
This information can be used to help guide decision making on testing and clearance of individuals suspected or confirmed to have COVID-19. This information is current as of April 10 2020 and may be updated as the situation on COVID-19 continues to evolve.

Who should be tested for COVID-19?
Please refer to the COVID-19 Provincial Testing Guidance Update.

Diagnosing COVID-19

In a symptomatic patient in whom COVID-19 is suspected, only a single (1) NP swab is required for laboratory testing. Laboratory confirmation of COVID-19 infection is performed using a validated assay, consisting of a positive nucleic acid amplification test (NAAT; e.g. real-time PCR or nucleic acid sequencing) on at least one specific genome target.

- A single positive result is sufficient to confirm the presence of COVID-19.
- In a case with no known exposures, a single negative result in a suspected case is sufficient to exclude COVID-19, at that point in time. If symptoms change or worsen, consider the need for retesting.
- In a symptomatic case currently within their 14-day self-isolation as a result of a known exposure, a single negative result is sufficient to exclude COVID-19 at that point in time. However, the individual should remain in self-isolation for the rest of their 14-day period, and if symptoms change or worsen, consider the need for repeating testing.

Testing of asymptomatic individuals (i.e., have never had symptoms) is not generally recommended at this time, and beyond the priority list within the COVID-19 Provincial Testing Guidance Update, prioritization should first be given to symptomatic over asymptomatic individuals.

- If an individual who has never had symptoms is tested and is negative, a single negative is sufficient to exclude COVID-19 at that time. However, if symptoms develop in the future then additional testing should be considered.
- If an individual who has never had symptoms tests positive, this should be managed as a confirmed case of COVID-19.

Management of individuals who have not been tested

- If individual is asymptomatic and has no exposure risk
  - Provide reassurance and information for Ontario COVID-19 website
• If individual is asymptomatic, but has exposure risk
  o Provide information on self-monitoring and self-isolation for 14 days from exposure risk

Criteria for when to discharge someone from isolation and consider 'resolved'

For each scenario, isolation after symptom onset should be for the duration specified provided that the individual is afebrile, and symptoms are improving. Absence of cough is not required for those known to have chronic cough or who are experiencing reactive airways post-infection. Once a case is discharged from isolation, their case status should be updated to 'resolved'. If an individual has tested positive but has never had symptoms, isolation recommendations should be based on date of test. After an individual completes their isolation period, they should continue to practice physical distancing measures.

• For individuals in self-isolation at home:
  o Isolate for 14 days following symptom onset. Most individuals who have tested positive do not require retesting for viral clearance prior to being discharged from isolation (exceptions to this are listed below and include hospitalized patients and health care workers)
  o This applies to individuals whether they were confirmed by testing, and individuals who were not tested but have symptoms compatible with COVID-19 and are isolating at home for 14 days from symptom onset.

• For hospitalized patients:
  o Isolate in hospital until 2 consecutive negative tests (single NP swab), obtained at least 24 hours apart.
  o If discharged home within 14 days of symptom onset, follow advice for individuals at home where viral clearance swabs are not required.
  o If discharged to a long-term care home/retirement home, maintain isolation (droplet and contact precautions) until 2 consecutive negative tests, obtained at least 24 hours apart. If testing for clearance is not feasible, maintain isolation until at least 14 days from symptom onset.

• For health care workers returning to work:
  o Test-based approach: HCWs who have tested positive for COVID-19 should remain off work until they receive 2 consecutive negative specimens (single NP swab) at least 24 hours apart
  o Non test-based approach: HCWs may return to work 14 days after symptom onset (or as directed by their employer/Occupational Health and Safety)

For health care workers that are agreed to be critical to operations by all parties, earlier return to work may be permitted under work self-isolation. This means maintaining isolation outside of work until 14 days after symptom onset (or until 2 negative swabs) but continuing to work while wearing appropriate PPE at work, and not working in multiple locations. The following table provides various scenarios for managing return to work for HCWs critical to operations under work self-isolation:
<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Test Result</th>
<th>Recommendations for HCW Return to Work under Work Self-Isolation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Positive</td>
<td>May return to work as soon as 24 hours after symptom resolution; AND Continue with appropriate PPE at work until 2 consecutive negative tests or until 14 days after symptom onset and asymptomatic</td>
</tr>
<tr>
<td>Yes</td>
<td>Negative</td>
<td>May return to work 24 hours after symptom resolution. If the HCW was self-isolating due to an exposure at the time of testing, return to work should be under work self-isolation until 14 days from last exposure.</td>
</tr>
<tr>
<td>Yes</td>
<td>Not tested (i.e., test not available, as all symptomatic HCWs are recommended to be tested)</td>
<td>May return to work at 14 days after symptom onset; OR May return to work 24 hours after symptom resolution with appropriate PPE and under work self-isolation until 14 days from symptom onset</td>
</tr>
<tr>
<td>Never symptomatic at time of test</td>
<td>Positive</td>
<td>May return to work at 14 days after positive specimen collection date; OR May return to work if remain asymptomatic 72 hours from test and continue with appropriate PPE at work until 2 consecutive negative tests or until 14 days after positive specimen collection date Note: although testing on asymptomatic individuals is not recommended, in the event testing occurs this row can be used to guide decision making around the HCW returning to work</td>
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</tbody>
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