

CRITERIA GOVERNING USE OF POC COVID TESTING

Everyone profits from the judicious use of the POC tests and needs to be circumspect with their use to avoid running out of tests

Appropriate Criteria for use of POC testing:

- A person under investigation (PUI) for COVID infection that is getting admitted
- An ED resuscitation/trauma that doesn't get admitted due to transfer or death but had potential for HCP exposure of a significant nature
 - Healthcare facility workers, workers in congregate living settings, and first responders with symptoms
 - Residents in long-term care facilities or other congregate living settings, including prisons and shelters, with symptoms
- A HCP/essential personnel with symptoms and need for direct patient contact
- Patients (with or without symptoms) proceeding to emergency surgery or operative obstetrics with associated HCP risk of exposure

Additional criteria when the POC test might be considered:

- A scheduled surgery, particularly something nonelective, in which a test result has not returned due to no fault of the provider or patient
 - An exposed HCP or first responder from the county who has atypical symptoms or is asymptomatic >3-7 days from a significant exposure with a need for direct patient care, and when the results of test will change their management (ie essential personnel who need to continue to work rather than quarantine)
- Patients from Delta County who need a negative test to take advantage of a nursing home bed
- a Delta County resident needing a semi urgent/nonelective procedure somewhere other than DCMH who needs a test to get their procedure done

Examples when the POC test use is NOT appropriate:

- Travel clearance
- Routine/elective OR case without appropriate planning time or effort to allow state lab preop testing
- An exposed first responder or HCP <3 days from exposure
- An asymptomatic or mildly symptomatic patient with or without history of exposure in the ED who is not getting admitted
- Out of county public health contact tracing issues
- A repeat test <72 hours from a prior negative test for purposes of admission, especially when there is a good alternative explanation of symptoms.