

# Missouri Department of Health & Senior Services

## Health Update:

Health Update  
April 22, 2020

### Update: New Criteria to Guide Evaluation and Laboratory Testing for COVID-19 at the Missouri State Public Health Laboratory

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This document will be updated as new information becomes available. The current version can always be viewed at <http://www.health.mo.gov>.

The Missouri Department of Health & Senior Services (DHSS) is now using four types of documents to provide important information to medical and public health professionals, and to other interested persons:

**Health Alerts** convey information of the highest level of importance which warrants immediate action or attention from Missouri health providers, emergency responders, public health agencies or the public.

**Health Advisories** provide important information for a specific incident or situation, including that impacting neighboring states; may not require immediate action.

**Health Guidances** contain comprehensive information pertaining to a particular disease or condition, and include recommendations, guidelines, etc. endorsed by DHSS.

**Health Updates** provide new or updated information on an incident or situation; can also provide information to update a previously sent Health Alert, Health Advisory, or Health Guidance; unlikely to require immediate action.

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**FROM: RANDALL W. WILLIAMS, MD, FACOG  
DIRECTOR**

**SUBJECT: Update: New Criteria to Guide Evaluation and Laboratory Testing for COVID-19 at the Missouri State Public Health Laboratory**

COVID-19 diagnostic testing is available through the Missouri State Public Health Laboratory (SPHL) for individuals meeting the criteria included in the appendices to this Health Update. The additional included algorithm is being used by our call center to determine if testing for COVID-19 by the State Public Health Laboratory will be approved.

Please note that some of the initial decision making will require that the patient be evaluated by a healthcare provider. Requests for testing approval must come from a healthcare provider, not the patient or patient's family member. To request testing for patients that meet one of these criteria, please contact your local public health agency or the Missouri Coronavirus Information hotline at 877-435-8411 and select Option 2.

**For individuals not meeting DHSS criteria for testing, providers may pursue private laboratory testing. Testing through private laboratories does not require DHSS approval.**

#### Test Types and Their Uses

Currently, the COVID-19 testing at the SPHL includes solely **PCR**. This testing detects the presence of COVID-19 RNA in the clinical specimen, and indicates a likely current infection of COVID-19. Providers should be aware that some patients may shed virus for several weeks, the maximum of which is still being studied. For public health surveillance purposes, PCR testing is considered confirmatory.

Several laboratories are expected to begin offering **serological** testing in the near future, and providers may already be ordering this type of test for their patients. This type of testing detects the presence of antibodies in a person who has previously been exposed to the virus that causes COVID-19 and is not useful for determining if the patient is currently infectious, or if person has developed immunity.

## **Isolation for Patients Awaiting Test Results**

Local public health agencies routinely follow up with individuals that are identified as confirmed or probable COVID-19 cases to ensure appropriate isolation, but this disease control activity depends on test results and case reports as their notification mechanism. Individuals being testing for COVID-19 should be considered suspect cases and asked to self-isolate at least until test results are received. This is an important disease control step that healthcare providers can take to help control the spread of COVID-19 in our communities.

