## Ambulatory Negative Covid Test Algorithm—Symptomatic <u>Pediatric</u> Patient (< 18 years old)

COVID-19 Pediatric Task Force 12/9/20

Estimates of the sensitivity of COVID-19 PCR testing vary widely but may be in the 70-90% range in ambulatory patients. Sensitivity highest Worsening within 48 hours before and 48 hours after symptom onset due to high symptoms or failure viral loads. to improve If repeat COVID-19 test Factors that may increase false negatives: OR is Positive then home Retest for covid in 2-3d Assay used: High risk patient\* isolation 10 days with Postive retest-Ensure high quality sample Lab-based PCR (e.g. YNHH, Mayo, Quest) estimated at 85-90% sensitive with persistent resolving symptoms and Consider additional diagnostic testing POC tests (e.g. Abbott ID now and others) predicted to be 10% lower symptoms no fever x24 hrs. (e.g. labs, CXR) if can be done safely (currently not being done in < 18 years old) OR Consider home 02 sat monitoring if Other factors: high risk Poor sample quality or sampling technique available household\*\* Neg. Retest Refer to ED if clinically warranted Advanced disease stage—viral loads are highest EARLY in disease OR If repeat COVID-19 test Variable viral shedding, including patient-specific factors Known COVID-19+ is NEGATIVE and known Disease severity patient in the exposure then home Labs to consider: CBC, CRP, ferritin, procalcitonin, household/known quarantine per CDC. complete metabolic panel **NEGATIVE** test result in a exposure (Lymphopenia, elevated inflammatory markers, **SYMPTOMATIC** Advise self hepatitis, examples of labs consistent with COVID-19) No known exposure, Clinical suspicion Modpatient isolate; self isolate until 24 hrs. HIGH for covid CDC Quarantine Guidelines December 2, 2020 Consider PUI with no fever and Consider Flu Testing in Lowest Risk for spread: 14 days resolving symptoms. Season Acceptable Alternatives: 10 days with no symptoms OR Examples of High Risk: 7 days no symptoms with negative test at day 5 or later Known COVID-19 + **Explore Alternative** All Patients continue to monitor for symptoms, wear a exposure Diagnosis. Attended Large mask and socially distance x14 days Social Gathering Travel to High Risk **Improving** Area symptoms and no \*For symptomatic children with risk factors for \*\*High risk household member with high known exposure disease progression: Examples include not risk condition Low, or alternative diagnosis likely limited to: Age > 60 Asthma that requires daily medication BMI > 30Diabetes Diabetes Immunosuppression or immunodeficiency Chronic heart, kidney, liver or lung Obesity or BMI >95% for age disease Congenital or chronic heart, kidney, liver or Asthma that requires daily medications lung disease Malignancy and undergoing treatment Teenager Immunosuppressive illness or medication Self isolate until 24 **Black or Hispanic Persons** Smoker hrs. with no fever and resolving symptoms