adults (age ≥ 65 years)  
  ● Any person who lives in a residential facility such as a nursing home  
  ● Patients who are immunocompromised or have underlying chronic conditions |
Please note the following:

- **If you have a patient that meets the above criteria:**
  - Collect specimens according to the attached guidelines.
  - Visit the UDOH COVID-19 Test Request Tool, fill out the online survey and get testing approval.
  - Complete a UPHL request form to submit with each specimen. The form is attached or can be downloaded as a fillable PDF at uphl.utah.gov.

This guidance is intended to clarify who may be tested with clinical or epidemiologic risk while testing capabilities are being expanded nationally and in Utah. It is NOT meant to be a directive as to who must be tested. While public health is expanding the testing criteria, it is NOT the intention of CDC or the UDOH that everyone with lower respiratory illness who tests negative for influenza be considered a possible COVID-19 patient.

At this time, healthcare providers caring for patients with fever and severe lower respiratory illness without any epidemiologic risk for COVID-19 should use contact and droplet precautions with eye protection (unless another diagnosis requires a higher level of precaution, e.g., tuberculosis).

**Recommendations**

- Obtain a travel history of all patients presenting with fever or lower respiratory symptoms. Symptomatic patients who have traveled in the past 14 days to an area affected by COVID-19 should be assessed for the disease.
- All patients in the healthcare setting who are being assessed for COVID-19 should be isolated in a private room with limited traffic and a closed door. The patient should wear a surgical mask when someone else enters the room.
- Patients who are being tested for COVID-19 but do not require hospitalization are recommended to adhere to home isolation until testing is completed.
- Healthcare personnel caring for patients with fever and severe lower respiratory illness WITHOUT any epidemiologic risk for COVID-19 should:
  - use standard, contact, and droplet precautions with eye protection;
  - proceed to work-up for common causes of respiratory illness (e.g., FilmArray);
  - if no alternative explanatory diagnosis, consider an infectious disease consultation.
- NP and OP swabs can be collected concurrently as other samples being collected for infectious disease rule out (e.g., influenza and respiratory FilmArray or similar broad panel).
- **NP and OP swabs can be collected into a single vial of Viral Transport Media and submitted as a single sample.**
- If a patient is considered to be a PUI and is being tested for COVID-19, use standard, contact, and airborne precautions with eye protection when providing care.
- Healthcare personnel that cared for a PUI or a confirmed COVID-19 case should have their exposure risk assessed and be excluded from work based on the CDC’s work restriction recommendations.

**For more information**

- UDOH COVID-19 Information: coronavirus.utah.gov
- CDC PUI guidance: cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html
- CDC information for travel: cdc.gov/coronavirus/2019-ncov/travelers/

**Contact:** For questions, please call 1-888-EPI-UTAH (374-8824).