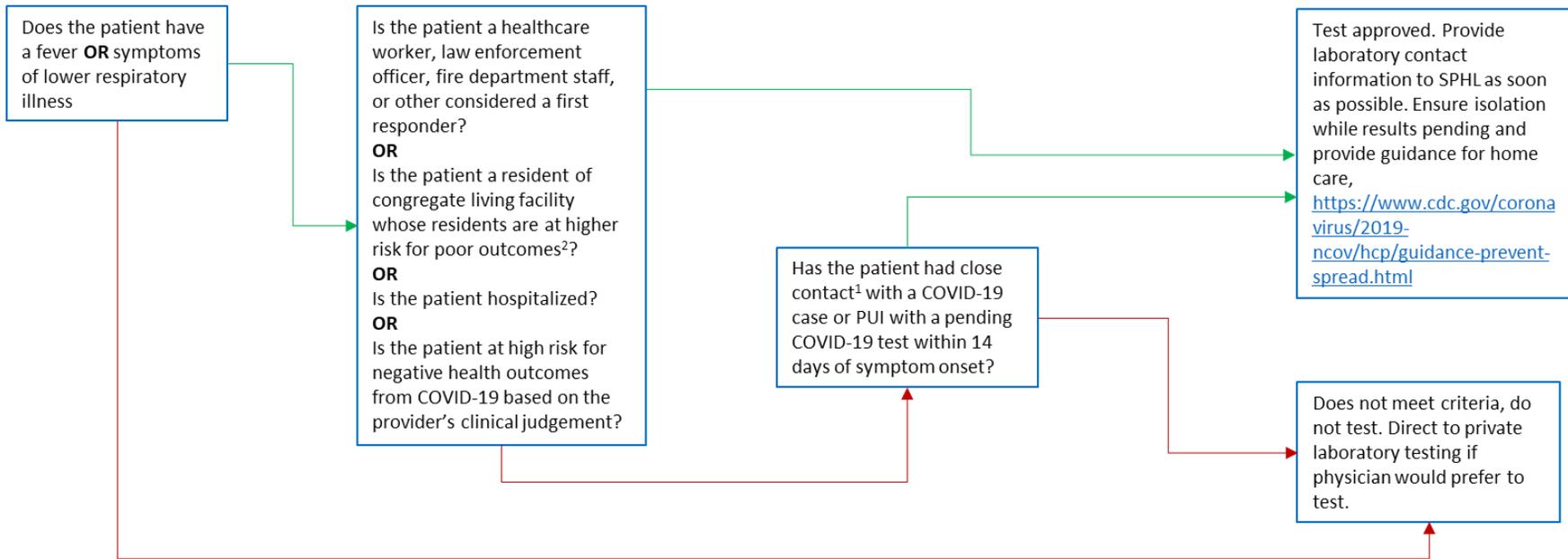
Patients can be provided educational materials to help them understand what self-isolation means: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/sick-with-2019-nCoV-fact-sheet.pdf>.

Additionally, patients can be provided information about how to protect their families while their test is pending: <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/care-for-someone.html>

Risk Groups to be Approved for COVID-19 Testing by DHSS	
Risk Group	Definitions and Further Information
Symptomatic <sup>1</sup> close contacts to a suspect COVID-19 patient with pending laboratory testing or laboratory-confirmed COVID-19 patient	<p>Close contact is defined as—</p> <p>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</p> <p>– or –</p> <p>b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)</p> <p>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.</p>
Symptomatic <sup>1</sup> healthcare workers, law enforcement officers, fire department staff, and others who are considered first responders	Contact with a suspected or confirmed case is not required for these individuals.
Symptomatic <sup>1</sup> residents of congregate living facilities whose residents are at higher risk for poor outcomes	<p>Those at higher risk for poor outcomes can include older adults and individuals with chronic medical conditions and/or an immunocompromised state.</p> <p>Note: In some facilities with a large number of cases that indicate late detection of an outbreak or infection control lapses, testing for all staff and residents MAY be approved <u>on a case-by-case basis</u> in consultation with state epidemiology staff or DHSS Director.</p>
Symptomatic <sup>1</sup> hospitalized patients who have signs and symptoms compatible with COVID-19	Testing for these individuals should be used to inform decisions regarding infection control.
Symptomatic <sup>1</sup> patients who are at high risk for negative health outcomes from COVID-19	Risk for negative health outcomes is based on the provider's clinical judgement.

**Note: Postmortem testing can be approved through the Missouri State Public Health Laboratory if an individual would have met a criterion above prior to their death.**

<sup>1</sup>Symptoms may include any of the following: fever, cough, shortness of breath or difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, new loss of taste or smell, or any other relevant symptoms per medical provider judgement



Clearance Testing: Approve clearance testing for individuals required to use test-based method to return to at-risk group setting as resident or employee, such as long-term care, corrections, adult group homes, healthcare facilities, etc. Clearance testing is 2 consecutive negative tests where specimens are taken at least 24 hours apart. **ONLY FOR PREVIOUSLY CONFIRMED CASES**

<sup>1</sup>Close 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.

<sup>2</sup>Those at higher risk for poor outcomes can include older adults and individuals with chronic medical conditions and/or an immunocompromised state (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease).

**Note: Postmortem testing can be approved through the Missouri State Public Health Laboratory if an individual would have met a criterion above prior to their death.**