

## Long-term Care Facility Testing Recommendations

### Routine Testing of Asymptomatic Residents and Staff

**Residents:** Routine testing of asymptomatic residents is not recommended unless prompted by a change in circumstances, such as the identification of a confirmed case of COVID-19 in the facility.

- Newly admitted residents and residents who have left the facility for >24 hours, regardless of vaccination status, should have a series of two viral tests (antigen or PCR) for SARS-CoV-2 infection; immediately and, if negative, again 5-7 days after their admission.

**Staff:** Routine testing of asymptomatic staff, **who are not up-to-date with COVID-19 vaccination**, should be based on [community transmission level](#).

- Staff who are [up-to-date](#) with COVID-19 vaccination do not have to be routinely tested.
- Staff members who have recovered from a SARS-CoV-2 infection in the past 3 months do not need to be routinely tested.

### **Routine Staff Testing Intervals by Parish COVID-19 Level of Community Transmission**

Level of COVID-19 Community Transmission	Minimum Testing Frequency of Staff <b>Who are Not Up-to-Date with COVID-19 Vaccination</b>
Low (blue)	Not recommended
Moderate (yellow)	Once a week*
Substantial or High (orange or red)	Twice a week*
*Staff who work infrequently should be tested within 3 days before their shift (this includes the day of their shift)	

- If the level of community transmission increases to a higher level of activity, the facility should begin testing staff at the frequency shown in the table above as soon as the criteria for the higher activity level are met.
- If the level of community transmission decreases to a lower level of activity, the facility should continue testing staff at the higher frequency level until the level of community transmission has remained at the lower activity level for at least two weeks before reducing testing frequency.

Facilities can utilize antigen tests for routine testing of asymptomatic staff.

- If an antigen test is positive, perform a [confirmatory PCR test](#) as soon as possible (collected within 1 to 2 days of the antigen test). Asymptomatic staff who are antigen test positive should be excluded from work but initiation of an outbreak response, including facility-wide testing, can be delayed until confirmatory test results are available.
- If an antigen test is negative, a confirmatory test does not need to be performed.

### **Testing of Symptomatic Residents and Staff**

Residents and staff with signs or symptoms of COVID-19, *regardless of vaccination status*, must be tested immediately.

- Antigen tests can be used, however, negative results should be confirmed by a PCR test as soon as possible (collected within 1 to 2 days of the antigen test). Residents should be kept on transmission-based precautions and staff should remain excluded from work until PCR results return.
  - If the confirmatory PCR test is positive, the symptomatic individual should be classified as having SARS-CoV-2 infection.
- A positive antigen test does not need confirmatory testing and the symptomatic individual should be classified as having SARS-CoV-2 infection.

### **Outbreak Testing**

A new COVID-19 infection in any staff or any [nursing home-onset](#) COVID-19 infection in a resident triggers an outbreak investigation and additional testing.

### **Contact Tracing**

If the facility is able to complete contact tracing to identify the case's close contacts, then those residents and staff with higher-risk exposure should be tested, *regardless of vaccination status*.

- If testing of close contacts reveals additional SARS-CoV-2 cases, contact tracing should be continued to identify additional close contacts for testing.
  - A facility-wide or group-level (e.g., unit, floor, or other specific area(s) of the facility) approach should be considered if all potential contacts cannot be identified or managed with contact tracing or if contact tracing fails to halt transmission

### **Broad-based Testing**

If the facility is unable to identify all close contacts they should instead investigate the outbreak at a facility-level or group-level.

- Perform testing for all residents and staff on the affected unit(s) or facility-wide, *regardless of vaccination status*, immediately (but generally not earlier than 24 hours after the exposure, if known) and, if negative, again 5-7 days later.
  - If no additional cases are identified during the broad-based testing, outbreak precautions can be discontinued after 14 days and no further testing is indicated
  - If additional cases are identified, testing should continue on affected unit(s) or facility-wide every 3-7 days, in addition to outbreak precautions, until there are no new cases for 14 days.
    - If antigen testing is used, more frequent testing (every 3 days), should be considered.

