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COVID-19 PUBLIC HEALTH LABORATORY TESTING GUIDANCE
For Health Care Providers and Laboratories
March 26, 2020

DIAGNOSTIC TESTING FOR HEALTH CARE

At this time, diagnostic testing for COVID-19 is available to licensed Health Care Providers through the San Bernardino County Department of Public Health (DPH) Laboratory (PHL). Specimen submission follows the protocol already established for DPH Communicable Disease Section (CDS). Please contact PHL at (909) 458-9430 if you have any questions about COVID-19 testing. Local epidemiology of COVID-19 will be used to assess criteria for testing.

SPECIMEN TESTING APPROVAL

Please note that at this time, a Person Under Investigation (PUI) number is no longer required for PHL testing. Health care providers that identify patients for COVID-19 testing **must** contact CDS at 909-501-9435 for COVID-19 testing approval and guidance on specimen submissions for testing.

For previous laboratory-confirmed cases, please contact CDS for guidance by calling 1-800-722-4794. This testing may be available through your medical provider and commercial laboratories. At this time PHL will not be offering serial testing or surveillance testing.

SPECIMEN TYPES AND LABELING

The CDC COVID-19 EUA diagnostic test is approved for upper and lower respiratory tract specimens. For initial diagnostic testing for COVID-19, CDC recommends collecting and testing an upper respiratory specimen. Nasopharyngeal specimen is the preferred choice for swab-based SARS-CoV-2 testing. Only one specimen will be tested per patient in the Public Health Lab. When collection of a nasopharyngeal swab is not possible, the following are acceptable alternatives:

- An oropharyngeal (OP) specimen collected by a healthcare professional, or
- A nasal mid-turbinate (NMT) swab collected by a healthcare professional or by onsite self-collection (using a flocked tapered swab), or
- An anterior nares specimen collected by a healthcare professional or by onsite self-collection (using a round foam swab).

For NS, a single polyester swab with a plastic shaft should be used to sample both nares. NS or NMT swabs should be placed in a transport tube containing either viral transport medium, Amies transport medium, or sterile saline.

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If both NP and OP swabs both are collected, they should be combined in a single tube to maximize test sensitivity and limit testing resources.

CDC also recommends testing lower respiratory tract specimens, if available. For patients who develop a productive cough, sputum should be collected and tested for SARS-CoV-2. The induction of sputum is not recommended. When it is clinically indicated (e.g., those receiving invasive mechanical ventilation), a lower respiratory tract aspirate or bronchoalveolar lavage sample should be collected and tested as a lower respiratory tract specimen.

High priority specimens should be clearly labeled on the outside of packaging to expedite processing. High priority specimens would be those from hospitalized patients; symptomatic healthcare workers or first responders; and symptomatic employees or residents of long-term care facilities, correctional facilities, or other congregate settings;

Specimen type and patient information must be clearly indicated on the specimen tube and clearly visible by the Public Health Laboratory to allow correct matching of forms with specimens. Testing for specimens that are not properly labeled may be delayed or rejected.

Please see the following link for details:
CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for COVID-19

Required Paperwork

- Specimens for PHL testing must be submitted with a completed Lab Test Request Form with the following information:
  - Disease Suspected: Coronavirus Disease 2019 (COVID-19)
  - Test Requested: 2019-nCoV PCR
  - Patient address and Provider information (Full name, NPI# and address) must be included
- Submit any documentation requested by CDS, which may include the following information:
  - Laboratory data: Any relevant laboratory data, such as respiratory test results
  - Clinical information: Symptoms, hospitalization status, hospital name and location if applicable
  - Travel Information: Location of travel, current location, exposure history (e.g., if contact to a known case), repatriation flight information (if applicable)

SAFETY

Health care providers and laboratories should be familiar with CDC biosafety guidelines for handling and processing potential novel coronavirus specimens. Manipulation of open containers of potentially infected specimens should only be performed in a certified Class II biological safety cabinet.

Safety guidelines for handling potentially infected specimens can be found here: CDC Interim Laboratory Biosafety Guidelines for Handling and Processing Specimens for COVID-19

PACKAGING AND SHIPPING

Specimens for COVID-19 testing must be packaged and shipped according to U.S. Department of Transportation and International Air Transport Association (IATA) regulations for Category B, Diagnostic

Specimens UN 3373. For the purpose of private courier transport between the collecting facility and the PHL, a small volume of Category B Diagnostic Specimens may be transported by employees of the facility or lab under the 49 CFR § 173.6 Materials of trade exceptions (Code of Federal Regulations Title 49). If you do not already have a method for submitting specimens to PHL, please contact PHL at (909) 458-9430 for additional instructions.

Deliveries to PHL

Weekday: The laboratory is open to accept specimens from 8 a.m. to 5 p.m., Monday through Friday. The laboratory is closed on weekends and County observed holidays.

Weekend: Deliveries to PHL is currently unavailable.

RESULTS

Both positive and negative COVID-19 test results will be reported through PHL. Test turn-around time from specimen receipt to result at PHL is approximately 48 hours.