SARS-CoV-2 (COVID-19) Client Communication

ProMedica Pathology Laboratories
A Partnership of ProMedica and Sonic Healthcare

August 6, 2020: NOTE:
This publication is updated as shaded in green for acceptance of various nasal specimens and the new Patient History Form.

April 28, 2020 **NOTE: This publication is updated in the CPT Code section as highlighted in yellow on page 3 of 3.**

ProMedica Pathology Laboratories has updated information for SARS-Cov-2/COVID-19 testing, originally issued in our Client Communication dated March 11, 2020, as detailed below:

- Alignment with updated CDC Guidelines
- Expanded acceptable specimen types
- Updated CPT Codes
- Updated LOINC Codes

Due to strong market demand and limited supply nationwide, priorities will be given to high risk patients in accordance to CDC guidelines and endemic regions and clusters.

Test Information:

Orderable Test Code: **39429**
Test Name: **SARS-COV-2 (COVID-19) BY RT-PCR**

Inactivated Test Code: *39430*
Test Name: *SARS-COV-2 (COVID-19)PCR HIGH RISK*

Ordering Recommendations:

Ordering provider to determine patient risk level based on CDC Guidelines and clinical judgement

- Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested.
- Criteria to Guide Evaluation of PUI (Persons Under Investigation) for COVID-19: The CDC currently states Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Decisions on which patients receive testing should be based on the local epidemiology of COVID-19, as well as the clinical course of illness. Most patients with confirmed COVID-19 have

developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing).

- Clinicians are strongly encouraged to test for other causes of respiratory illness, including infections such as influenza.
- In accordance with public health guidance, Clinicians should prioritize testing to following groups:
    1. Hospitalized patients who have signs and symptoms compatible with COVID-19 in order to inform decisions related to infection control.
    2. Other symptomatic individuals, such as older adults and individuals with chronic medical conditions and/or an immunocompromised state that may put them at higher risk for poor outcomes (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, and chronic kidney disease).
    3. Any person, including healthcare personnel, who within 14 days of symptom onset had close contact with a suspected or laboratory-confirmed COVID-19 patient, or who had a history of travel from affected geographic areas within 14 days of their symptom offset.

Specimen Requirements:

Sample Type:

- Upper Respiratory Tract:

Nasopharyngeal Swab	Nasal Mid-Turbinate Swab	Nasopharyngeal Wash/Aspirate
Oropharyngeal Swab	Nasal Swab	Nasal Wash/Aspirate

- Lower Respiratory Tract:

Bronchoalveolar Lavage	Tracheal Aspirate	Sputum

Container Type:

- Nasopharyngeal, Oropharyngeal, Nasal Mid-Turbinate or Nasal Swabs: Viral or Universal Transport Media (VM, M4RT, M4, UTM)
- Nasopharyngeal Wash/Aspirate or Nasal Wash/Aspirate: Sterile Cup
- Bronchoalveolar Lavage/ Tracheal Aspirate: Sterile Cup
- Sputum: Sterile Cup

Handling Instructions:

Nasopharyngeal Swab:
Insert a swab into the nostril parallel to the palate. Leave the swab in place for a few seconds to absorb secretions. Place swab immediately into sterile tube containing 2- 3 mL of viral transport media.

Oropharyngeal Swab (e.g., throat swab):
Swab the posterior pharynx, avoiding the tongue. Place swab immediately into sterile tube containing 2-3 mL of viral transport media.

Bronchoalveolar Lavage, Tracheal Aspirate:
Collect 2-3 mL into a sterile, leak-proof, screw-cap sputum collection cup or sterile dry container. Refrigerate specimen at 2-8°C and ship overnight on ice pack.

Sputum:
Have the patient rinse the mouth with water and then expectorate deep cough sputum directly into a sterile, leak-proof, screw-cap sputum collection cup or sterile dry container. Refrigerate specimen at 2-8°C and ship overnight on ice pack. NOTE: Induction of sputum is not recommended.

Transport:	Critical Refrigerated SHIP IN INDIVIDUALLY SEALED BAGS Send with Requisition & CDC COVID-19 PUI Case Form or COVID-19 Patient History Form.
Unsuitable Specimens:	Ambient specimens. Swabs not in viral transport media. Calcium alginate swabs. Swabs with wooden shafts.

Testing Capacity:

- Testing is performed seven days a week.
- Expected TAT is 2-4 days. TAT may vary with changes in capacity and market demands.

CPT Codes:

87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique
U0002	2019-ncov coronavirus, sars-cov-2/2019-n-cov (covid-19), any technique, multiple types or subtypes (includes all targets), non-CDC **(in use 03/11 - 04/13/2020)**

U0003	2019-ncov coronavirus, sars-cov-2/2019-ncov (covid-19), any technique, multiple types or subtypes (includes all targets), non-CDC **(effective 04/14/2020)**

Result Codes and LOINC Codes:

Result Code: 394298 - SARS-CoV-2 PCR Result LOINC 94500-6
Result Code: 394297 - SOURCE LOINC 31208-2

If you have any questions, please contact our Customer Service Department at 419-291-4414 / 833-960-0241 or your Account Executive. Thank you.

References: https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-criteria.html