COVID-19 Asymptomatic Patient Screening Tests

Effective April 22, 2020, VUMC will start screening selected patients for COVID-19 using the SARS-CoV-2 PCR test, even in the absence of clinical symptoms suggestive of COVID-19 infection. Screening will require collection of a nasopharyngeal specimen for SARS-CoV-2 PCR testing. To support this policy, we are now requiring that an indication for COVID-19 testing be entered whenever the test is ordered.

Rationale for Testing:
- Some people can be infected with COVID-19 without symptoms; identifying these individuals allows us to alter treatment plans as needed (e.g. hold immune suppressing treatment until infection resolved)
- Identifying patients who are negative for COVID-19 infection will allow us to conserve PPE through determination of high risk procedures where an N95 is not needed
- Identifying patients with pre-symptomatic COVID-19 will highlight those who may have higher risk of poorer outcomes from a given treatment or procedure, allowing possible deferral of care

Testing Cohorts:
Asymptomatic Screening Tests for COVID-19 is currently approved for patients in Cohort 0, which includes transplant donors/recipient, nursing home discharges (if required by the specific facility), and heme-onc pts prior to admin of severely immunosuppressive anti-neoplastic chemotherapy. We will expand this program as our lab capacity and resources allow.

Frequently Asked Questions

How do I order a COVID-19 screening test in eStar?
In eStar, order the same test used for clinical testing for COVID-19 (“SARS-CoV-2 PCR Panel”). You will be required to enter an indication for the test:
1. “Testing due to concern for SYMPTOMATIC COVID infection,” which should be selected for evaluation of patients presenting with a clinical picture concerning for COVID-19. This indication WILL be linked with orders for isolation precautions.

2. “Screening of ASYMPTOMATIC patient,” which should be used for screening testing in the absence of a COVID-compatible clinical picture. This indication WILL NOT be linked with orders for isolation precautions, and the ordering provider will be required to acknowledge this prior to order completion.
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If screening of asymptomatic patients is the selected indication, you will be asked to also select the specific reason for screening:

![Reason for testing:]

- Testing due to concern for symptomatic COVID-19 infection
- Screening of asymptomatic patient
- Pre-transplant evaluation
- Pre-receipt of severely immunosuppressive anti-neoplastic therapy
- Approved pre-procedure screening
- Requirement for nursing home/long-term care placement
- On admission to unit approved for screening
- Other (please specify)

You will also need to acknowledge that isolation precautions will not be ordered for the patient. This safety check is to ensure that patients with clinical symptoms concerning for COVID-19 do not accidentally have the wrong indication (and as a result no isolation precautions) selected:

![Reason for testing:]

- Testing due to concern for symptomatic COVID-19 infection
- Screening of asymptomatic patient
- Pre-transplant evaluation
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- Approved pre-procedure screening
- Requirement for nursing home/long-term care placement
- On admission to unit approved for screening
- Other (please specify)

If you choose this option, the patient will not be placed into isolation precautions and this indication will be monitored: I acknowledge that the patient will not be placed into isolation precautions and that use of this indication will be monitored.

Do patients without symptoms who are being screened for COVID-19 need isolation precautions?

No. Those patients who are without COVID-19 symptoms and are being tested as a screen for asymptomatic infection. They are not coughing or sneezing and do not carry the same risk of spread to others. As such, they do not need to be placed into isolation, and no additional PPE outside of usual standard precautions equipment are necessary to collect the specimen (mask and eye protection). If the test returns positive, then the patient should be placed into COVID-19 isolation precautions, and any potentially exposed staff will be contacted by VUMC Occupational Health with additional instructions.

Why don’t we just put every patient into isolation precautions on admission until they have a negative COVID-19 test?

Asymptomatic persons, who are not coughing or sneezing, do not carry the same risk of spreading COVID-19 to others. In addition, our PPE supplies would not be able to meet this practice.

How will I know if a patient with a pending SARS-CoV-2 test is being tested as an asymptomatic screening test or for a concern of active symptomatic COVID infection?

You should look at the Infection flag in the patient chart (left side of chart). If the patient is being tested because of concern of a symptomatic COVID infection, the “COVID (Suspected)” red flag will be present (as will the BPA that alerts to the pending test, see picture). If they are being tested as part of the asymptomatic screening, there will not be any flag or BPA present.
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What happens if a patient is screened and is positive for COVID-19? Am I at risk because I didn’t wear full PPE before the patient’s COVID-19 status was known?

With the new requirement to wear masks while in clinical areas, the use of mask and eye protection during nasopharyngeal swab collection (as this may stimulate cough), usual hand hygiene practices after direct patient care, and the lack of symptoms that can promote spread (like coughing), you would be at low risk for exposure.

What should I say to patients who are being screened for COVID-19?

Tell them that this is being performed as an extra precaution because people have been reported to have a COVID-19 infection without symptoms and may be able to spread the virus to others. As result, we are checking our patients to identify those asymptomatic patients with such an infection. This will allow us both to put in place special infection prevention precautions and to manage the COVID-19 infection. Also, because the testing involves a nasopharyngeal swab, make sure to prepare the patient for the process of specimen collection.

What if a patient or guardian refuses screening?

If they are scheduled for a non-urgent operation, then the operation should be postponed or cancelled. If the patient is admitted to the hospital, then they should wear a mask at all times.

How do I collect a nasopharyngeal swab?

For information about how to collect a nasopharyngeal swab, see https://www.vumc.org/coronavirus/sites/default/files/COVID%20Documents/COVID%2019%20Obtaining%20A%20Lab%20Specimen-%20Main%20Campus%20v.2.pdf.

What’s the expected turn-around time for this screening?

Estimating turn-around times is impacted by both volume of testing and available resources, but currently, testing is completed within 12-24 hours.

Can we use results from COVID-19 testing from an outside facility?

If the patient has positive COVID-19 test results from an outside facility, they should be placed into COVID-19 isolation precautions as a confirmed infection. If the patient has negative COVID-19 test results from an outside facility, these may be used as a screening test if collected within the past 48 hours. If older than 48 hours, the testing must be repeated.

Should we also send an respiratory pathogen panel (RPP) as part of the asymptomatic screening tests?

No. Unlike an evaluation in a symptomatic patient, an RPP is not necessary.

My patient population or procedure has not been officially approved for screening testing. Can I go ahead and screen anyway?

Due to limited amount of laboratory supplies, we are not able to test all patients at this time. If your patient/procedure is not approved, we ask you to refrain from performing screening testing.