Title: BILH SARS-CoV-2 PCR Testing Prioritization Strategy for Patients and Staff

Purpose: To outline prioritization of testing for SARS-CoV-2 by routine nasopharyngeal PCR among symptomatic patients and healthcare personnel, as well as populations for asymptomatic screening.

Guideline Statement: COVID-19 is caused by the virus SARS-CoV-2. Due to anticipated volume of SARS-CoV-2 testing needs, tests will be prioritized by risk to other patients and staff, to the individual patient and necessary turnaround time in order to facilitate urgent management.

Please maintain Droplet Precautions with eye protection and Contact Precautions for inpatients while a diagnosis of COVID-19 is being considered (Private Room Required)

Priority Level	Type of Patient	Lab
Level	Symptomatic patients:	BIDMC
1	Inpatients	DIDIVIC
	 ED patients with planned admission 	
	 Pregnant persons of any gestational age 	
	Asymptomatic patients:	
	 Pregnant persons within expectation of delivery in the next 48 hours or on 	
	admission	
	 Patients admitted from high-risk congregate settings (i.e., nursing homes, 	
	skilled nursing facilities, homeless shelters, group homes)	
	 Patients getting admitted to inpatient psychiatric unit 	
2	Symptomatic healthcare personnel, including first responders	BIDMC
	Symptomatic outpatients with high-risk healthcare contact:	BIDMC
3	Patients receiving hemodialysis at a dialysis center	
	• Patients receiving infusions at a hospital-based practice or home infusion with	
	VNA	
	 Patients receiving chemotherapy with a high likelihood of admission 	
	Patients receiving radiation therapy	
	• Patients on the transplant list or with a history of solid organ transplant or bone	
	marrow transplant within the last year	
	Patients with ventricular assist devices	
	Asymptomatic patients:	
	Patients 48 hours prior to all scheduled operative procedures	
	Patients 48 hours prior to scheduled high-risk non-operative procedures	
4	Symptomatic patients from:	Commercial Lab
	Congregate settings as outpatients (nursing homes, homeless shelters, group	
	homes, dormitories, etc.)	
	• Densely populated communities with known clusters of infection (i.e. Chelsea,	
	Dorchester, Brockton)	
	Symptomatic outpatients with other high-risk conditions without high-risk healthcare	Commercial Lab
5	contact:	
	Chronic lung (such as asthma, chronic obstructive pulmonary disease [COPD]	
	and cystic fibrosis)	
	 Endocrine (such as diabetes mellitus) 	
	Cardiac disease (such as congenital heart disease, congestive heart failure and	
	coronary artery disease)	
	Hematologic malignancy	
	 Immunosuppression (due to disease or medication) 	
	 Liver disease 	
	 Chronic kidney disease (other than on hemodialysis) 	
	 Age>60 	
	 Extreme obesity (BMI ≥40) 	
6	All other symptomatic outpatients	Commercial Lab
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