

STATE OF MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES LANSING

ROBERT GORDON DIRECTOR

GRETCHEN WHITMER GOVERNOR

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Guidance for COVID-19 Specimen Collection and Testing

Laboratory Partner:

In response to the ongoing COVID-19 pandemic, the Bureau of Laboratories (BOL) offers the following updated guidance to assist in specimen collection and optimal test result reporting.

- The March 12th CDC guidance states that NP collection is optimal for virus detection. Please use VTM, UTM or M4 transport media when collecting swab specimens.
 - Starting March 13th, if both NP and OP swabs are submitted to BOL for testing, <u>only</u> the NP swab will be tested. OP swab specimens received before March 13th will be tested. Sputum (not spit) will also be accepted. Specimens must be kept cold until they reach the laboratory that performs the testing.
- Respiratory Virus Panel testing should be performed prior to submission when possible. Rapid Flu is an acceptable test to run.
- Weekend testing will be provided at BOL. Please note that due to high test request volumes we will make every effort to test specimens within 24 hours. Please note that this is not always possible when volumes are especially high.
 - To assist in ensuring specimens may be tested in a timely manner please ensure all appropriate requisition forms are completed and that tubes are labeled appropriately with at least two unique identifiers (i.e. Name, DOB, Source).
- Please contact the lab as soon as possible for weekend delivery with facility specific couriers or other means of transportation that require access to the facility. For safety and security reasons we need the name of the company and individual where possible. A time frame for delivery is very helpful. Drivers will be required to show picture identification (i.e. driver's license) to gain entry. If pre-approval for delivery is not granted it is likely a driver will need to wait outside the gate until formal approval can be completed. This is based upon federal program requirements and BOL appreciates adherence to these policies.
- Commercial laboratories are offering COVID-19 testing services and are a desirable alternative for patients with mild to moderate illness when possible from your facility. Triaging samples in this way may improve turn-around-time at Bureau of Laboratories.

Some examples of commercial labs are:

Mayo Clinic: https://www.mayocliniclabs.com/

ARUP: https://www.aruplab.com/
LabCorp: https://www.labcorp.com/

Quest Diagnostics: http://www.questdiagnostics.com/home/

- MDHHS is working closely with several hospitals across the state to assist with bringing testing
 availability in-house at those facilities. Please check with your healthcare system if they plan to offer
 testing and for approximate time frames.
- Guidance has changed. Before sending specimens to MDHHS labs, we are encouraging submitters to notify their local HDs, but it is no longer required. The HDs should at least be notified that specimens were sent.
- To abide by patient privacy regulations, laboratory test results will be sent to the submitting agency only. Bureau of Laboratories will not provide laboratory results by phone to individual patients.
- The link below will provide help with information regarding packaging and shipping of specimens. www.michigan.gov/mdhhslab
- Due to supply issues, we are unable to send collection kits to clinics, i.e. urgent care clinics, private practice offices. Specimen collection components should be available from your hospital or local HD.
- Physicians are strongly encouraged to send specimens from ill individuals with the following criteria:

*The affected geographical areas are still China, Iran, Japan, Hong Kong, and Italy (highlighted below). However, this is subject to change as the outbreak continues to spread in Europe and also here.

Clinical Features		Epidemiologic Risk
Fever or signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath)	AND	Any person, including healthcare personnel, who has had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset
Fever and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization	AND	*A history of travel from affected geographic areas, within 14 days of symptom onset
Fever with severe acute lower respiratory illness (e.g., pneumonia, ARDS (acute respiratory distress syndrome) requiring hospitalization and without an alternative explanatory diagnosis (e.g., influenza).	AND	No identified source of exposure