COVID-19 Testing Guidance Changes – FAQ

Version 11/02/2020

Repeat testing for patients who are COVID-19 positive

What are the new changes to the COVID-19 Testing Guidance?

- A patient who is COVID-19 positive (with a PCR based test) is **not required to have repeat COVID-19 testing for 90 days after positive test** UNLESS they have new symptoms consistent with COVID-19. This includes for pre-procedural testing, inpatient admission, or any other screening test.

When will this change go into effect?

- We will plan for this change to go into effect Thursday November 5, 2020 as a "COVID-19 Recovered" flag will go into effect that day to allow us to identify these patients (see next question).

How will we know which patients are within 90 days of a positive test?

- A **"COVID-19 Recovered" flag** has been created to identify the patients who have had a positive COVID-19 test within the last 90 days who do not require repeat testing unless symptomatic. This flag will go live on Thursday 11/5/2020.

Why is this change being made?

- Current evidence shows that individuals can continue to shed SARS-CoV-2 RNA for up to 3 months in upper respiratory samples. However, studies have not found evidence that these patients who have clinically recovered but remain persistently positive have transmitted SARS-CoV-2 to others. In patients who have clinically recovered from COVID-19, a positive PCR during the 90 days after illness onset likely represents persistent shedding of viral RNA rather than reinfection.
- Therefore, once a patient meets symptom based deisolation criteria (as described below), they can be assumed to no longer be infectious and do not require repeat testing.
- This change is a recommendation from the CDC and the department of public health and has already been safely adopted by many adult and pediatric hospitals.

Does this testing strategy apply to those with a history of a prior COVID-19 compatible illness that was NOT confirmed with PCR?

- No. This "90-day rule" only applies to patients who are confirmed to be COVID-19 positive by PCR. A presumed illness confirmed only by an antigen or antibody test does not confirm COVID-19 infection for the purpose of this new policy.

Deisolation of patients who are COVID-19 positive

What is the new guidance for deisolating patients who are COVID-19 positive?

- **Discontinuing isolation will be based on a symptom-based strategy** rather than a test-based strategy because of data showing low likelihood of recovering replication-competent virus over time.
- **Immunocompetent patients and patients without severe COVID-19 illness** will be removed from isolation when at least **10 days** have passed after positive test, at least 24 hours have passed since last fever without use of fever-reducing medications, and symptoms have improved
- **Immunocompromised patients and/or patients with severe COVID-19 illness** (defined as an illness requiring oxygen) will be removed from isolation when at least **20 days** have passed after positive test, at least 24 hours have passed since last fever without use of fever-reducing medications, and symptoms have improved

Do patients require repeating negative COVID-19 testing to safely be seen in clinic?
- No, repeat, negative tests are not required for deisolation in the inpatient or outpatient settings. Once patients meet the deisolation criteria above, they no longer require transmission-based precautions. Universal precautions, including standard facemask and eye protection, are still required as with all patient encounters.

Pre-procedural Testing

How do the changes affect patients who tested positive on pre-procedural testing?
- For patients testing positive for COVID-19 on pre-procedural testing, repeat testing is not needed prior to the procedure. The patient can be assumed to be no longer infectious after they meet deisolation criteria [At 10 days have passed since positive test, afebrile for 24 hours without use of fever reducing medication, and improved symptoms. For patients with severe illness or immune compromised, at least 20 days have passed].
- If procedure needs to be done within that time period where they may be infectious, PPE will be needed.

Do inpatients require repeat COVID-19 testing prior to a procedure if they have tested negative on admission?

- For inpatients who have tested negative on admission, they do not require repeat COVID-19 in the first 7 days of admission OR after 14 days of admission (unless they develop new symptoms or had an inpatient exposure).
- If a patient requires a procedure within day 7-14 of admission, they should be retested.
- This follow our previous policy of repeat after 7 days of admission test. However, after 14 days of admission they are out of the incubation period for community exposure and do not require testing unless they develop new symptoms or an inpatient COVID-19 exposure has occurred.

What evidence do we have from Lurie Children's regarding children who are admitted and have required repeat testing for procedures?

- Among more than 200 patients initially negative at the time of admission and again tested for COVID-19 after 14 days, only one has tested positive, and that patient's low-level positive test was determined to represent intermittent, non-infectious positivity in a patient with a prior history of COVID-19.

What about exposure from parents who are at the patient's bedside?

- Parents are screened daily. If a parent screens positive or has suspected or confirmed COVID-19, the patient is placed on isolation. In this case there is concern of inpatient exposure to the child and therefore the child will require repeat testing within 72 hours of a procedure.