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To: Healthcare Providers

From: Catherine M. Brown, DVM, MSc, MPH, State Epidemiologist  
Larry Madoff, MD, Medical Director  
Sandra Smole, PhD, Director, State Public Health Laboratory

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RE: Testing of Persons with Suspect COVID-19

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Massachusetts has widespread community transmission of COVID-19 and the Department of Public Health (DPH) has made recommendations consistent with transition into the community mitigation phase of the response. This document includes guidance about laboratory testing and specimens that can be submitted to the MA State Public Health Laboratory (SPHL).

### **TESTING**

The epidemic has evolved, and testing options in commercial and clinical labs have expanded. Priorities for testing at the SPHL are aimed at identifying places where public health action could be used to slow the transmission of disease and to protect:

- The healthcare and critical infrastructure workforces.
- Residents in congregate settings where transmission occurs easily, especially when individuals at higher risk for severe disease are involved.

DPH wants to maintain the ability to provide testing with rapid turn-around-times for high priority situations.

- **When collecting a specimen from a patient that meets the DPH criteria 1-3, it is not necessary to call for testing approval prior to submission.**
- **Information on the specimen submission form should be complete and legible, so that the reason for testing is clear.**
- **Testing for influenza and other respiratory viruses is NOT requested prior to testing for COVID-19 but should be done, as needed, based on clinical considerations.**
- **Patients in DPH criteria 4-6 should be tested through commercial reference laboratories or other clinical laboratories as they become available.**
- **People being tested for COVID-19 infection should be told to self-isolate at home pending test results.**

**A single NP swab should be submitted: dual swabs (OP and NP) are no longer indicated.** For complete information on specimen collection and submission, please review the [COVID-19 State Public Health Laboratory FAQ](#).

**PATIENTS IN CATEGORIES 1-3 CAN<sup>1</sup> BE TESTED THROUGH THE  
MASSACHUSETTS STATE PUBLIC HEALTH LABORATORY**

EPIDEMIOLOGIC OR OCCUPATIONAL RISK		CLINICAL FEATURES <sup>3</sup>
<p><b><u>CATEGORY 1</u></b> Healthcare personnel and first responders</p>	<b>AND</b>	<p>Fever <b>OR</b> signs/symptoms of respiratory illness</p> <ul style="list-style-type: none"> <li>• even mild signs and symptoms (e.g., sore throat) of COVID-19 should be evaluated among healthcare personnel.</li> </ul>
<p><b><u>CATEGORY 2</u></b> Acute respiratory illness in congregate settings (e.g., Long-term care facilities, shelters, prisons)</p> <ul style="list-style-type: none"> <li>• LTCF populations are at high risk for severe disease and transmission can occur readily in these settings. There should be a low threshold for testing in this setting.</li> </ul>	<b>AND</b>	<p>Fever <b>OR</b> signs/symptoms of a lower respiratory illness (e.g., cough, shortness of breath, pneumonia)</p> <p>Residents of long-term care facilities may present with other signs and symptoms such as sore throat, malaise, body aches, low grade fever, lowered O2 saturation, changes in mental status, diarrhea and changes in control of diabetes.</p>
<p><b><u>CATEGORY 3</u></b> Hospitalized patients with fever and acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization</p>	<b>AND</b>	<p>Clinical features that may increase suspicion of COVID-19 include:</p> <ul style="list-style-type: none"> <li>• infiltrative process on chest x-ray (e.g., bilateral infiltrates consistent with viral pneumonitis).</li> <li>• bilateral ground-glass opacities on chest CT</li> <li>• unexplained lymphocytopenia or thrombocytopenia</li> </ul>

<sup>1</sup>Specimens from patients in categories 1-3 may be tested at the State Public Health Laboratory or other clinical laboratory at the discretion of the submitter

<sup>2</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 while the case was symptomatic or within the 48 hours before symptom onset

– or –

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on) while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection).

<sup>3</sup>Fever may be subjective or confirmed

**PATIENTS IN CATEGORIES 4-6 SHOULD NOT BE SENT TO THE MASSACHUSETTS STATE PUBLIC HEALTH LABORATORY BUT CAN BE TESTED THROUGH COMMERCIAL LABORATORIES BASED ON CLINICAL JUDGMENT**

<p><b><u>CATEGORY 4</u></b> Individuals at higher risk for complications including older individuals and those with co-morbidities</p>	<p><b>AND</b></p>	<p>Fever <b><u>OR</u></b> mild to moderate respiratory illness</p>
<p><b><u>CATEGORY 5</u></b> Critical infrastructure employees (see list of <a href="#">essential services</a>)</p>	<p><b>AND</b></p>	<p>Fever <b><u>OR</u></b> signs/symptoms of a lower respiratory illness (e.g., cough, shortness of breath, pneumonia)</p>
<p><b><u>CATEGORY 6</u></b> Other patients for whom knowledge of COVID-19 infection would be clinically or epidemiologically useful.</p>	<p><b>AND</b></p>	<p>Fever <b><u>AND</u></b> signs/symptoms of a lower respiratory illness (e.g., cough, shortness of breath, pneumonia)</p>

**PATIENTS IN CATEGORY 7 SHOULD NOT BE PRIORITIZED FOR TESTING AT THIS TIME**

**CATEGORY 7**

Individuals without symptoms

This guidance is not intended to cover every possible situation. To discuss specific scenarios, please call the Massachusetts Department of Public Health at 617-983-6800 available 24/7.