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State Health Advisory
Assessment of Patients for Coronavirus Disease 2019
(COVID-19)
Coronavirus Disease 2019 Advisory #5
Wyoming Department of Health
March 4, 2020

The Wyoming Public Health Laboratory (WPHL) will be able to provide testing for Coronavirus Disease 2019 (COVID-19) beginning Thursday, March 5, 2020. Testing capacity is limited. This Health Advisory contains updated recommendations for assessing and testing patients with potential COVID-19 and instructions for submitting laboratory samples. It also contains guidance for outpatient clinics seeing patients with potential COVID-19.

Testing Recommendations

Based on the current epidemiology of the outbreak, testing will be prioritized for patients with increased risk of COVID-19 due to international travel or contact with a laboratory-confirmed COVID-19 patient and for patients hospitalized with severe illness. Because there are currently no confirmed cases of COVID-19 in Wyoming or surrounding states, persons with specific travel or exposure histories are at higher risk than the general public for having COVID-19. At this time only international travel, not domestic travel, is considered to be a risk for exposure to COVID-19.

Our testing priority levels can be found on the following page. **All testing needs to be approved by the Wyoming Department of Health (WDH).** Clinicians should call the WDH at 1-888-996-9104 to request COVID-19 testing.

Priority	Clinical Features		Epidemiologic Risk
1	Fever ¹ or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	AND	Any person, including health care workers ² , who has had close contact ³ with a laboratory-confirmed ⁴ COVID-19 patient within 14 days of symptom onset
2	Hospitalized patients with fever and signs/symptoms of lower respiratory illness and negative testing for influenza (and negative testing on a respiratory viral panel, if available)	AND	A history of travel from affected geographic areas ⁵ (countries with a level 3 or level 2 travel health notice) within 14 days of symptom onset
3	Hospitalized patients with fever and severe acute respiratory illness (e.g. pneumonia, ARDS) without alternative explanatory diagnosis (such as more likely infectious or cardiac etiologies) and negative testing for influenza (and negative testing on a respiratory virus panel, if available)	AND	No source of exposure has been identified
OR-----	-----	-----	-----
	Patients with fever and signs/symptoms of lower respiratory illness and negative testing for influenza (and negative testing on a respiratory virus panel, if available)	AND	A history of travel from affected geographic areas ⁵ (countries with a level 3 or level 2 travel health notice) within 14 days of symptom onset

1. Fever may be subjective or confirmed.

2. For healthcare personnel, testing may be considered if there has been exposure to a person with suspected COVID-19 without laboratory confirmation.

3. Close contact is defined as:

a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case
 – or –

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on). If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are met.

4. Documentation of laboratory confirmation of COVID-19 may not be possible for travelers or persons caring for patients in other countries.

5. Countries with a current level 3 or level 2 travel health notice include China, South Korea, Italy, Iran, and Japan. COVID-19-related travel notices can be found here:

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

Based on the epidemiology of the outbreak, WDH considers patients who do not fall into one of the above priority levels to be at low risk for COVID-19 and does not recommend testing for these patients. If providers wish to test patients who do not fall into one of these priority levels, they should contact WDH by calling 1-888-996-9104. We cannot guarantee turnaround times for testing among these patients because of the need to prioritize patients who are at higher risk.

All outpatients who are tested for COVID-19 are required to self-isolate in their homes until negative test results are obtained. Guidance for home isolation for persons with suspected or confirmed COVID-19 can be found here: [Preventing 2019-nCoV from Spreading to Others](#)

Testing Procedures

Clinicians will be asked to submit information about the patient being tested using this link: <https://redcap.health.wyo.gov/surveys/?s=LER783MFRM>. This is a secure, HIPAA-compliant system. **Once filled, the information should be printed out and included with the shipped samples. We will provide a WY PUI Number for inclusion on form.**

Testing for hospitalized patients should be performed in an airborne infection isolation room by health care personnel adhering to standard, contact, and airborne precautions, including the use of eye protection.

Patients in outpatient clinics who are medically stable to return home should not be referred to an emergency department for testing. Patients should be isolated in an examination room with the door closed. Ideally, the patient should not be placed in any room where room exhaust is recirculated within the building without HEPA filtration. Health care providers obtaining samples should wear gown, gloves, N95 respirator or equivalent, and eye protection (e.g. face mask or goggles) when collecting samples.