## Appendix A: Identifying Community Transmission Levels

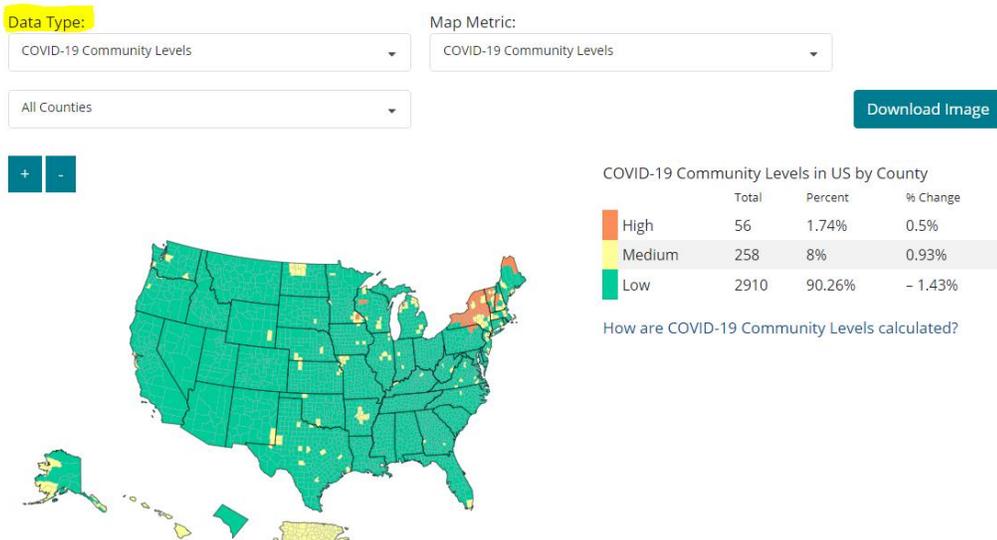
CDC has two maps available that describe COVID-19 risk and impact to the community:

- The Community Transmission map is provided for healthcare facility use and should be use used by long-term care facilities when determining the frequency of routine staff testing. Community transmission levels are determined by the number of new cases and percent positivity of PCR tests over a 7-day period. This map utilizes blue, yellow, orange, and red to distinguish between the levels.
- The Community Levels map shows the impact of COVID-19 on communities based on multiple indicators including the number of new cases, new COVID-19 hospital admissions, and percent of staffed inpatient beds in use by COVID-19 patients over a 7-day period. This map utilizes green, yellow, and orange to distinguish between the levels and should **not** be used by long-term care facilities when determining the frequency of routine staff testing.

