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Subject to regular update



الحملة الوطنية
لمكافحة
فيروس كورونا
(COVID-19)

COVID-19 Testing Protocols

Suspected Cases

A **suspected case** is a person that fulfill **any** of the following

Clinical criteria

- 1) • Symptoms of Fever or Cough or Shortness of Breath
 • Or Acute respiratory illness with or without fever

AND

Epidemiological criteria

- International Travel within the last 14 days before onset of illness
- Or Close/Casual Contact with a **CONFIRMED** COVID19 case 14 days before onset of illness

OR

Clinical criteria (With or without the above epidemiological criteria)

- 2) • Any Pneumonia requiring admission (especially if ICU admission OR Bilateral radiological infiltrates OR Hypoxic Respiratory failure)
 • Or hospital associated pneumonia
 • Or Any Health care provider with Community acquired Pneumonia

Note: Peak of viral shedding appears 3 to 5 days after the onset of disease. If the nucleic acid test is negative at the beginning, and case is suspected, to test on subsequent days.

Contact Cases

A **contact** is a person that belongs to either of the two defined groups

There are two types of contact cases

1 - Close Contact (High Risk Exposure), any of the following

1. A person living in the same household as a COVID-19 case
2. Had direct physical contact with a COVID-19 case (e.g shaking hands, infectious secretions of a COVID-19 case)
3. Had face-to-face contact with a COVID-19 case within 2 metres and > 15 minutes.
4. Was in a closed environment (e.g. classroom, meeting room, hospital waiting room, etc.) with a COVID-19 case for 15 minutes or more and at a distance of less than 2 metres
5. A healthcare worker (HCW) or other person providing direct care for a COVID-19 case, or laboratory workers handling specimens from a COVID-19 case without recommended PPE or with a possible breach of PPE;
6. A contact in an aircraft sitting within two seats (in any direction) of the COVID-19 case, travel companions or persons providing care, and crew members serving in the section of the aircraft where the index case was seated (if severity of symptoms or movement of the case indicate more extensive exposure, passengers seated in the entire section or all passengers on the aircraft may be considered close contacts).

2 - Casual Contacts (Low Risk Exposure)

Casual contact defined as any of contacts not listed in the close contacts, examples such as:

- Had casual contact with an ambulant COVID-19 case
- Had casual contact with presumptive (not confirmed) COVID-19 case
- Had stayed in an area presumed to have ongoing, community transmission

Community

Suspected Cases

As per COVID-19 case definition

Asymptomatic individuals with history of close contact to confirmed COVID19 case

Symptomatic individuals with travel history or contact to confirmed COVID19 case

Symptomatic individuals living in overcrowded residence (eg: expatriate workers, prisoners)

Symptomatic individuals with comorbidities such as:

- Elderly (age ≥ 65 years)
- Chronic medical conditions (e.g., diabetes, heart disease, chronic lung disease)
- immunocompromised state

Symptomatic individuals working in high risk areas (eg: COVID19 isolation/ quarantine facilities, airport)

Healthcare

Hospitalized Patients

- Any Pneumonia requiring hospitalization (especially if ICU admission OR Bilateral radiological infiltrates OR Hypoxic Respiratory failure)
- Hospital acquired Pneumonia

Healthcare provider & non-HCP working in COVID19 facilities

- Symptomatic with history of travel or caring for suspected COVID-19 cases
- History of an unprotected exposure to a confirmed COVID19 case (even without symptoms)
- Any Health care provider with Community acquired Pneumonia

Inpatient Suspected Case

As per COVID-19 case definition

1. Immediate isolation
2. Collect Nasopharyngeal and Oropharyngeal COVID19 swabs and to public health labs
3. Inform 444
4. If positive, arrange transfer to COVID-19isolation facilities
5. If negative, continue inpatient care

Suspected Cases

A suspected case is a person that fulfill **any** of the following

Clinical criteria

- 1) • Symptoms of Fever or Cough or Shortness of Breath
- Or Acute respiratory illness with or without fever

AND

Epidemiological criteria

- International Travel within the last 14 days before onset of illness
- Or Close and Causal Contact with a CONFIRMED COVID19 case 14 days before onset of illness

OR

Clinical criteria (With or without the above epidemiological criteria)

- 2) • Any Pneumonia requiring admission (especially if ICU admission OR Bilateral radiological infiltrates OR Hypoxic Respiratory failure)
- Or hospital associated pneumonia
- Or Any Health care provider with Community acquired Pneumonia

444 be informed of these cases to coordinate.

