

COVID-19 Testing Process

COVID-19 testing process within Metro North Hospital and Health Service

Metro North Hospital and Health Service (Metro North HHS) will focus on priority testing to meet the key public health objective of minimising transmission of the COVID-19, as per [Public Health Alert 17](#). To achieve this, the following testing is recommended:

Criteria 1: Meets clinical criteria - Presentations that meet the clinical criteria should be tested for COVID-19. These tests will be processed routinely unless identified as a priority test (see below).

Clinical criteria:

Fever ($\geq 37.5^{\circ}\text{C}$) or history of fever (e.g. night sweats, chills)

OR

Acute respiratory infection (e.g. sore throat, cough, shortness of breath)

OR

Loss of smell or loss of taste

The individual should isolate until results are available

Tests should be labelled as “**priority**”¹ on the testing form if the case **also** meets the epidemiological criteria:

Epidemiological criteria:

- Close contact; or
- International travel, passengers or crew who have travelled on a cruise ship; or
- Lived or travelled through CHO declared hotspot(s)²; or
- In quarantine for any reason; or
- Health, aged or residential care worker with direct patient contact; or
- Are essential workers whose job involves a lot of travel (particularly interstate); or
- Are workers in industries that have been linked with outbreaks elsewhere (e.g. abattoirs, large function venues); or
- Are people of Aboriginal and/or Torres Strait Islander origin.

The individual should isolate until results are available

Criteria 2: Extended clinical criteria - Presentations with sudden onset of other symptoms of COVID-19 (listed below) may be considered for testing. These cases require isolation if clinically appropriate for the patient’s condition or if there is a decision for COVID-19 testing.

Joint pain, diarrhoea, nausea/vomiting,
loss of appetite, fatigue, runny nose, muscle pain

OR

Hospitalised patients with non-specific signs of
infection

If tested, the individual should isolate until results are available

Criteria 3: Quarantine protocol & outbreak management testing - Testing in accordance with current quarantine protocols or as directed by the local Public Health Unit (e.g. RACF outbreak management) are routine tests.

TESTING IS NO LONGER REQUIRED FOR ASYMPTOMATIC PRESENTATIONS OUTSIDE THOSE THAT MEET CRITERIA 3

¹ Priority labelling ensures triaging of sample processing within the laboratory

² <https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19/current-status/hotspots-covid-19>

Notes:

- It is recommended that temperature is measured using a tympanic, oral or other thermometer proven to consistently and accurately represent core body temperature.
- Both deep nasal and oropharyngeal swab samples should be obtained. If unable to collect both, the preference is a deep nasal sample – minimum depth 2-3cm.
- If contradictions for deep nasal swab testing, oropharyngeal swab testing in an acceptable alternative.
- Patients attending clinics that meet testing criteria are to be tested for COVID-19 only (using the pre-printed COVID-19 Enhanced Testing Pathology Form Template) unless there is strong clinical suspicion of other respiratory virus.
- If clinically indicated, requesting clinicians can add the GeneXpert test “fluA&B/RSV” request by hand
- Full respiratory panel (RESPCR) should be reserved for individuals who may require admission, or where infection control decisions need to be made (e.g. Healthcare workers, in the assessment of vulnerable immunocompromised patients)
- Lower respiratory tract specimens may potentially contain the highest viral loads and should be collected wherever clinically indicated.
- Clinical prioritisation may occur within testing laboratories. If relevant, include prioritisation criteria as appropriate – clinically unwell, high risk, staff/health care worker or other prioritisation criteria.

Notes

- Any person tested is required to isolate until symptoms have resolved or the test result is 'negative', whichever is the latter.
- Clinical judgement should be exercised when considering retesting.
- Asymptomatic contacts of people undergoing testing are not required to isolate unless they are otherwise directed to isolate by the Public Health Unit as part of outbreak management.

Specimen Collection and Testing

Samples for testing:

- Upper respiratory tract samples – deep nasal and oropharyngeal swab (both sites swabbed with a single swab)
- If the lower respiratory tract is involved - sputum sample
- For confirmed positive cases – blood sample (to be stored pending serological availability)

Test request wording:

- *SARS-Cov-2 (COVID-19) PCR Swab NCVPCR*
- **If meets criteria for priority testing:** *PRIORITY*

Further information

- [CDNA National guidelines for public health units.](#)
- [Queensland Health COVID-19 Public Health Alerts](#)
- [PHLN guidance on laboratory testing for SARS-CoV-2 \(the virus that causes COVID-19\)](#)