6/27/20
This document supersedes prior documents regarding diagnostic criteria. Current criteria for testing vary by location of care and are subject to change. Ongoing limitations in testing capacity require prioritization based on symptoms and need for hospital admission or procedures.

Preliminary data suggest high sensitivity of the COVID-19 PCR from a nasopharyngeal swab. In most cases, a single negative test will be sufficient to rule out COVID-19. In cases of high clinical suspicion and an initial negative test, a second COVID-19 PCR should be performed. Please see the COVID-19 de-escalation document for guidance on discontinuing Special Pathogens Precautions.

Testing guidance can be found below for the following patient populations:

A. HOSPITALIZED PATIENTS (updated 4/29/20)  2
B. EMERGENCY DEPARTMENT (updated 6/22/20)  2
C. OCCUPATIONAL HEALTH SERVICES (updated 6/22/20)  2
D. AMBULATORY CARE PATIENTS (updated 6/22/20)  3
E. OR AND PROCEDURAL AREAS  3
F. ASYMPTOMATIC SPECIAL POPULATIONS (updated 6/22/20)  3
A. INDICATIONS FOR COVID-19 TESTING IN HOSPITALIZED PATIENTS (updated 4/29/20)  
All hospitalized patients should be tested according to the algorithm found at:  
http://www.med.umich.edu/i/ice/resources/coronavirus/TestingAllPatientsAlgorithm.pdf

B. INDICATIONS FOR COVID-19 TESTING FOR PATIENTS IN THE EMERGENCY DEPARTMENT (updated 6/22/20)  
Patients who qualify for testing through this algorithm will have a single nasopharyngeal swab* obtained and sent for COVID-19 PCR. Flu/RSV PCR or RPAN can also be sent per provider discretion.  

Patients must meet the following criteria to qualify for COVID-19 testing:  
Any one of the following:  
• Planned hospital admission  
• Fever (T >100.4°F or 38°C)  
• New cough  
• New shortness of breath or hypoxia  

Or any two of the following:  
• Chills  
• Muscle aches  
• New headache  
• New URI symptoms (rhinorrhea, nasal congestion, sore throat)  
• New loss of sense of smell or taste  
• New diarrhea  
• New rash

C. INDICATIONS FOR COVID-19 TESTING THROUGH OCCUPATIONAL HEALTH SERVICES (updated 6/27/20)  
Patients who qualify for testing through this algorithm will have a single nasopharyngeal swab* obtained and sent for COVID-19 PCR. Flu/RSV PCR or RPAN can also be sent per provider discretion.  

Patients must meet the following criteria and be a University of Michigan employee to qualify for COVID-19 testing:  
Any one of the following:  
• Fever (T >100.4°F or 38°C)  
• New cough  
• New shortness of breath or hypoxia  

Or any two of the following:  
• Chills  
• Muscle aches  
• New headache  
• New URI symptoms (rhinorrhea, nasal congestion, sore throat)  
• New loss of sense of smell or taste  
• New diarrhea  
• New rash
D. INDICATIONS FOR COVID-19 TESTING FOR SYMPTOMATIC AMBULATORY CARE PATIENTS (updated 6/22/20)
   Patients who qualify for testing through this algorithm will have a single nasopharyngeal swab* obtained and sent for COVID-19 PCR. Flu/RSV PCR or RPAN can also be sent per provider discretion.

   Patients must meet the following criteria to qualify for COVID-19 testing:
   Any one of the following:
   • Fever (T >100.4°F or 38°C) or chills
   • New cough
   • New shortness of breath or hypoxia
   Or any two of the following:
   • New headache
   • Muscle aches
   • New URI symptoms (rhinorrhea, nasal congestion, sore throat)
   • New loss of sense of smell or taste
   • New diarrhea
   • New rash

E. INDICATIONS FOR COVID-19 TESTING IN OR AND PROCEDURAL AREAS
   (see http://www.med.umich.edu/i/ice/resources/coronavirus/screening_surgical_patients.pdf):
   1. Patients undergoing general anesthesia
   2. Patients undergoing high/moderate-risk aerosol-generating procedures (AGPs)
   3. Patients who will recover from their procedure in a PACU or other similar setting in an area that performs AGPs

F. INDICATIONS FOR COVID-19 SCREENING OF ASYMPTOMATIC SPECIAL POPULATIONS (updated 6/22/20)
   1. Adult and pediatric patients with planned hematopoietic stem cell transplantation conditioning therapy within the following 48 hours
   2. Adult and pediatric patients with planned imminent solid organ transplantation
   3. Neonates born to COVID-19 positive mothers (see newborn testing guidelines)
   4. Michigan Medicine employees following a high-risk occupational exposure or exposure to a household member or other close contact with confirmed COVID-19.

*While collection using an NP swab is preferred, obtaining an oropharyngeal (OP) swab is acceptable if an NP collection is contraindicated. Examples include patients with facial trauma, nasal septal or palate defects, or severe coagulopathy.

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Revision History:
4/7: Removed testing pager requirement
4/14: Added OHS testing guidance, adjusted ED, asymptomatic, and ambulatory testing guidance
4/20: Revised ambulatory testing guidance
5/1: Removed Testing to remove Special Pathogens Precautions section
6/29: Revised ED, OSH, Ambulatory care, OR areas, and Asymptomatic Special Populations sections

The recommendations in this guide are meant to serve as treatment guidelines for use at Michigan Medicine facilities. If you are an individual experiencing a medical emergency, call 911 immediately. These guidelines should not replace a provider’s professional medical advice based on clinical judgment, or be used in lieu of an Infectious Diseases consultation when necessary. As a result of ongoing research, practice guidelines may change over time. The authors of these guidelines have made all attempts to ensure the accuracy based on current information, however, due to ongoing research, users of these guidelines are strongly encouraged to confirm the information contained within them through an independent source.

If obtained from a source other than med.umich.edu/asp, please visit the webpage for the most up-to-date document.