



Testing Criteria for SARS-CoV-2 in Western Australia #25 Effective from 31 January 2021

These testing criteria are guided by the [COVID-19 Testing Directions](#) and the [CDNA National Guidelines](#). New information is highlighted.

ALL PEOPLE WHO MEET THE TESTING CRITERIA SHOULD BE TESTED BY PCR

Testing Criteria

Fever ($\geq 37.5^{\circ}\text{C}$) **OR** recent history of fever (e.g. night sweats, chills), without a known source,
OR

Acute respiratory symptoms (including cough, shortness of breath, sore throat, runny nose)
OR

Acute loss of smell or taste

Testing is especially important for people with any of the following epidemiological criteria:

- anyone who lives or works in a high-risk setting with direct patient contact (e.g. healthcare, aged care or residential care)
- contacts of a confirmed or probable case,
- people returning from outside WA, or who have lived/ travelled through an area with elevated risk of community transmission, in the last 14 days,
- where clinical and public health have determined that a hospitalised patient with non-specific signs of infection is at increased risk of COVID-19.

Testing locations

Testing can occur at WA government [metropolitan and regional COVID clinics](#) (see below).

Metropolitan COVID clinics

- Armadale Health Service,
- Fiona Stanley Hospital
- Joondalup Hospital
- Royal Perth Hospital
- Rockingham General Hospital
- Sir Charles Gairdner Hospital
- St John of God Midland Hospital

Regional COVID clinics

- Broome Hospital
- Bunbury Health Campus
- Kununurra District Hospital

Regional Emergency Departments

- Albany Regional Hospital
- Geraldton Regional Hospital
- Port Hedland Regional Hospital (Hedland Health Campus)
- Kalgoorlie Regional Hospital

Emergency department of a public hospital that is located outside of the Perth metropolitan area.

Patients should be reminded to be mindful of the heat, take water and wear a hat.

People who are given a Centre Quarantine Direction will be tested at the hotel on days 2 and 12 and do not have to present for testing on Day 11.

Testing categories

Testing of asymptomatic patients

Testing of asymptomatic patients is permitted in a number of settings; approval for each of these scenarios can be found [here](#):

- Before proceeding with organ donation or organ transplantation.
- As part of targeted government approved screening programs.
- Returned travellers prior to release from mandatory quarantine.
- People who need to provide evidence of a negative COVID test for overseas governments.
- Travellers entering WA as specified in the Presentation for Testing Directions (No 15), the Presentation for Testing Amendment Directions, and in the Transport, Freight and Logistics Directions (No 2).
- Under public health direction in certain high-risk settings.
- People participating in the DETECT BORDERS initiative.
- Quarantine Centre Workers as specified in the Presentation for Testing (Quarantine Centre Workers) Directions (No 4).
- International airport workers as specified in the Presentation for Testing (Airport Workers – International Arrivals)

Testing of people who attended a location visited by a confirmed case

Any person who attended a location visited by a confirmed case, during the specified date and time, should be tested for COVID-19. The locations can be found on the [HealthyWA website](#).

Testing of people with symptoms of COVID-19, or those who have attended a location visited by a confirmed case, can occur at a public COVID clinic, or at a private pathology clinic or GP respiratory clinic. A GP referral for testing at a private pathology clinic is not required at this time, and testing is free. Patients should be advised to check the websites of the private pathology clinics for testing locations and opening times.

Testing of close and casual contacts

The [CDNA National Guidelines](#) has provided updated definitions of primary and secondary close contacts, as well as casual contacts. The guidelines also provide further information on contact management. Public Health (PHEOC) will determine who is a contact, and what category of contact they are, and any quarantine and testing requirements.

Testing of people who have entered WA (other than transport, freight and logistics workers)

- Travellers who have entered WA from a low or medium risk state must present for COVID testing on day 11 after their arrival into WA. On arrival in Perth, travellers must be prepared to take a COVID-19 test if deemed necessary by a health clinician (voluntary asymptomatic testing is also available for all airport arrivals)
- Travellers who have entered WA from a medium risk state must also present for COVID testing within 48 hours of their arrival into WA.
- Travellers who have been in New Zealand AND another Australian State or Territory, must present for testing on day 11 after their arrival into WA.

