

## Priority levels for CoV2 testing

The priority levels for CoV2 testing listed below are intended to best identify patients that need priority (most rapid) testing. Please be judicious in selection of patients for these categories, because if every sample is designated “STAT”, then NONE of them will be STAT.

To continue to optimize testing, please limit pre-procedure testing to those procedures that are high risk for generation of aerosolized respiratory secretions.

### Priority 1 (Red category)

1. Patients being admitted to hospital with suspicion for CoV2 infection *if IDNow not done or not available*.
2. Patients being discharged or transferred to other hospitals or long-term care facilities requiring testing
3. Pregnant women in active labor, who are PUI, symptomatic, pre-term or have preeclampsia
4. Patients undergoing procedures at high risk for aerosolized respiratory secretions such as bronchoscopies or lung procedures needing results within 24 hours
5. Symptomatic healthcare workers or first responders (per Employee Health)
6. Neonate of a CoV2 positive mother
7. Urgent oncology or transplant patients needing to initiate therapy within 24 hours

### Priority 2 (Yellow category)

1. Patients requiring chemotherapy or transplant in less than 48 hours
2. High risk procedures for aerosolized respiratory secretions in less than 48 hours
3. Symptomatic long term care residents
4. Re-collected specimens due to inability to provide result on original collection
5. Outpatients being considered for outpatient monoclonal antibody therapy
6. Inpatients not previously tested

### Priority 3 (Green category)

1. High risk procedures for aerosolized respiratory secretions in less than 72 hours
2. Scheduled C-sections
3. Oncology or transplant patients needing therapy being initiated in more than 48 hours
4. Non-symptomatic exposed healthcare workers and first responders (per Employee Health)

### Priority 4

1. Nursing home patient and employee screening
2. Symptomatic or patients suspected of exposure, not being admitted
3. Population screening