### Navigating to the Community Transmission Map

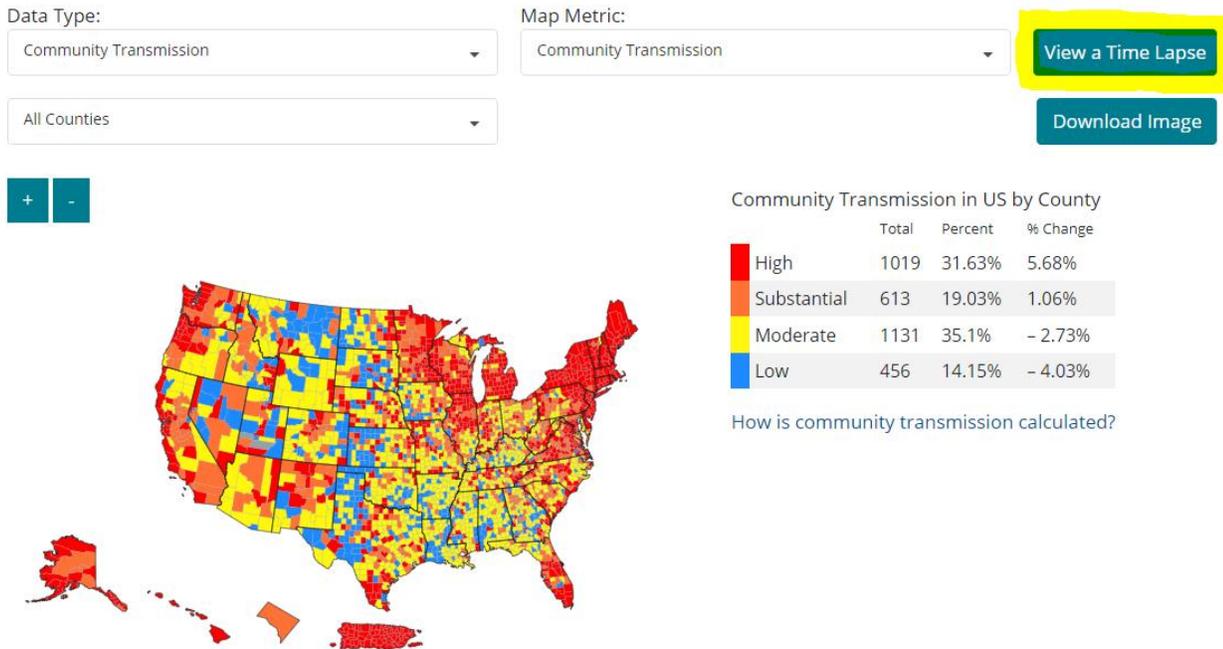
Depending on the link you use to access CDC’s county-level maps, it may default to the Community Level map and you will need to navigate to the Community Transmission map. The maps will be labeled, but are also easily distinguishable by the colors used for each level.

Community Level map:



From here you will use the “Data Type” drop-down menu (highlighted in the above image) to choose Community Transmission. You may need to scroll to find this option in the menu. The webpage should then load the below map.

Community Transmission map:



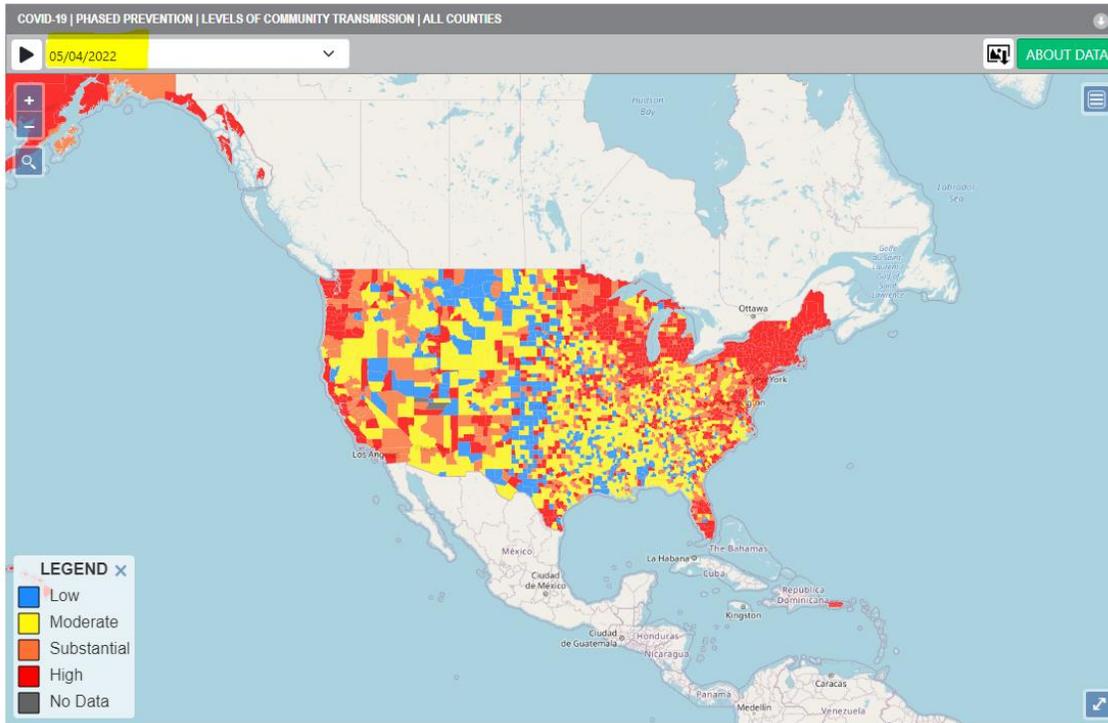
This map is updated daily by 8pm ET and displays the level of transmission over a 7-day period. Facilities should monitor their community transmission level using the same day each week in order to determine their parish community transmission during the previous week.