The following procedures apply to all HCP and lab personnel caring for positive COVID19 cases

**For Unprotected exposure
(No mask or goggles)**

Symptomatic or Asymptomatic
(Fever, cough or shortness of breath)

1. Isolate and test for COVID-19 and wait for result
2. HCP working in COVID-19 facilities can undergo testing in their facility. Otherwise, can be tested in RAF (if symptomatic) or to schedule with Public health clinics (66399868)
3. Inform war room
4. If positive, admit in isolation facility
5. If negative, home isolation 14 days
6. Exemption from work for 14 days
7. Retest at the end of the isolation period before going back to work

**For Protected exposure
(Atleast mask with goggles)**

Symptomatic
(Fever, cough or shortness of breath)

1. Isolate and test for COVID-19 and wait for result
2. HCP working in COVID-19 facilities can undergo testing in their facility. Otherwise can be tested in RAF (if symptomatic), or to schedule with Public health clinics (66399868)
3. Inform war room
4. If positive, admit in isolation facility
5. If negative, further action to be decided by the facility

Asymptomatic

Routine HCP monitoring

1. Regular COVID-19 screening every 7days
2. Self reporting of symptoms
3. Self reporting of unprotected exposure
4. Daily checking of temperature and assessing symptoms
5. Can continue working regularly

HCP exposed to suspected case in the community

1. Test if develops severe community acquired pneumonia
2. Test if fitting COVID-19 case definition of suspected case or close contact to a confirmed case
3. Inform war room if any HCP is planned for testing

- Daily checking of symptoms and temperature of healthcare providers (HCP) caring for COVID19 positive cases.
- All HCP should report any symptoms or unprotected exposure to confirmed cases of COVID19, to their designated department
- Any unprotected exposure to COVID-19 should be exempted from work.
- HCP who are NOT caring for COVID19 cases are not included in the above protocol and they should follow their hospital procedure.

All healthcare providers caring for COVID19 positive cases should undergo nasopharyngeal swab COVID19 test every 7days in their working place. Results are to be traced by the facility supervisor, and to follow the actions above

Non-Healthcare Workers

Non-healthcare workers include drivers, cleaners, and personnel that operate at COVID treatment/quarantine facilities

**Unprotected Exposure to confirmed COVID-19 case
(with or without symptoms)**

1. Isolate and test for COVID 19 and wait for result
2. Test in RAF or to schedule with Public health clinics (66399868)
3. Inform war room
4. If positive, admit in isolation facility
5. If negative, quarantine/home isolation* for 14 days
6. Exemption from work for 14 days
7. Retest at the end of the isolation/quarantine period before going back to work

Symptomatic with Protected exposure to confirmed COVID-19 case

1. Isolate and test for COVID 19 and wait for result
2. Test in RAF or to schedule with Public health clinics (66399868)
3. If positive, admit in isolation facility and Inform war room
4. If negative, hospital facility to decide further management and action

Asymptomatic and Protected exposure

1. Regular checking of symptoms and temperature
2. Regular screening every 7-14 days by rapid test in their facilities

*self isolation depends on the capability of home isolation, if not possible, then to quarantine by sponsored company or quarantine in COVID-19 facilities

Symptoms : Fever or cough or shortness of breath

Unprotected exposure is the absence of either mask or goggles ; Protected exposure is the presence of at least both mask and goggles

General Recommendations

- Encourage good hygiene by education and posters
- Increase the frequency of cleaning lavatories
- Distribution of hand sanitizers and tissues in the building
- Strict procedure to prevent animals entering the prison site
- Daily report about prison situation to war room

Prison

Symptomatic Inmates

- Isolate immediately
- Take nasopharyngeal and oropharyngeal swab and send to Public Health lab
- Inform 444/War room to facilitate testing
- If positive, to arrange transfer to isolation facility

Prison Guard & Staff

- Daily checking of temperature and symptoms
- Encourage self reporting of close contact to COVID-19 cases
- Test any staff who fits the criteria for testing, based on case definitions

Symptoms : Fever or cough or shortness of breath