

Indications for screening of COVID-19 by PCR (polymerase chain reaction)

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INDICATIONS FOR SCREENING OF COVID-19 BY PCR DATED APRIL 8, 2020. SOURCE: HEALTH GENERAL MANAGEMENT

Screening of COVID-19 by PCR is indicated for subjects presenting with suspicious symptoms, such as:

- Patients hospitalized for or with a clinical pattern suggesting the presence of COVID-19, including haemodialysis patients;
- Health professionals from the onset of symptoms suggesting the presence of COVID-19;
- Monitoring of viral excretion in the patients admitted to intensive care unit in severe condition, as a part of the treatment management;
- Pregnant women regardless of gestational age, presenting with the associated symptoms;
- Donors of hematopoietic organs, tissues or stem cells.

INDICATIONS FOR ASYMPTOMATIC PATIENTS

Before surgery: patients presenting a risk of serious postoperative complications associated with the COVID infection:

- thoracotomy, sternotomy, surgery for ENT cancers and other serious interventions
- surgery requiring post-operative resuscitation care
- organ transplant

Consider before the following procedures in each particular case:

- chemotherapy with a high risk of neutropenia
- biotherapy / immunosuppressive treatment

RULES OF BEHAVIOR AFTER PCR

Awaiting results for a patient:

- symptomatic patients: escalated precautions in respect to the contact with droplets should be applied in a COVID Unit, if possible
- asymptomatic patients: standard treatment course, usual preventive measures, see below.

In case of positive screening:

- elective surgical interventions and elective chemotherapy cycles
- if an operation or an urgent chemotherapy course is required, the patient should be transferred to COVID Unit

NOTES

A negative PCR result reflects the situation at a time point T, which may be different the next day. The proportion of false negative results is not negligible.

A patient presenting with symptoms during hospitalization should be placed under the conditions providing protection from droplets and contact; and he/she is subject to re-examination.

There are no indications to use thorax computed tomography for COVID identification for an asymptomatic patient in addition to nasopharyngeal PCR. If computed tomography is performed for another indication, chest MRI may also be added.

In any circumstances, corresponding preventive measures should be taken, including PCR-negative patients :

- Permanent use of surgical masks by all the clinical staff
- Use of FFP2 masks in accordance with the internal recommendations of an institution
- Treatment of hands with hydroalcoholic solution before and after each contact with the patient and his/her immediate environment

EDITION

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