

# Health Advisory: New Testing Priorities for SARS-CoV-2

Minnesota Department of Health, Thurs, July 30 10:00 CDT 2020

## Action Steps

***Local and tribal health department***: Please forward to hospitals, clinics, urgent care centers, emergency departments, and convenience clinics in your jurisdiction.  
***Hospitals, clinics and other facilities***: Please forward to infection preventionists, infectious disease physicians, emergency department staff, hospitalists, primary care clinicians, and all other health care providers who might see patients with acute respiratory symptoms.  
***Health care providers***: In addition to symptomatic persons, consider testing:

* Continue to test symptomatic people.
* Test asymptomatic people requiring medical care, linked to ongoing investigations, or with known exposure, including individuals working or attending K-12 schools or child care.
* [Report COVID-19/SARS-CoV-2 Infections](https://www.health.state.mn.us/diseases/coronavirus/hcp/report.html) within one working day by phone to 651-201-5414 or 877-676-5414 or using the [COVID-19 Case Report Form](https://www.health.state.mn.us/diseases/coronavirus/hcp/covidreportform.pdf).

## Background

In consideration of the testing priorities outlined below, evaluate how your staff resources and laboratory capacity can be used to ensure testing access for these priority groups. Individuals being tested for surveillance purposes (e.g., those tested prior to employment, for sports team or camp participation, enrollment in an academic institution) should not be prioritized for testing given nationwide reagent shortages and a lack of evidence to support the usefulness of a broad testing approach.

## Testing Priorities

This guidance is intended as a rank prioritization of SARS-CoV-2 testing. The following groups and order are prioritized for SARS-CoV-2 testing:

## 1. Symptomatic People

Symptomatic people in any setting. If PCR testing for SARS-CoV-2 is negative, symptomatic people should continue to self-isolate and follow setting-specific public health recommendations.

## 2. Asymptomatic People with Either a Known Exposure or Requiring Medical Care

### a. Asymptomatic People Requiring Medical Care

This includes patients where the procedure creates a high-risk for SARS-CoV-2 transmission (e.g., aerosol-generating procedures) or the procedure is high risk to the patient due to SARS-CoV-2 infection. Examples include: aerosol-generating procedure (e.g., intubation, bronchoscopy, etc.), or patients undergoing other procedures that may be delayed based on testing results (e.g., chemotherapy, cardiac surgery, or other procedures in which COVID-19 may worsen outcome), or patients admitted to the hospital.

### b. Asymptomatic Persons Linked to an Ongoing Public Health Investigation

Situations where one or more COVID-19 cases have been identified in a shared setting (e.g., long-term care facility, workplace, schools or child care, correctional facility). This type of testing should be done in consultation with MDH.

### c. Asymptomatic People with a Known COVID-19 Exposure

If resources are limited, providers may consider further prioritizing testing to those contacts who would pose a significant risk of spread if they were infected or who are at high risk of severe disease. The following groups are considered highest priority:

* Individuals working or attending K-12 schools or child care,
* Hospitalized patients,
* Health care personnel,
* First responders (e.g., EMS, law enforcement, firefighters),
* Individuals living, working or visiting congregate settings,
* Individuals with medical conditions including pregnancy,
* Individuals 65 years of age and older,
* Individuals who live in households with a higher risk individual or who provide care in a household with a higher risk individual, and
* Member of a large household living in close quarters.

Exposure is defined as being within 6 feet for more than 15 minutes to persons with confirmed COVID-19. All close contacts should follow a 14-day quarantine period. Even if the result is negative, these contacts should continue to quarantine for a full 14 days after last exposure and monitor for symptoms; infection could develop at any time during the quarantine period. Repeat testing at the end of the quarantine period may be recommended for staff or residents of congregate settings (acute care, assisted living, skilled nursing, group homes, long-term care facilities, substance use disorder treatment centers, homeless shelters, and correctional facilities); refer to setting-specific testing guidance for additional information. Specific guidance is available for health care workers who have a health care exposure and these individuals should follow that guidance; it would apply if they have a community/household contact.

## For More Information

* [MDH Coronavirus Disease (COVID-19) webpage](https://www.health.state.mn.us/diseases/coronavirus/index.html)
* [CDC's Coronavirus Disease 2019 webpage](https://www.cdc.gov/coronavirus/2019-ncov/index.html)
* Call MDH at 651-201-5414 or 877-676-5414.

A copy of this HAN is available at: [MDH Health Alert Network](http://www.health.state.mn.us/han)   
The content of this message is intended for public health and health care personnel and response partners who have a need to know the information to perform their duties.