

# Health Advisory: Evaluating and Testing for COVID-19 in Minnesota

Minnesota Department of Health, Thurs Mar 05 15:00 CST 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:**

- Be aware that on March 4, CDC has issued new guidance for evaluating suspect COVID-19 patients CDC Evaluating and Reporting Persons Under Investigation (PUI) (<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>).
- Consult new MDH guidance for evaluating, testing, and reporting COVID-19 in Minnesota: [Evaluating and Testing for Coronavirus Disease 2019 \(COVID-19\)](#)
- This is a time of transition when soon commercial laboratories will be offering SARS-CoV-2 lab testing.
- Contact MDH at 651-201-5414 (1-877-676-5414) for consultation and questions.
- Visit the [CDC Coronavirus Disease 2019 \(https://www.cdc.gov/coronavirus/2019-ncov/index.html\)](https://www.cdc.gov/coronavirus/2019-ncov/index.html) website for additional information on COVID-19.

## Patient Screening

Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Most patients with COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing). Patients with underlying co-morbidities are at higher risk for severe illness and mortality. Clinicians are strongly encouraged to test for other causes of respiratory illness, including infections such as influenza prior to testing for SARS-CoV. Influenza is still circulating in Minnesota. In particular, the following factors are important considerations:

- Patients with a travel history to a geographic area with community transmission ( Level 2 or 3 CDC Travel Notices) within 14 days of onset of fever and cough/difficulty breathing who are influenza test negative;
- Patients who are a close contact of a confirmed case patient with fever or cough/difficulty breathing;
- Patients who are part of a case cluster of patients with fever or cough/difficulty breathing and influenza test negative;
- Patients with pneumonia/ARDS of unknown etiology (testing negative for respiratory pathogens);
- Patients who are healthcare workers with direct patient care who present with fever and cough/difficulty breathing, or with pneumonia who are influenza test negative

## Patient Assessment

Assess the patient in a private room with the door closed, ideally an AIIR. Use standard, contact, and airborne precautions including use of eye protection. Use the following when assessing the patient: PAPR or fit-tested N95 respirator or surgical mask (if PAPR or N95 are not available), gown, gloves, eye protection (face shield or goggles).

Outpatients who are tested must be isolated at home while results are pending (MDH COVID-19 Home Care Instructions), and additional information will be provided if their test is positive.

Patients who are not tested should remain home until 24 hours after improvement of symptoms and resolution of fever without fever reducing medications.

Inpatients: For severely ill patients (e.g., ARDS) without an identified etiology, even without a travel history, consultation with an infectious disease specialist is advised to discuss testing for SARS-CoV-2.

## Patient Specimen Collection Guidance/Specimen Type

Specimens for testing include:

Nasopharyngeal (NP) and oropharyngeal (OP) specimens and a sputum specimen (if the patient has a productive cough or sputum is required for clinical reasons).

Instructions for specimen collection and shipping can be found at [CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation \(PUIs\) for Coronavirus Disease 2019](https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html) (<https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html>)

A [Clinical Testing & Submission Form](#) and a COVID-19 Patient Testing Form ([MDH COVID Patient Testing Forms](#)) must be completed for each specimen, note COVID-19 testing in comments.

**Positive tests from the MDH are considered presumptive positive. Positive results will be communicated but they must also be confirmed at CDC at this time.**

## For More Information

More information is available at the [CDC's Coronavirus Disease 2019 webpage](#) or by calling MDH at 651-201-5414.

A copy of this HAN is available at: [MDH Health Alert Network](#)

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.