Emergency Department Testing for COVID-19

Testing strategies impact overall hospital operations, including the need for cohorting and amount of PPE used. These guidelines help balance the safety and efficacy of testing at your facility.

WHERE?

**In emergency department (ED):** Symptomatic patients needing emergency care or being admitted through the ED

**In testing clinic:** Pre-procedural patients and non-emergency symptomatic patients

WHO?

- Anyone who is symptomatic, including health care personnel
- Inpatients and admissions
- Pre-procedural patients, especially those having anesthesia services and procedures involving airways
- Special circumstances such as outbreak investigation or communal living situations

Limit patient refusal by providing resources that explain the tests and guide expectations.
**WHY?**

If symptomatic,
- Risk stratification, infection control, and to guide patient management
- Public health mitigation to isolate true cases, trace contacts, and collect accurate data

If asymptomatic,
- Risk mitigation for pre-procedural patients and those with high-risk comorbidities
- Understand community prevalence and public health impact
- Infection control while admitted for non-COVID-19 reasons

**WHAT?**

Regular, batched testing (takes 6-8 hours)
- Appropriate for admissions, discharges, pre-procedural patients, and health care personnel

Rapid testing (takes 1-3 hours)
- Prioritize based on availability
  - If limited, prioritize patients:
    - Requiring aerosol-generating procedures
    - Whose disposition depends on a result (e.g., communal living patients) or who present a risk to their households
    - Requiring urgent surgery or organ transplantation

**WHEN?**

- As soon as a patient is considered for admission or a procedure
- Within 72 hours (or 3 days) of an elective procedure with self-isolation between testing and procedure
- Immediately before organ transplantation

**DECISION SUPPORT**

- Use an electronic health record (EHR) as support for clinical decisions and to assign rapid tests when available.
- If available, use a risk calculator to assess whether patients can be cleared after a single test.