Clinicians should collect both a nasopharyngeal (NP) swab and an oropharyngeal (OP) swab. Use only synthetic fiber swabs with plastic shafts. Do not use calcium alginate swabs or swabs with wooden shafts. Place swabs immediately into sterile tubes containing 2-3 mL of viral transport media. NP and OP specimens should be kept in separate vials. The specimens should be refrigerated at 2-8°C and shipped to the WPHL with sufficient ice packs to keep the specimen cold until it arrives.

Specimen tubes should be labeled with the patient name, date of birth, sample type, date of sample collection, and WY PUI number. Patient name and date of birth need to match exactly the patient name and date of birth on the form submitted to WDH to avoid delays.

Specimens should be shipped overnight to the WPHL at 208 S. College Dr., Cheyenne, WY, 82007. The WPHL provides Federal Express labels for shipments; labels can be requested at this link: <https://health.wyo.gov/publichealth/lab/>. In areas where Federal Express is not an option, UPS shipping may be available.

The WPHL does not provide swabs or viral transport media. The WPHL will provide shipping containers, FedEx Lab Paks, and ice packs that can be used for shipping. To request these, please mark “Others”, specify what you need sent and follow the submission instructions under:

https://health.wyo.gov/wp-content/uploads/2019/03/Supply_Order_Form_Fillable-Version-1.8-.pdf

Interim Healthcare Infection Prevention and Control Recommendations

Hospitals

Clinicians should notify infection control personnel immediately if they identify a patient with potential COVID-19. Patients with suspected COVID-19 infection should be evaluated and cared for in an airborne infection isolation room. Healthcare personnel caring for the patient should follow standard, contact, and airborne precautions with eye protection. Personal protective equipment should include gloves, gowns, respiratory protection (N95 respirator or equivalent), and eye protection (goggles or face shield). Hospitals should be prepared to identify, triage, and implement appropriate infection control measures for patients with potential or confirmed COVID-19.

Clinics

WDH recognizes that most clinics do not have airborne isolation capabilities. WDH encourages clinics to develop phone triage protocols to identify patients with fever and respiratory infection symptoms and relevant travel or exposure history. If patients with fever and respiratory symptoms and relevant travel or exposure history arrive at the clinic, they should be isolated in an examination room with the door closed. Ideally, the patient should not be placed in any room where room exhaust is recirculated within the building without HEPA filtration. Health care providers entering the room should wear gown, gloves, N95 respirator or equivalent, and eye protection (e.g. face mask or goggles). **Patients who do not require emergency care or hospitalization should not be sent to Emergency Departments.**

More detailed recommendations for Infection Prevention and Control can be found here:

[Infection Control: COVID-19](#)

Preparedness checklists for healthcare professionals and hospitals can be found here: [Resources for Healthcare Professionals with COVID-19 Patients](#)

Risk Assessment and Monitoring

Wyoming continues to monitor returning travelers from China. The Wyoming Department of Health is notified of travelers from China and takes the following actions:

1. Contacts the traveler upon his/her arrival in Wyoming and completes a risk assessment
2. Categorizes the traveler's risk of exposure to COVID-19
3. Based on the traveler's risk of exposure to COVID-19, recommends procedures for monitoring the traveler's health and limitations on public activities
4. Communicates with local public health officials about the traveler and our recommendations

5. Instructs the traveler to notify public health officials if they develop symptoms. Public health officials will then coordinate access to medical care with the traveler and the receiving medical facility

WDH is not notified of travelers returning from countries other than China. Returning travelers from countries with level 3 travel health notices (currently China, South Korea, Iran, and Italy) are being instructed upon arrival at U.S. airports to self-quarantine at home for 14 days after their departure.

If you have additional questions, please contact Dr. Alexia Harrist at 307-777-7716 or alexia.harrist1@wyo.gov.

Information about COVID-19, including links to clinical guidance, can be found at the following websites:

WDH:

<https://health.wyo.gov/publichealth/infectious-disease-epidemiology-unit/disease/novel-coronavirus/>

CDC:

<https://www.cdc.gov/coronavirus/2019-nCoV/>.