Clinician alert #27 – All clinicians
Effective from 6th June 2020

New information

- GPs can request serology to diagnose past COVID-19 infection if the patient meets the criteria outlined below
- Serology should not be requested for diagnosis of acute infection
- Asymptomatic testing for visa requirements can be approved on a case by case basis
- The requesting clinician must ensure those who are being referred for testing for acute COVID-19 can safely self-isolate

Testing criteria

All people: Consider testing with PCR where:

- Fever (≥37.5°C) OR recent history of fever (e.g. night sweats, chills), without a known source,
- acute respiratory symptoms (e.g. cough, shortness of breath, sore throat).

This is especially important for:
- anyone who lives or works in a high-risk setting (e.g. healthcare, residential facility)
- contacts of a confirmed case or persons who have returned from outside WA in the last 14 days
- anyone admitted to hospital

PCR is the test of choice for any person with acute symptoms of COVID-19. Contact public health on 6373 2222 to discuss PCR testing in a previously cleared COVID-19 case.

Serology testing

Serology has utility for the diagnosis of past COVID-19 infection. Serology DOES NOT have a role in the diagnosis of acute illness. Serology SHOULD NOT be requested if the person has acute symptoms of COVID-19. PCR should be requested in this instance.

If serology is requested, the requesting clinician should provide the date of onset of symptoms to enable accurate interpretation of serology testing.

Serology testing before 2 weeks from the onset of symptoms can result in false negative results.

Serology can be considered for a person who meets the following criteria:

At least 2 weeks have passed since the onset of symptoms (fever (37.5°C) OR history of fever OR acute respiratory symptoms (sore throat/cough/shortness of breath))

AND the patient has one of the following risk factors:
- Identified as a close contact of a confirmed case
- Identified as related to an outbreak setting
- Travel (international and interstate) since 1/1/20
- Travel on a cruise ship since 1/1/20

Refer to ‘Testing for SARS-CoV-2 in Western Australia #6’ for further information.
Isolation following testing

All people tested for suspected acute COVID-19 infection must be advised to self-isolate until they have received their test result. The requesting physician must ensure the person has suitable accommodation to self-isolate. Alternative accommodation can be arranged by calling the 13COVID hotline and selecting 3 then 1.

Carers of a dependent who has been tested are not required to self-isolate whilst awaiting the result on the dependent person.

People who undergo serology testing are not required to self-isolate.

Testing for visa requirements

If a patient requires evidence of a negative COVID-19 test for a visa, the requesting clinician can apply for an approval by emailing PHEOC@health.wa.gov.au with the following information:

- Name, DOB and address of patient
- Evidence of the requirement for a negative COVID-19 test

If approved, the requesting clinician will receive confirmation via email from the Chief Health Officer (CHO)

Testing of returned travellers in quarantine

WA Health has approved testing of asymptomatic returned travellers in quarantine as specified in the Approval to request COVID-19 testing people isolated or quarantined. Specimens should be collected as close to the end of the quarantine period as possible, allowing enough time for results to be received. If a negative test result is received, the returned traveller may finish quarantine after 14-days. If a positive result is received, the returned traveller must self-isolate and will be contacted by public health with further advice. In the Metropolitan area GPs can arrange domiciliary testing by Pathwest.

Testing of asymptomatic patients

Testing asymptomatic patients is permitted in a number of settings with approval for these scenarios found at https://www.wa.gov.au/government/publications/covid-19-testing-directions

Asymptomatic patients who are tested are not required to self-isolate

Asymptomatic testing should not be undertaken for return to work purposes or fit for work purposes unless approved by public health.

Clearance of cases from infection

Refer to the Medical Clearance of a Case factsheet for information about case clearance.

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COMMUNICABLE DISEASE CONTROL DIRECTORATE

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