

Change in COVID-19 Testing Recommendations Due to Predominance of Omicron Variant In Nebraska

Jan. 5, 2022

S: There is a need to change COVID-19 testing guidance due to the predominance of the Omicron variant in our area.

B: Due to the phenomena of prolonged low-level viral shedding prior guidance recommended no repeat testing for 90 days after a patient tested positive for COVID-19. Omicron infection can occur in patients previously infected with SARS-CoV-2 including recent Delta virus infection. Thus the 90-day deferral of testing may miss active breakthrough Omicron cases as we transition from Delta to Omicron.

A: Given the above, as of Jan. 7, 2022, all COVID-19 cases in our area will be presumed to be Omicron based on viral sequencing reporting and trends. This means that any patient with a COVID-19 diagnosis prior to Jan. 7, 2022 (based upon date of test, not of symptom onset), will require hospital admission testing and pre-procedure testing (ambulatory and inpatient), even if they have a documented COVID19 infection in the last 90-days. There are no changes in the procedures requiring testing.

As repeat infection with Omicron in those who were already infected with Omicron is not a significant concern at this juncture, any COVID-19 infections with a first positive test on or after Jan. 7, 2022 **DO NOT** require repeat COVID-19 testing for 90 days (as per past protocols).

For COVID-19 positive persons requiring operative management within 21 days of infection diagnosis, or those without a test due to the emergent nature of the procedure, COVID level PPE should be used. Exit from inpatient isolation can occur before 21 days with two negative COVID tests 24 hours apart, or if cleared by the COVID ID physician. Outpatient duration of isolation is addressed in separate guidance.

R: Pre-procedure testing is recommended for appropriate procedures scheduled for Jan. 10, 2022 or later. Please arrange testing as soon as possible. The test requirement, a PCR-based test, has not changed.

These changes are to ensure we capture possible breakthrough cases of Omicron and continue to provide the safest environment possible for patients and staff. Implementation of the new guidance for admission and pre-procedure testing for anyone > 21 days from a COVID-19 diagnosis will start Jan. 7, 2022. These policies will be reviewed for adjustment as additional data are available.

Additional FAQs related to Omicron:

1) Hospital and procedural isolation **remains 21 days** from a positive COVID-19 test, regardless of whether or not a patient has exited home isolation based on CDC or NM guidance. This is due to the high risk setting and potential aerosol-generating procedures. As noted above, earlier exits from this isolation may occur with two negative tests 24 apart or in consultation with COVID ID.

2) The ambulatory clinic duration of isolation policy will not change; with recommendations to defer appointments (when practical) after a COVID-19 infection for 21 days for the immunocompromised, or 10 days with at least three days being fever free (and clinically improved) for the immunocompetent. When it is in the best interest of the patient to have a clinical appointment prior to this, they can be seen under COVID precaution arrangements. This deviation from CDC guidance is due to the high-risk patient populations which may be encountered and closer interactions with clinicians than typically occur in the community.

3) These policies are in place for all patients, regardless of vaccination or booster status.

4) Patients admitted and diagnosed with COVID-19 prior to Jan. 7, 2022, will require pre-procedure testing after clearing isolation at 21 days if they remain in the hospital. That testing must be within 72 hours of the procedure as per pre-procedural testing guidance. **Positive test results in this patient population do not necessarily indicate a need to transfer back to a COVID unit (eg. may represent prolonged low level viral shedding) and should be discussed with COVID ID.**

5) Due to lack of ability to screen visitors for immune status and difficulty enforcing mask compliance, visitors within 21 days of a COVID-19 infection are discouraged from visiting unless specific exemptions are granted.

6) If there is any concern, clinically or with possible exposure, we strongly encourage repeat testing for COVID-19. For inpatients, if there is not high clinical suspicion for COVID-19, symptomatic tests, preferably a respiratory pathogen panel or rapid test to expedite results, can be obtained with COVID precautions but NOT requiring transfer to the COVID unit.

7) COVID-19 vaccination and boosting is strongly recommended for all patients and staff who do not have a medical contraindication. If you have not been vaccinated, or have not received your booster but are eligible, we strongly recommend you proceed with this as soon as possible given the prevalence and highly transmissible nature of Omicron.