

Health Advisory

COVID-19 Updates: Guidance for Diagnostic Testing

May 4, 2020

Widespread transmission of COVID-19 continues to occur in Philadelphia. To date, 15,854 laboratory-confirmed COVID-19 cases and 727 deaths have been reported with cases occurring in all zip codes across the City. The ability to identify cases in a timely manner is a crucial component of management and response efforts. Access to testing services has significantly increased as more facilities develop capabilities to collect specimens and commercial laboratories expand test options and improve turnaround times, including offering rapid and point of care tests. The Centers for Disease Control has also recently updated the clinical signs and symptoms that should prompt suspicion for COVID-19 in recognition of emerging data about the clinical spectrum of disease.

SUMMARY POINTS

- COVID-19 testing is increasingly available at public health and commercial laboratories.
- Testing should be offered to anyone with compatible symptoms but prioritized for high-risk persons and high-risk situations.
- In most cases, a negative test is not required to confirm resolution of infection and remove isolation precautions.

While there continue to be limits on test supplies, test availability, and personal protective equipment, the Philadelphia Department of Public Health is broadening its recommendations for whom to offer COVID-19 testing as follows:

- Offer COVID-19 testing to persons of any age who present with **new-onset**:
 - Cough
 - Shortness of breath OR
 - **Two** of the following symptoms: fever, chills, muscle pain, sore throat, headache, new loss of taste or smell
- Prioritize testing of **symptomatic** persons who are:
 - Hospitalized
 - At increased risk for severe disease because of chronic medical conditions
 - Residents and staff in congregate settings (i.e. nursing homes, behavioral health facilities, shelters and prisons)
 - Healthcare workers
 - Public safety workers (Police, Fire, EMS)
 - Other essential workers (mass transit workers, grocery store / pharmacy staff, etc.)
 - Close contacts of known cases or persons who are associated with a known cluster of cases regardless of age
- Consider testing of asymptomatic persons who are part of a cluster of cases, especially in congregate settings where social distancing is difficult to maintain in consultation with PDPH
- Utilize a [symptom-based strategy](#) to end isolation for persons with COVID-19
 - General population and healthcare workers: 10 days AND 3 days without fever and improved respiratory symptoms
 - Hospitalized patients and residents of congregate settings: 14 days after onset of symptoms AND 3 days without fever and improved respiratory symptoms
 - Long term care facility residents and immunocompromised persons: 21 days after onset of symptoms AND 3 days without fever and improved respiratory symptoms.

Note that patients with symptoms compatible with COVID-19 should be strongly recommended to stay away from others at all times except when they seek testing or medical care, and to call ahead to providers when seeking testing or medical care to avoid exposing others to the infection. Furthermore, patients who are tested should be advised to self-isolate until they receive their test results and to remain in isolation until symptoms resolve if test results are positive.

An increasing number of facilities have also begun to offer point of care antibody tests that do not require respiratory specimens. It is important to note that some of these tests may lack FDA review and should not be used for the diagnosis of acute infection or determination of immunity against future infection. As per current CDC guidance, if an antibody test has been performed in someone with suspected COVID-19, providers should:

- Instruct patients that a positive result indicates possible exposure to SARS-CoV-2 or another related coronavirus.
- Collect a specimen for a molecular test if patients are symptomatic and in a priority group for testing.

PDPH will work with public health laboratories and local healthcare facilities to help facilitate increased access to testing services. Facilities who would like to offer testing to uninsured patients can submit reimbursement claims through the [CARES \(Coronavirus Aid, Relief and Economic Security\) Act](#). Health providers, infection prevention practitioners, and other partner agencies should report point of care or in-house rapid tests to PDPH electronically or by phone at 215-685-6741 (after hours: 215-686-4514). When reporting, please include contact information for case follow up (mobile phone and / or email address).

For additional information and updates about COVID-19 and diagnostic testing, please see:

Surveillance: <https://www.phila.gov/programs/coronavirus-disease-2019-covid-19/testing-and-data/>.

Guidance: <https://hip.phila.gov/EmergentHealthTopics/2019-nCoV>