COVID-19 testing is critical in order to identify cases and prevent further spread through case investigation and contact tracing. Health care providers are asked to have a high suspicion for COVID-19 and test accordingly.

Symptomatic Patients
Clinicians should test any patient with ONE of the following signs/symptoms with new or worsening onset:

- cough
- shortness of breath
- difficulty breathing
- fever (measured or subjective)
- runny nose/congestion
- sore throat
- chills
- muscle aches
- fatigue
- headache
- loss of taste
- loss of smell

Nausea, vomiting and diarrhea have also been identified as symptoms of COVID-19. Clinicians are encouraged to consider testing for other causes of respiratory illness, for example influenza, in addition to testing for COVID-19 depending on patient age, season, or clinical setting; detection of one respiratory pathogen (e.g., influenza) does not exclude the potential for co-infection with COVID-19.
Asymptomatic Patients Who are Close Contacts
Clinicians should test any patient identified by public health to be a close contact to a confirmed case of COVID-19. **Testing should occur ideally 7 to 10 days after last exposure.** If continued exposure or part of an outbreak (i.e., multiple cases in a workplace), testing may occur at any time. A negative PCR test result does not mean that the person won’t go on to develop COVID-19 in the 14 days after exposure. If exposed, these individuals should be quarantined for 14 days, even with a negative test result.

Pregnant Women and Newborns
Health care providers should test all pregnant women upon delivery for COVID-19. If positive, health care providers should follow CDC guidance for management of newborns. All newborns of COVID-19 positive mothers should be tested. Both symptomatic and asymptomatic newborns born to mothers with confirmed or suspected COVID-19, regardless of mother’s symptoms, should have testing performed at approximately 24 hours of age. If initial test results are negative, or not available, testing should be repeated at 48 hours of age. For asymptomatic neonates expected to be discharged <48 hours of age, a single test can be performed prior to discharge, between 24-48 hours of age.

Other Asymptomatic Patients
Clinicians may consider testing other asymptomatic patients, as needed. Possible reasons for testing include: a family member wishing to visit a long-term care facility, a workplace requiring testing, testing after international travel, testing required for travel to another state, etc.

The NDDoH may work with health care providers to conduct additional surveillance testing to get a better understanding of the level of disease in the community.

Preoperative Testing
Clinicians may also submit specimens to NDDoH Laboratory Services for preoperative testing. Turn-around time for testing is generally 48 hours from specimen receipt. As a reminder, PCR results are for a single point and time, so even if negative, at the time of surgery, if not the same day as specimen collection, the patient may be positive for COVID-19. Providers should continue to implement appropriate infection control measures in surgical settings to prevent COVID-19 transmission.

What type of specimen do I collect for COVID-19 PCR testing?
Collection kits are available for order from the NDDoH Laboratory Services. The type of specimen is dependent on the type of collection kit received.
What forms do I need to submit with the COVID-19 specimen?
Providers must complete a Test Request Form.

Where can I find the courier schedule for transporting specimens?
The courier schedule is available online.

Do patients who are tested for COVID-19 need to be isolated pending results?
All symptomatic patients being tested for COVID-19 will need to be isolated (at home or in a hospital) while awaiting test results. Patients with confirmed COVID-19 should remain under isolation precautions until the risk of secondary transmission to others is thought to be low. Below is information from the CDC regarding discontinuation of isolation:

- **Healthy individuals**
- **Immunocompromised individuals**
- **Health care workers.**
- **Healthcare Settings**

Asymptomatic close contacts to confirmed COVID-19 cases need to remain in quarantine.
Other asymptomatic patients do not have to be isolated awaiting test results.

If I test a close contact to a COVID-19 positive case and they are negative, does the contact still need to be quarantined?
Yes. Close contacts to positive cases who test negative for COVID-19 still need to be quarantined. Results from PCR testing reflect a single point in time and cannot predict whether or not a contact will go on to develop COVID-19. The incubation period for COVID-19 can range from 2 to 14 days.

Do I need to report COVID-19 test results to the NDDoH?
Yes. North Dakota Administrative Rules 33-06-01 requires the reporting of novel severe acute respiratory illness, which includes COVID-19. North Dakota health care providers are required to report all individuals who tested positive or negative for COVID-19 to the NDDoH. This includes all PCR and FDA-approved serology results.