- The simplest method of keeping track of community transmission levels is to visit this map on your pre-determined day each week and note your parish’s community level.
  - The plus/minus symbols at the upper left side of the map can be used to zoom into Louisiana.
  - If you click and hold within the map, you can reorient the map by moving your mouse in the desired direction.
  - Parish names will be displayed when you hover your mouse over each parish.
- If you did not check community transmission on your pre-determined day, you’ll need to access the time lapse map to identify your community transmission levels.

## Using the Time Lapse Map

From the Community Transmission map, you'll need to click the "View a Time Lapse" button (highlighted in the above image). The webpage should then load the below map.

Community Transmission Time Lapse map:



From here, you'll use the date drop-down menu (highlighted in the above image) to navigate to your pre-determined day to identify your community level.

- If the map image is playing the daily time lapse, you'll need to press the pause button to the left of the date drop-down and reselect your desired day.

**Appendix B: Definition of Key Terms**

**Confirmatory Testing:** Confirmatory PCR testing following an antigen test is necessary when the test result does not match the clinical presentation. This includes:

- When an asymptomatic individual tests positive by antigen test
- When a symptomatic individual tests negative by antigen test

Specimens collected for confirmatory testing should be collected no longer than 2 days after the initial antigen testing. If more than 2 days separate the two specimen collections, or if there have been opportunities for new exposures, a PCR test should be considered a separate test – not a confirmation of the earlier test.

- If the results are discordant between the antigen test and the PCR test, the PCR test result should be interpreted as definitive for the purpose of clinical diagnosis.

**Up-to-Date:**

COVID-19 Vaccine	Pfizer-BioNTech	Moderna	Johnson & Johnson’s Janssen
<b>Primary Series</b>	2 doses of vaccine given 3-8 weeks apart	2 doses of vaccine given 4-8 weeks apart	1 dose of vaccine
<b>Booster</b>	1 dose of Pfizer-BioNTech or Moderna given <u>at least 5 months</u> after final dose in primary series	1 dose of Pfizer-BioNTech or Moderna given <u>at least 5 months</u> after final dose in primary series	1 dose of Pfizer-BioNTech or Moderna given <u>at least 2 months</u> after final dose in primary series
A resident or staff member is considered up-to-date: <ul style="list-style-type: none"> <li>• immediately after receiving their 1st booster dose, OR</li> <li>• 2 weeks after they have completed a primary series and are not yet eligible for a booster dose</li> </ul>			

**Nursing home-onset COVID-19:** COVID-19 cases that originated in the nursing home. It does not refer to:

- Residents who were known to have SARS-CoV-2 infection on admission to the facility and were placed in appropriate transmission-based precautions to prevent transmission to others in the facility.
- Residents who were placed on transmission-based precautions on admission and developed SARS-CoV-2 infection while in quarantine.

**Appendix C: Resources**

- CMS Guidance: <https://www.cms.gov/files/document/gso-20-38-nh-revised.pdf>
- IPC Recommendations for Preventing SAR-CoV-2 Spread in NHs: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>
- SARS-CoV-2 Antigen Testing in LTCF: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-antigen-testing.html>
- COVID-19 Vaccine Up-to-Date Guidance: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>
- Community Transmission levels: [https://covid.cdc.gov/covid-data-tracker/#county-view?list\\_select\\_state=all\\_states&list\\_select\\_county=all\\_counties&data-type=Risk](https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=Risk)

**Regional Epidemiologists**

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