

COVID-19 INTERIM TESTING CRITERIA & INFECTION CONTROL UPDATES

The Houston Health Department has 2019-nCoV Real-Time RT-PCR testing available. Testing conducted by the Houston Health Department must have prior approval from the Epidemiology Program at a Houston area health department. Contact information for Houston area health departments is listed at the end of this document.

Testing is also available through commercial laboratories. Please contact commercial laboratories for details on test codes and ordering.

Specimens need to be collected by a doctor, clinic, or hospital, not the local health department.

Please do not send people to the Emergency Department for testing if they do not need emergency medical care.

Interim Criteria to Guide Testing of Persons Under Investigation (PUIs) for Coronavirus Disease 2019 (COVID-19)

Due to current testing capacity in Texas, public health laboratories in Texas, including Houston Health Department, will use the following criteria to prioritize testing of persons at risk for COVID-19.

Clinical Features	&	Epidemiologic Risk
Fever ¹ or signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath).	AND	Any person, including health care workers ² , who has had close contact ³ with a laboratory-confirmed ⁴ COVID-19 patient within 14 days of symptom onset.
Fever ¹ and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath). Clinicians are strongly encouraged to test for other causes of respiratory illness (e.g., influenza).	AND	OR A history of travel from affected geographic areas ⁵ (see below) within 14 days of symptom onset An individual(s) with risk factors that put them at high risk of poor outcomes ⁶
Fever ¹ and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization. Clinicians are strongly encouraged to test for other causes of respiratory illness (e.g., influenza).	AND	No source of exposure has been identified

¹Fever may be subjective or confirmed

²For healthcare personnel, testing may be considered if there has been exposure to a person with suspected COVID-19 without laboratory confirmation. Because of their often extensive and close contact with vulnerable patients in healthcare settings, even mild signs and symptoms (e.g., sore throat) of COVID-19 should be evaluated among potentially exposed healthcare personnel. Additional information is available in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 \(COVID-19\)](#).

³Close contact is defined as—

a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case

— or —

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are met. Additional information is available in CDC's updated [Interim Infection Prevention and Control Recommendations for Patients with Confirmed COVID-19 or Persons Under Investigation for COVID-19 in Healthcare Settings](#).

Data to inform the definition of close contact are limited. Considerations when assessing close contact include the duration of exposure (e.g., longer exposure time likely increases exposure risk) and the clinical symptoms of the person with COVID-19 (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to healthcare personnel exposed in healthcare settings as described in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with COVID-19](#).

⁴Documentation of laboratory-confirmation of COVID-19 may not be possible for travelers or persons caring for COVID-19 patients in other countries.

⁵Affected areas are defined as geographic regions where sustained community transmission has been identified. Relevant affected areas will be defined as a country with at least a CDC Level 2 Travel Health Notice. See all [COVID-19 Travel Health Notices](#). It may also include geographic regions within the United States where documented community transmission has been identified.

⁶Other symptomatic individuals such as older adults (age \geq 65 years) and individuals with chronic medical conditions and/or an immunocompromised state that may put them at higher risk for poor outcomes (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease).

Specimen Collection Guidelines:

The Centers for Disease Control and Prevention (CDC) has updated specimen collection criteria to include combined NP/OP specimens as an option for upper respiratory specimen collection. This means that a nasopharyngeal and an oropharyngeal specimen are collected separately on two swabs and then both swabs are placed into the same viral transport media.

Infection Control Updates:

We would also like to draw your attention to the **“Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings,”** by the CDC. You can reference the guidance <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>. For your convenience, a summary of the changes are provided below:

- Updated PPE guidance for the care of patients with known or suspected COVID-19:
 - To conserve respirators, facemasks can be used.
- Updated recommendations regarding need for an airborne infection isolation room (AIIR)
 - AIIRs are needed for aerosol-generating procedures only. Otherwise, a single-person room with a closed door may be used.

Additional Recommendations for Healthcare Providers:

1. **Asymptomatic individuals should not be tested**, it would have no clinical value or benefit to the patient.
2. We recommend testing for other, more common respiratory infections first. If you choose to test in an outpatient setting, then minimize that person's time and exposures in the waiting room.
3. Recommend self-quarantine at home for people who are awaiting test results and symptomatic. CDC guidance on self-quarantine for patients is here, in English and Spanish: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html>
4. Once a patient tests positive, current practice in the U.S. is to obtain two consecutive negative tests at least 24 hours apart before ending self-isolation. Testing begins when a patient is symptom-free off medications for 24 hours.
5. Local health departments can provide clinicians with technical assistance at the numbers listed in the Houston Area Health Departments table at the end of this document.
6. The general public can call the Houston Health Department COVID-19 hotline with questions at (832) 393-4220, M-F 9 AM-7 PM, Sat-Sun 9 AM – 3 PM.



Houston Area Health Departments

Harris County Public Health

Telephone: (713) 439-6000

Fax: (713) 439-6306

After Hours: (713) 755-5000

<http://publichealth.harriscountytx.gov/>

Houston Health Department

Telephone: (832) 393-5080 (24 hr #)

Fax: (832) 393-5232

www.houstontx.gov/health/index.html

Texas Department of State Health Services

Health Service Region 6/5 South

Telephone: (713) 767-3000

Fax: (713) 767-3006

After Hours: (800) 270-3128

www.dshs.state.tx.us/region6-5/default.shtm

Galveston County Health District

Telephone: (409) 938-2322

Fax: (409) 938-2399

After Hours: (888) 241-0442

www.gchd.org

Montgomery County Public Health Department

Telephone: (936) 523-5026

Fax: (936) 539-9272

After Hours: (888) 825-9754

<https://mcphd-tx.org>

Fort Bend County Health and Human Services

Telephone: (281) 342-6414

Fax: (281) 342-7371

After Hours: (281) 434-6494

www.fortbendcountyhhs.com

Brazoria County Health Department

Telephone: (979) 864-2168

Fax: (979) 864-3694

After Hours: (800) 511-1632

www.publichealthmatters.net

Chambers County Health Department

Telephone: (409) 267-2730

Fax: (409) 267-4276

After Hours: (409) 267-9862

https://www.co.chambers.tx.us/page/health_department

Beaumont Public Health Document

Telephone: 409-654-3603

FAX: 409-832-4270

After Hours: 409-998-3389

sherry.ulmer@beaumonttexas.gov

Port Arthur Public Health Department

Telephone: 409-983-8832

Judith.smith@portarthurtx.gov

Hardin County Health Department/Orange County

Telephone: (409)209-5363

Fax: (409)246-4373 or (409)246-5263

After Hours: (409)659-7759

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