

BILH Interim Indications for Testing for Patients with Influenza-like Illness (including COVID-19) by Test Components and Symptoms

As we move into the traditional respiratory viral season, recommendations are provided for testing to include influenza A/B and other viruses for symptomatic patients. Testing supplies remain limited for some viruses and on certain testing platforms, so please refer to the table below and accompanying [Inpatient and Ambulatory/ED/Urgent Care algorithms](#) for most patients. Additional respiratory viral testing is available at the clinician’s discretion.

Note that [retesting for COVID-19](#) is not recommended within 90 days of the original positive test for patients who have recovered and are asymptomatic.

Viral PCR Test Components	Asymptomatic ¹ Patient	Symptomatic ¹ Patient
COVID-19 PCR only	<ul style="list-style-type: none"> Admission testing for non-COVID related condition/illness Pre-procedure testing for high risk procedures in OR and non-OR settings Transfer to LTACH, SNF or behavioral health unit Close contact of a person with confirmed COVID-19 Other indications for screening (generally per MDPH, accepting facility, or local institutional infection control) 	<ul style="list-style-type: none"> Ambulatory patient <u>not</u> meeting high risk criteria for complications from influenza³
COVID-19 + Influenza A/B PCR <i>(may include RSV in some platforms²)</i>	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Patient being admitted who is <u>not</u> immunocompromised⁴ Ambulatory patient meeting high risk criteria for complications from influenza³ Ambulatory patient who resides in a congregate setting
COVID-19 + influenza A/B + RSV PCR <i>(may include additional viruses in respiratory pathogen panel such as adenovirus, rhinovirus and metapneumovirus in some platforms²)</i>	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Patient being admitted who is immunocompromised⁴

Abbreviations: COVID-19=Coronavirus-2019, LTACH=Long Term Acute Care Hospital, MDPH=Massachusetts Department of Public Health, PCR=Polymerase chain reaction, RSV=Respiratory Syncytial Virus, SNF=Skilled nursing facility

¹Symptoms include at least one of: Fever (>100.4 deg F) or feeling feverish, chills, body aches, sore throat, cough (new or worsening), shortness of breath (new or worsening), diarrhea (new or worsening) and loss of smell or taste

²Platform refers to laboratory testing platform. Each BILH facility has one or more types of analyzers for respiratory viral pathogen testing. Testing of non-COVID respiratory pathogens, including influenza, will vary based on platform and supplies. Check with your local laboratory for the options available at your facility, including sendout tests.

³High risk criteria for complications from influenza:

- Age>65 or <2 years
- Caretakers/household contacts of persons who are immunocompromised
- Chronic lung disease (such as COPD and cystic fibrosis)
- Endocrine diseases (such as diabetes mellitus)
- Cardiac diseases (such as congenital heart disease, congestive heart failure and coronary artery disease)
- Hematologic/oncologic diseases
- Immunosuppression (due to disease or medication)
- Liver disorders
- Metabolic disorders
- Extreme obesity (BMI≥40)
- Neurologic or neurodevelopmental conditions
- Renal diseases

⁴Immunocompromised generally refers to patients with oncologic conditions or those who are post-bone marrow or solid organ transplant. Other patients, such as critically ill patients with respiratory illness in the ICU, may benefit from broader respiratory viral testing at the clinician’s discretion – especially if initial influenza and COVID-19 testing is negative.