

General FAQs: COVID-19 Screening for BCH-SF Patients

How do you define asymptomatic patients for the purposes of COVID-19 testing?

- Does not have COVID-19 symptoms AND
- Does not have a COVID-19 Recovered banner on Apex (i.e., is not within the 90 days from infection onset)
- Note: Asymptomatic COVID-19 exposed patients should be tested for COVID-19 on the schedules recommended in this [guidance](#)

Which asymptomatic patients require COVID-19 testing and at what cadence?

- Asymptomatic patients being admitted to UCSF Health.
 - Patients who undergo surgery prior to admission should be tested at the time of admission to the hospital.
 - Exceptions:
 - Testing can be deferred for patients needing emergent/urgent procedures.
 - Patients with:
 - Active COVID-19 infection (have a 'COVID confirmed' banner)
 - A 'COVID recovered' banner
 - Transfer patients must have had a test on the day of transfer. If no test was performed or the test was done prior to the day of transfer, the test should be done on arrival to UCSF Health.
 - Baby ≤ 28 weeks gestational age in the first week of life
 - BCH-SF born newborns born to an *asymptomatic* mother with:
 - i) a negative/pending COVID-19 test from admission
 - ii) if admitted to antepartum at UCSF and has a negative/pending COVID-19 test within the 7 days prior to birth
 - iii) a positive COVID-19 test in the last 90 days and has finished isolation (i.e. mother is 'COVID recovered')
- Inpatients should have repeat COVID-19 testing on hospital day #3
 - Exceptions:
 - Day #3 is the day of discharge
 - Active COVID-19 infection (have 'COVID confirmed' flag)
 - A 'COVID recovered' banner
 - Patient is ≤ 28 weeks gestational age and in the first week of life
 - For neuroblastoma patient undergoing MIBG if they are still radioactive
- **Effective June 1, 2023 weekly asymptomatic inpatient COVID-19 screening is no longer required.**
- Some inpatients may also require testing before discharge to congregate living situations.

Note: Inpatients who develops signs/symptoms concerning for COVID-19 should be placed into Novel Respiratory Isolation and tested as a symptomatic patient.

Population	Admission	Hospital Day #3	Weekly
Asymptomatic and not COVID-19 exposed	✓ Exceptions listed above	✓ Exceptions listed above	No longer required
Asymptomatic and COVID-19 exposed	✓	Refer here for testing schedule.	
'COVID confirmed' (with active COVID-19 infection)	No repeat test recommended, unless using a test based strategy to end isolation including as required for select severely immunocompromised patients		
'COVID recovered' banner in place (≤90 days since infection)	If asymptomatic, no repeat test recommended. For more information, refer to this guidance .		

What type of COVID-19 testing is acceptable?

The following **healthcare worker** collected tests: polymerase chain reaction (PCR) or other nucleic acid amplification test (NAAT), including the Abbott ID Now NAAT test.

Refer to this [guidance](#) for specific test requirements for patients being admitted to protective environment rooms including in the BMT unit and PICU rooms 1, 2, and 15. A COVID-19 antigen test is not accepted for admission screening. If the type of test is unclear and you are unable to obtain the information, you should repeat the testing at UCSF.

What type of Isolation and PPE are needed?

COVID-19 signs/ symptoms/suspicion including exposure?	Signage*	COVID-19 test collection	PPE		Responsible for discontinuing isolation
			No AGP	AGP**	
Yes (on admission or anytime during admission)	Novel Respiratory isolation*	N95/eye protection (or PAPR) + gown/gloves	N95/eye protection (or PAPR) + gown/gloves		Ordering provider
No; initial admission COVID test	Droplet isolation*		Medical mask/eye protection required. Additional PPE may be worn and/or required*		Bedside nurse
No; hospital day #3	Additional signage may be required*		Medical mask required. Additional PPE may be worn and/or required*		Not applicable

*Additional signage and PPE may be required as per transmission-based precautions for other conditions/symptoms and as per standard precautions. Even if not required, N95 and eye protection can be considered as per this [guidance](#).

**AGP = aerosol-generating procedure. For a list of AGPs refer to this [guidance](#).

What if my asymptomatic patient had a test before admission?

Scenario assuming patient remains asymptomatic	Do they need a COVID-19 test?	Isolation pending COVID-19 test result
No test or test within 1-4 days prior to admission	Yes	Droplet precautions
Pending or resulted COVID test at UCSF from day of admission*	No additional test	
'COVID recovered' banner in place (≤90 days since infection)	No (unless symptomatic)	See guidance here

* Refer to this [guidance](#) for specific test requirements for patients being admitted to protective environment rooms including in the BMT unit and PICU rooms 1, 2, and 15.

What if my patient does not tolerate or cannot have a nasal swab or is at risk for epistaxis?

If the patient has a history of recent epistaxis within the last 7 days or are at risk of severe epistaxis due to platelets <50K, severe mucositis, anticoagulation therapy, certain ENT issues including due to recent surgery, or other reasons, the provider can select the best site to swab including:

Anterior nares +/- OP, NP wash (5mL in a sterile urine cup), or OP only. An OP swab alone has lower sensitivity than a combined OP/nasal sampling swab. For intubated patients, tracheal aspirate samples also have excellent sensitivity.

What if the patient/caretaker refuses the admission COVID-19 test?

Review the rationale for COVID-19 test screening and that it is the UCSF standard of care during the pandemic. If the COVID-19 test is refused, keep the patient on 'Droplet Isolation' until the test is performed and resulted.

What if the patient/caretaker refuses the hospital day #3 COVID-19 test?

Review the rationale for COVID-19 test screening and that it is the UCSF standard of care during the pandemic.

If the COVID-19 test is still refused, consider alternate site for test collection like an OP swab (though the sensitivity is lower) or tracheal aspirate for intubated patients. Assuming the patient is asymptomatic from a COVID-19 perspective and they had a negative COVID admission test, continue standard precautions and those needed for other conditions as per transmission-based precautions.

What if my patient has a pending COVID-19 test but needs an emergency procedure?

Pending COVID-19 tests should not delay needed care. Urgent or emergent procedures should proceed even if the COVID-19 test is pending or has not been collected.

What are the rooming recommendations for patients pending asymptomatic COVID screening results?

A private room is preferred for asymptomatic patients pending their asymptomatic COVID screening as per this [guidance](#). If a private room is not available, asymptomatic patients can be placed in a double occupancy room; for the ICN, the mother of the patient should also be asymptomatic to be eligible for placement in a double occupancy room.