

APRIL 28, 2020

HEALTH ADVISORY

COVID-19 is a Mandatory Reportable Condition

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.

COVID-19 Diagnostic Testing Guidance

The North Dakota Department of Health (NDDoH) continues to recommend that clinicians use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Health care providers should not turn patients away for COVID-19 testing who have upper or lower respiratory illness. Collection kits are available for order from the NDDoH at <http://www.ndhealth.gov/microlab/Lab/>.

Clinicians should consider testing any patient with **one (1)** of the following signs/symptoms with new or worsening onset:

- cough
- shortness of breath
- difficulty breathing

OR

Two (2) of the following signs/symptoms with new or worsening onset:

- fever (measured or subjective)
- runny nose
- sore throat
- chills
- myalgia
- fatigue
- headache
- loss of taste and/or smell

Providers should use their discretion to test patients for COVID-19.

Patients may be asymptomatic and still test positive for COVID-19.

Close contacts to COVID-19 cases that have symptoms should be tested for COVID-19.

Health care providers should not refer patients to the NDDoH for medical consultation or screening to determine the need for testing. Health care providers should not diagnose a patient with COVID-19 without testing and/or reporting to the NDDoH.

For questions related to COVID-19, health care providers can call the NDDoH Division of Disease Control at COVID-19 hotline at 888-391-3430 Sunday through Saturday, 24/7.

All patients being tested for COVID-19 will need to be isolated (at home, in a congregate care setting 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](#)
- The NDDoH is recommending North Dakota providers follow CDC's guidance for requiring two negative tests at least 24 hours apart for all [Health care workers](#).
- [Healthcare Settings](#)

If a patient is unable to be tested for COVID-19, then the criteria for discontinuation from isolation for patients with confirmed COVID-19 should be followed.

If COVID-19 testing is negative, but the patient is a close contact to a COVID-19 case, the patient needs to continue to be quarantined until 14 days from their last exposure to the case.

If COVID-19 testing is negative and the individual is not a close contact to a COVID-19 case, patients should stay home until well and fever free (without fever-reducing medications) for 24 hours. Please provide your patients with the [NDDoH fact sheet for people being tested for COVID-19](#).

COVID-19 Serologic Testing

The NDDoH has validated serologic testing for surveillance purposes only. NDDoH serology is not available for diagnostic testing.

Serologic testing is available at other commercial labs. Results from serologic tests should not be used as the sole basis to diagnose or exclude SARS-CoV-2 infection, to inform infection status, or need for personal protective equipment.

- Some serology tests are being falsely marketed as "FDA authorized" or "FDA approved" and as CLIA-waived point of care (POC) tests. No serology tests are currently FDA approved for use in the POC setting.
- Laboratories should report only the results from serologic tests that have an FDA Emergency Use Authorization (EUA) to the NDDoH. Labs should report both positive and negative results through Electronic Laboratory Reporting (ELR), the NDDoH website or fax (see [Reporting](#) for more information).
- Patients who are serologic positive for COVID-19 will be followed-up with by the NDDoH. If symptoms are present, the individual will be considered a probable case and a case investigation and contact tracing will be initiated. The NDDoH recommends that patients

with symptoms suggestive of COVID-19 infection be tested using a molecular detection test. If asymptomatic, the patient will not be considered a case.

There is great interest in using serology tests to determine past or present COVID-19 infection and immunity in patients. At this point in time, however, there are no antibody tests that have been validated for the diagnosis of SARS-CoV-2 infection and the utility of the currently available serologic assays has not been established. As antibodies may not be detected during early days of infection, a negative result does not rule out infection.

Providers should use caution when interpreting the results of serologic tests for SARS CoV-2 until there is additional data on their best use because of concerns of both false negative and false positive results. With the currently available serology tests, given the current prevalence of COVID-19 in North Dakota, a positive result is up to 50% likely to be a false positive. False positive results are also possible due to past or present infection with other coronavirus strains.

In addition, there is limited information on whether the presence of COVID-19 specific antibodies can reliably determine if someone is no longer infectious or whether that person is immune to reinfection or how long any possible immunity may last. For more information about COVID-19 serologic testing, please visit the Infectious Diseases Society of America's [Antibody Primer](#).

Categories of Health Alert Network messages:

Health Alert Requires immediate action or attention; highest level of importance
Health Advisory May not require immediate action; provides important information for a specific incident or situation
Health Update Unlikely to require immediate action; provides updated information regarding an incident or situation
HAN Info Service Does not require immediate action; provides general public health information