

Duke Raleigh Hospital Guidelines for Covid-19 Testing

Last revised: 10/20/2020

This guidance describes various SARS CoV-2 (COVID-19) tests that are available at DRAH and preferred indications for the same. DRAH Chief Medical Officer, Laboratory Microbiology, Infectious Disease, and Infection Prevention will continue to review these indications and provide updates as needed.

Test Definitions

1. Point of Care Testing (POCT)/ Rapid test: This test is similar to other POCT performed across the health system and requires that a specific device is physically located in the clinical environment. Turnaround Times (TAT) for test results will be less than an hour. POCT units and testing kits are limited and judicious use of these tests is strongly encouraged.
2. Inpatient Testing: This molecular diagnostic test (performed at DUH with courier transporting specimens from DRAH to DUH every 2 hours) has a TAT of 5-6 hours from test order to test result.
3. Outpatient Testing: This molecular diagnostic test (done at DUH with courier transporting specimens from DRAH to DUH every 2 hours) has a TAT of 12-24 hours.
4. IP/Administrative Test: This molecular diagnostic test (done at DUH with courier transporting specimens from DRAH to DUH every 2 hours) has TAT of 12-24 hours. This order is not linked to a "Rule out COVID" infection status and is used when indicated for screening asymptomatic patients for discharge to a facility (i.e. skilled nursing, group home setting, etc.).
5. Preprocedural test: This molecular diagnostic test (done at DUH with courier transporting specimens from DRAH to DUH every 2 hours) has a targeted TAT of 7-15 hours. It is not linked to a "Rule out COVID" infection status and is used when indicated for screening asymptomatic patients who will undergo procedure or surgery who are not level 1-4.

If emergent care is required prior to receiving test results, use [appropriate PPE](#).

DUHS does not recommend retesting patients who have tested positive for COVID-19 within the last 90 days to determine if the infection has resolved. Patients can be cleared based on the symptom-based strategy for discontinuing Special Airborne Contact isolation, [using this guidance](#).

For guidance related to repeat testing for persistent COVID-19-like symptoms after negative test results or after a positive test within the last 90 days, [use this guidance](#).

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Type of test	Lab order name and Lab ID	Indications in ED ONLY	Indications in inpatient setting, ICU
POCT	Coronavirus (COVID-19) SARS-Cov-2 Rapid Test LAB9993	<ol style="list-style-type: none"> 1. Special acute populations for whom aggressive high-level PPE are indicated on arrival (e.g. Stroke, Trauma, STEMI, AMS without etiology) and for whom a clear infection risk assessment cannot be performed in a timely fashion (e.g. intubated, obtunded, etc.) 2. All asymptomatic patients who will need inpatient admission 3. All symptomatic patients who will need inpatient admission 4. Those who live in congregate living settings and need testing prior to return, those who cannot return to their shelter or group home without test results 5. Pre-operative/pre-procedural patients (this should be coordinated with procedural team at time of admission if not already ordered). POCT recommended for level 1 to 4. 6. All OSH transfers to DRAH who have symptoms concerning for COVID 	<ol style="list-style-type: none"> 1. Inpatients who need urgent or emergent procedures (Level 1 – 4 OR and IR cases) 2. All OSH transfers to DRAH 3. All direct admits to DRAH

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Type of test	Lab order name and Lab ID	Indications in ED ONLY	Indications in inpatient setting, ICU
Inpatient test	Coronavirus (COVID-19) SARS-CoV-2 PCR -Inpatient Only LAB9985		Admitted patients who develop symptoms while hospitalized.
Administrative test	Coronavirus (COVID-19) SARS-CoV-2 PCR - Administrative LAB9991	This test should not be utilized in the ED	Patients who need to be discharged to congregate living or other healthcare facilities and a test is specifically requested.
Preprocedural test	Coronavirus (COVID-19) SARS-CoV-2 PCR - Preoperative Screen LAB9990		<ol style="list-style-type: none"> 1. Patients who have never been tested for COVID-19 or have never tested positive and will undergo a procedure (full list for procedures here) that is not level 1-4 within three days. 2. Patients who tested positive for COVID-19 more than 90 days prior to the planned procedure. <p>Note: patients who have tested positive for COVID-19 within 90 days of the planned procedure can be cleared for standard precautions based on the symptom-based strategy for discontinuing Special Airborne Contact Isolation, no retesting needed.</p>
Outpatient test	CORONAVIRUS (COVID-19) SARS-COV-2 PCR OUTPATIENT LAB9994	For patients who will be discharged from the ED and do not need a test result prior to discharge	