

Primary Care Follow-Up for COVID-19 Testing- November 16, 2020 1600

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What to do if your patient was tested for COVID

If the test was NEGATIVE:

- The Spectrum Health lab PCR test is a sensitive test for excluding COVID. However, because laboratory testing is imperfect, maintain a high index of suspicion if the patient develops new or worsening symptoms.
- Frequently reported symptoms of patients admitted to the hospital:
 - o Fever
 - o Dry cough
 - o Myalgia or fatigue
 - o Shortness of breath
 - o GI symptoms such as diarrhea and nausea (caution: we do not know the significance of isolated GI symptoms and likelihood of having COVID or need for hospitalization).
- Less common symptoms reported include:
 - o Sore throat
 - o Headache
 - o Productive cough or hemoptysis
 - o Lower respiratory signs and symptoms such as hypoxia and wheezing.
- If you think that despite a negative test, your patient might have COVID, we recommend advising them to self-isolate for 10 days or 24 hours after resolution of fever and improvement in symptoms, whichever is longer.

If the test was POSITIVE:

- The Spectrum Health lab PCR test has is highly specific for COVID.
- If your patient did not meet criteria for admission:
 - o If your patient has a comorbid condition (see next page), please virtually see your patient within 2-3 days of their SH Now or ED visit.
 - o Suggest the patient to purchase pulse oximeter to monitor at home
 - o Watch for worsening or new onset symptoms noted above in the NEGATIVE section
- Outpatient care:
 - o Supportive care and symptomatic management as with other viral respiratory infections
 - o Antipyretics – Currently, there is no compelling clinical data to recommend against NSAID use.
 - o Antivirals and other medications (e.g. hydroxychloroquine) – currently there is not a role for these medications in the outpatient setting.
 - o No follow up lab work is indicated.
- When to direct patients back to the ED: Worsening shortness of breath, inability to stay hydrated, hypoxia (<92%), altered mental status

- Positive patients should self-isolate for 10 days or 24 hours after resolution of fever and improvement in symptoms, whichever is longer. Positive patients who are asymptomatic should self-isolate for 10 days from the date the test was obtained. Patients who are severely immunosuppressed need to self-isolate for 20 days.
- If you have additional questions, please visit the COVID-19 InSite page for information or PerfectServe Pediatric Infectious Diseases for patients <18 or Adult Infectious Diseases for patients ≥ 18

Comorbid conditions with high risk for severe infection with suggested criteria

Per CDC: <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>

- [Severely immunosuppressed](#)
- ≥ 65 YO
- Obesity (BMI 30 – 40 kg/m²) and severe obesity (BMI ≥ 40 kg/m²)
- Uncontrolled asthma
- Uncontrolled chronic lung disease
- Chronic liver disease or cirrhosis
- Renal failure on dialysis
- Uncontrolled diabetes: HbA1C ≥ 8 or with end organ damage (Stage 3 renal disease, microvascular disease, retinopathy, peripheral vascular disease, peripheral neuropathy)
- Uncontrolled hypertension: Systolic BP ≥ 150 or diastolic BP ≥ 100
- Cardiovascular disease with reduced functional capacity
 - Congestive heart failure (EF $\leq 50\%$)
 - Symptomatic peripheral vascular disease
 - Angina
- Sick cell disease
- Pregnancy – there is an increased risk for severe illness. There might be an increased risk of adverse pregnancy outcomes, such as preterm birth.