sanitation practices needs to be given due emphasis

(249-252). Future explorative research needs to be

conducted with regard to the fecal-oral transmission

of SARS-CoV-2, along with focusing on

environmental investigations to find out if this virus

could stay viable in situations and atmospheres

facilitating such potent routes of transmission. The

correlation of fecal concentrations of viral RNA with

disease severity needs to be determined, along with

assessing the gastrointestinal symptoms and the

possibility of fecal SARS-CoV-2 RNA detection

during the COVID-19 incubation period or

convalescence phases of the disease (249-252).

The lower respiratory tract sampling techniques,

like bronchoalveolar lavage fluid aspirate, are

considered the ideal clinical materials, rather than

the throat swab, due to their higher positive rate on

the nucleic acid test (148). The diagnosis of COVID-

19 can be made by using upper-respiratory-tract

specimens collected using nasopharyngeal and

oropharyngeal swabs. However, these techniques are

associated with unnecessary risks to health care

workers due to close contact with patients (152).

Similarly, a single patient with a high viral load was

reported to contaminate an entire endoscopy room by

shedding the virus, which may remain viable for at