COMMONWEALTH of VIRGINIA

Department of Health

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COVID-19 Update for Virginia

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Dear Colleague:

As the COVID-19 pandemic continues, please visit the Virginia Department of Health (VDH) website for current guidance and epidemiologic data. I want to highlight the following updates:

New VDH Portal for Reporting Point-of-Care COVID-19 Lab Results

VDH has developed a reporting portal for point-of-care (POC) COVID-19 test results. This portal will assist testing sites in meeting the requirement of the CARES Act to report every diagnostic and screening test performed to detect SARS-CoV-2 or to diagnose a possible case of COVID-19 (e.g., molecular, antigen, antibody). This portal allows the rapid entry of person-level test results for positive and negative results, and provides the ability to enter aggregate negative results as necessary for high-volume testing sites. All COVID-19 test results should be reported to VDH within 24-hours.

Sites conducting POC testing will need to first register to utilize the reporting portal. During this one-time registration, facilities will provide site information and select the types of testing equipment utilized. When reporting results, sites will need to provide individual patient information, including demographic information, and the test result; additionally, specific questions requested by the US Department of Health and Human Services (HHS) can be answered if the information is known.

Currently, the VDH POC Reporting Portal is configured to accept results for the following tests:

- Abbott - BinaxNOW COVID-19 Ag Card
- Abbott - ID NOW
- Becton, Dickinson and Company (BD) - Veritor System for Rapid Detection of SARS-CoV-2
- Cepheid - Xpert Xpress SARS-CoV-2
- Cue Health - CueTM COVID-19 Test
- LumiraDx SARS-CoV-2 Ag Test
- Quidel - Sofia 2 SARS Antigen FIA

Sites should go here to register for the POC Reporting Portal. Sites that have been reporting positive POC results through the Confidential Morbidity Portal will not need to do so any longer once they begin reporting through the POC Reporting Portal. For other reports not involving POC testing, healthcare providers should continue to report patients with suspected or confirmed COVID-19 through the Confidential Morbidity Portal.

CDC Interim Guidance for Rapid Antigen Testing for SARS-CoV-2

Antigen tests are commonly used in the diagnosis of respiratory infections. To date, the FDA has granted emergency use authorization (EUA) for four antigen tests that can identify SARS-CoV-2. Antigen tests are relatively inexpensive and can be used at the point-of-care. The currently authorized devices return results in approximately 15 minutes. Antigen tests for SARS-CoV-2 are generally less sensitive than molecular tests that detect nucleic acid and RT-PCR remains the "gold standard" for detection of SARS-CoV-2. It may be necessary to confirm a negative rapid antigen test result with a molecular test, especially if clinical suspicion is high. Rapid antigen tests may be helpful in the following scenarios:

- As a diagnostic test to identify someone in the early stages of infection when viral load is generally highest or to test someone with known exposure to a person with confirmed COVID-19.
- As a screening test for individuals in high-risk congregate settings in which repeat testing could quickly identify persons with SARS-CoV-2 infection to inform infection prevention and control measures.
- Specific guidance exists for using point-of-care antigen tests in nursing homes.

VDH Updated Guidance for COVID-19 Testing

VDH released updated guidance for COVID-19 testing on September 14, 2020. The guidance provides recommendations on testing prioritization through public health and through private and commercial laboratories. Public health molecular testing continues to be prioritized for outbreak investigations, public health surveillance, community testing events organized by the local health department, testing for un- or under-insured persons with COVID-19 symptoms, and other special situations approved by the local health department. The use of private/commercial laboratories for testing should be prioritized for other scenarios.

Public Health Prioritization of Point Prevalence Surveys

To meet the demand for conducting point prevalence surveys (PPS) in high-risk settings while recognizing limitations in testing capacity, VDH is prioritizing PPS by setting with baseline PPS prioritized in nursing homes and assisted living facilities, and PPS in response to outbreaks in congregate settings (including correctional facilities) and critical infrastructure workplaces. If an outbreak is confirmed but the congregate setting does not meet priority criteria for public health PPS, the facility could perform a PPS using a private lab. For a list of private labs, please visit here. Decisions to pursue a public health supported PPS should be made in consultation with the local health department (LHD). The congregate setting will need to be heavily involved in the PPS process even if the LHD is collaborating.

VDH Updated Healthcare Provider Algorithms for Molecular and Antigen Testing

VDH updated the algorithm for COVID-19 molecular testing and added an algorithm for COVID-19 antigen testing to assist healthcare personnel navigate testing options, considerations, and what recommendations to provide based on the results.

VDH Algorithm for Evaluating a Child with COVID-19 Symptoms or Exposure

VDH released a new algorithm to assist parents and guardians, schools and childcare facilities, and healthcare providers for when a child should be excluded from the facility, when care and further evaluation for COVID-19 should be pursued, and when the child can return to the school or childcare facility. A revised version is under development.

Thank you for all your continued efforts to protect Virginians from COVID-19. Please continue to contact your local health department if you have questions about COVID-19.

Sincerely,

M. Norman Oliver, MD, MA
State Health Commissioner