

Center for Policy, Planning and Evaluation
Division of Epidemiology – Disease Surveillance and Investigation

March 20, 2020

Health Notice for District of Columbia Health Care Providers
Coronavirus Disease (COVID-19):
Update on Testing and Guidance for Discontinuing Home Isolation

Summary

This guidance provides an overview for DC Healthcare Providers about 1) updated specimen collection and submission instructions and 2) required disposition for discontinuing home isolation for persons diagnosed with COVID-19.

- DC Health has not yet adopted clinical criteria for diagnosing COVID-19 cases. All cases must be laboratory confirmed for COVID-19.
- Providers no longer need to submit the CDC 50.34 Test Requisition Form
- It is preferred that providers collect both an NP swab and an OP swab and place both swabs into a **single** specimen tube with viral transport media (VTM) or universal transport media (UTM). NP swabs alone are an acceptable alternative.
- Specimens should be collected using contact and droplet precautions with eye protection (face shield or goggles) **AND**
 - In a private room with a closed door
 - Please preserve negative pressure rooms and respirators (i.e. N95) for aerosolizing procedures only (until the supply chain stabilizes)
- Discontinuation of home isolation should be based on both a time-since-illness-onset and time-since-recovery (non-test-based) strategy for the general public, and 2) preferably a test-based strategy for healthcare workers.

Please note that since limited information is available to characterize the spectrum of clinical illness, transmission efficiency, and the duration of viral shedding for persons with novel coronavirus disease (COVID-19), this guidance is subject to change as the COVID-19 pandemic progresses and as additional information becomes available.

Background

At this time, DC Health still requires laboratory confirmation for COVID-19 diagnosis for documenting and taking public health action against COVID-19. Additional COVID-19 guidance regarding personal protective equipment, testing criteria, telemedicine, and other information can be found in separate health notices on the DC Health website: <https://dchealth.dc.gov/page/health-notice>

Now that COVID-19 testing is available at commercial and hospital labs, providers can choose to pursue testing through the DFS Public Health Laboratory by getting approval through DC Health for cases that meet testing criteria (see the March 13th Health Notice), or to send specimens to commercial or hospital-based labs. The recommended specimen collection for DC Health has been modified to include only one specimen tube for both the NP and OP swabs; this is being done as an effort to preserve a possibly limited supply of available of materials.

Testing and Diagnosis of Persons with COVID-19

DC Health requires laboratory confirmation for COVID-19 diagnosis for documenting and taking public health action against COVID-19.

- All patients being tested for COVID-19 should be instructed to quarantine at home until test results are reported.
- If the test result is negative:
 - Patients who do not have an identified source of exposure do not need to remain in quarantine
 - Patients who have an identified source of exposure need to remain in quarantine for 14 days from the time of their exposure
- If the test result is positive
 - Patients must remain in isolation until it is discontinued per the guidelines below
- Guidance documents for family members, pets, and other resources are available at coronavirus.dc.gov.

Discontinuation of In-Home Isolation for Persons with COVID-19

DC Health recommends using the test-based strategy for healthcare workers and immunocompromised persons. All others should use the non-test based strategy to guide discontinuation of home isolation.

Non-test-based strategy: Time-since-illness-onset and time-since-recovery strategy

Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:

- At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath);
AND
- At least 7 days have passed since symptoms first appeared, whichever is later.

Test-based strategy:

Persons who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:

- Resolution of fever without the use of fever-reducing medications
AND
- Improvement in respiratory symptoms (e.g., cough, shortness of breath)
AND
- Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens).

Individuals with laboratory-confirmed COVID-19 who did not have symptoms at the time of diagnosis may discontinue home isolation when at least 7 days have passed since the date of their first positive COVID-19 diagnostic test and have had no subsequent illness.

Discontinuation of In-Home Isolation for Immunocompromised Persons with COVID-19

Limited information is available to characterize the spectrum of clinical illness, transmission efficiency, and the duration of viral shedding for immunocompromised persons with novel coronavirus disease (COVID-19).

Updated Specimen Collection Guidelines for Testing through the DC Public Health Laboratory

- Guidelines on collecting, handling and testing of clinical specimens from PUIs for COVID-19 can be found on the DFS PHL website: <https://dfs.dc.gov/publication/phl-forms-and-documents>
- Specimens should be collected in a private room with a closed door using contact (gown and glove) and droplet precautions with eye protection (face shield or goggles). Respirators can be preserved for aerosolizing procedures (until the supply chain stabilizes), and face masks may be used for specimen collection.
- **NEW: Collect an NP swab and an OP swab then place both swabs in the same single specimen tube (in Viral Transport Media (VTM) or universal transport media (UTM)).** A single NP swab is an acceptable alternative.
- Please label specimens appropriately with patient's full name, date of birth, date and time of specimen collection, and unique patient identifier (medical record number or PUI number).
- Specimens should be collected as soon as possible once a PUI is identified regardless of time of symptom onset.
- If approved for testing by DC Health, please complete the following forms, which are available on the DFS PHL website: <https://dfs.dc.gov/publication/phl-forms-and-documents>
 - **Required:** DC DFS PHL External Chain of Custody (CoC)
 - **Required:** DC DFS PHL Test Requisition Form
 - **NOT required:** The CDC 50.34 Test Requisition Form.
- Detailed instructions about specimen testing and forms will also be provided via email once testing is approved. Incorrectly labeled or missing information on forms and specimens will result in testing delays or specimen rejection.
- Please contact the PHL for any questions pertaining to testing:
 - Phone: 202-727-8956 (Monday-Friday from 8:30am-5:30pm), 202-868-6561 (after-hours calls), Email: dc.phl@dc.gov

The guidelines above will continue to be updated as the outbreak evolves. Please visit the DC Health and CDC websites regularly for the most current information.

**Please contact the DC Health
Division of Epidemiology–Disease Surveillance and Investigation at:**

**202-576-1117 (8:15am-4:45pm)
844-493-2652 (after-hours, healthcare providers only)
Fax: 202-442-8060 | Email: doh.epi@dc.gov**