Clinical	COVID-19 Testing Policy		
	Effective Date: 3/20/20	**Last Reviewed: 6/8/2020**	**Last Revised: 6/8/2020**

PURPOSE STATEMENT

To provide COVID-19 testing guidance.

POLICY STATEMENT

Signature strives to protect the health, safety, and well-being of all resident/patient and stakeholders by following all government agency guidelines and recommendations, as well as other measures it deems appropriate, to best protect against the transmission and spread of the COVID-19 virus. This policy addresses the requirements surrounding COVID-19 testing.

PROCEDURE:

CDC Guidelines will be used to identify residents/patients and stakeholders for COVID-19 testing.

Testing Criteria:

Practioners should follow Health Department and/or physician recommendations to determine whether a resident/patient and/or stakeholder should be tested.

Possible reasons for testing a resident/patient or stakeholder, in consultation with the person's physician and/or the local or state health department may include:

1. Presence of new COVID-related symptoms, including but not limited to, fever of 100.0 degrees or higher, new or change in cough, shortness of breath, sore throat, fatigue, muscle or body aches, chills, headache, new loss of taste or smell, congestion or runny nose, nausea or vomiting, diarrhea.
2. Recent hospitalization with signs and symptoms compatible with COVID-19, or potential exposure to COVID-19 while there.
3. Other symptomatic individuals with chronic medical conditions and/or an immunocompromised state that may put them at higher risk for non-ideal outcomes (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease).
3. Any person who, within 14 days of symptom onset, was in close contact with another suspect or laboratory-confirmed COVID-19 person, or a history of travel from affected geographic areas (see link below).
4. A point prevalence testing initiative to establish the extent of COVID-19 exposure in a facility, with a risk factors, or as per recommendations from local or state health department or to meet state and/or federal regulations.
5. Other potential or actual COVID-19 exposures.

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Testing Process:
Two different kinds of COVID-19 tests are recommended: 1) PCR (viral RNA) testing and 2) serological (antibody). Both approaches have strengths and limitations, and when used in combination, may add value to effective recognition and control of COVID-19.

The kind of test used should be determined by the clinical staff, in consultation with various third parties including the medical director, attending physician, and local health department -- in alignment with any relevant CDC guidelines.

PCR Testing Process:
Nasopharyngeal sampling is preferred for PCR testing. CDC guidelines also list nasopharyngeal, oropharyngeal, or nasal septum as acceptable sampling sites. Any of these may be used, depending on the lab.

Once resident/patient or stakeholder is identified for COVID-19 testing, the following CDC guidelines should be applied during the testing process:

1. Wash your hands.
2. Don appropriate PPE: gown gloves, mask and eyewear
3. Explain what you are going to do and that the test can be uncomfortable and may make their eyes water and illicit a cough.
4. Sit the resident/patient up in the bed as tolerated with pillows propped up behind them.
5. Stand to one side of them and place your non dominant hand on their forehead.
6. With the resident/patient's head tilted at a 70° angle, insert the swab along the septum floor of the nose extending straight back until the posterior nasopharynx is reached (the length from the nose to the opening of the ear).
7. Rotate the swab several times while the swab is in contact with the nasopharynx wall and mucosal surface.
8. Once the specimens are collected offer the resident/patient some tissues and some hand sanitizer for their hands.
9. If using Universal Transport Media, place the swab into the vial transport media, then break off at the slender end, leaving the swab in the pink media. Label the vial with **FIRST NAME, LAST NAME, DOB, COLLECTION DATE/TIME and site of specimen collection.**
10. If using a synthetic swab, place the swab back into the collection container and replace cap. Label the vial with **FIRST NAME, LAST NAME, DOB, COLLECTION DATE/TIME AND SITE OF SPECIMEN COLLECTION.**
11. Place collection tube in specimen bag.
12. **A SEPARATE REQUISITION MUST BE USED FOR EACH COVID19 TEST**. Document resident/patient name, DOB, requested test, date/time of collection on the lab requisition form and place into the outer flap of the specimen bag.

13. Stakeholder testing:
    1. **Prior** to administering the test, the "COVID-19 Stakeholder Testing Consent Form" must be completed and signed by the stakeholder and a witness.
    2. If a stakeholder refuses to be tested (in instances in which facility wide testing is occurring), the stakeholder must follow HR instruction and thereafter, complete the company's approved Attestation and Questionnaire form before being placed back on the work schedule.
    3. Stakeholder COVID-19 consent and results will be documented in the stakeholder file.
14. The facility will follow the process outline for the specific lab being utilized for specimen collection, storage and delivery of specimen to lab.

Serological (Antibody) Point-of-Care Testing Process:

Please note that the process details may slightly vary based on the company providing the testing kits.

1. Open the packing box, take out the inner package and let it equilibrate to room temperature.
2. Wipe the finer (or other blood collection body part) with a cotton swab and let it dry naturally.
3. Use a peripheral blood collector to pierce 2-3 mm from the fingertip
4. Take 20 ul (about 1 drop) of blood with a disposable plastic dropper
5. Add 20 ul of blood from the dropper to the sample diluent in the test tube provided.
6. Close the lid tightly and shake vigorously to mix well
7. Use another provided dropper to pipette 100 ul (about 5 drops) of sample
8. Add sample to the test card and wait 3 minutes before reading the test
9. Wipe the residual blood from sampling place and place another cotton swab while waiting for results.
10. Read the results based on the provided manual guidance.

REFERENCES:

See Fact Sheets on the policy and procedure table.

ATTACHMENTS:

Geographic areas. https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html

Collection of Nasopharyngeal Specimens with the Swab. https://youtu.be/DVJNWefmHjE

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RESPONSIBLE ROLE	RESOURCE DOCUMENTS	ORIGINATION DATE	LAST REVISED DATE	LAST REVIEW DATE
Clinical, Learning, Human Resources	Fact sheets	3/20/202 0	4/14/2020 6/8/2020	4/14/202 6/8/2020