Advice regarding testing for the above cohorts arriving into WA

- People must complete their 14 days quarantine even if they receive a negative result.
- The above testing requirements must be complied with unless they:

- have been issued a Centre Direction; **or**
- are a transport, freight and logistics worker arriving by road or rail; **or**
- are a person who entered WA from a rig or platform under the Approval for Rig or Platform Crew (No 2) and are not a person requiring quarantine.
- On arrival in Perth, travellers must be prepared to present for COVID-19 testing if deemed necessary by a health clinician.
- Voluntary asymptomatic testing is also available for all airport arrivals.

Testing for entry requirements for overseas governments

See [here](#) for the Chief Health Officer (CHO) approval to request COVID-19 PCR testing and COVID-19 serology IgM or IgG antibody testing, on patients who are required to provide evidence of a negative COVID-19 test to meet the entry requirements of overseas governments.

Testing under this circumstance can occur at private pathology collection centres and **should not occur** at WA government COVID clinics.

Prior to ordering the test, the requesting medical practitioner must sight written evidence of the requirement for a negative result as a condition of entry by the patient to that country. The evidence must consist of an official statement from the government of that country confirming that the patient requires a negative COVID-19 test. The requesting medical practitioner must document the reason for the test on the request form as:

“Entry requirement by overseas country for immigration or travel.”

Testing of workers responsible for transport or freight and logistics services into or out of WA

The following people **are required** to be tested for COVID-19 every 7 days, for a period of 14 days after entry into WA:

- People who are responsible for the provision of transport or freight and logistics services into or out of WA who have:
 - been in a low or medium risk state in the 14 days prior to arrival in
 - been in New Zealand AND another Australian State or Territory; or
 - have knowingly been in direct contact with a person who, in the 14 days prior to the direct contact had been in a low or medium risk state or a place outside of Australia.

Individuals must present for testing for COVID-19 within 48 hours of arriving in WA unless they provide satisfactory evidence that they have been tested for COVID-19 in the five days before entering WA. Testing for this purpose can occur at COVID clinics, regional public hospital Emergency Departments, or at designated private pathology collection centres. People in this category who are asymptomatic and present for testing at a private pathology collection centre do not require a referral form from a GP.

Testing of Quarantine Centre Workers

As per the [Presentation for Testing \(Quarantine Centre Workers\) Directions \(No 4\)](#), quarantine centre workers are required to:

- present for a nose and throat swab PCR test every 7 days (weekly), **AND**
- complete a self-collected mouth swab PCR test every shift (daily), noting that a mouth swab does not need to be collected on the day of the nose and throat swab. Self-collection kits will be provided to workers at the quarantine centres.

Testing for the weekly nose and throat PCR test can be undertaken at a COVID clinic. Testing is not available at GP respiratory clinics or private pathology collection centres.

Testing of international airport workers

As per the Presentation for Testing (Airport Workers – International Arrivals), airport workers who have contact with international arrivals are required to:

- present for a nose and throat PCR test every 7 days (weekly), **AND**
- complete a self-collected mouth swab PCR test every shift (daily), noting that a mouth swab does not need to be collected on the day of the nose and throat swab.

Testing facilities are available at the airport. Workers can also present to a COVID clinic for the weekly nose and throat PCR tests. Testing is not available at GP respiratory clinics or private pathology collection centres.

Testing of workers part of the DETECT Borders program

- As of 11 of September, asymptomatic people working at points-of-entry in WA and venues where people are at an increased risk of acquiring SARS-CoV-2 can have voluntary, free weekly testing for COVID-19.
- Workers are required to show proof of employment.
- Testing can be undertaken at metropolitan and regional COVID clinics. In regional areas where there is no COVID clinic, people should go to their nearest public hospital, health service or remote health clinic.
- Testing is **not** available at GP respiratory clinics or private pathology collection centres.

Individuals included in the DETECT BORDERS initiative include staff working at or servicing:

- Any quarantine centre operated or managed by the State Health Incident Command Centre (including hotel quarantine centres), unless these staff are subject to the Presentation for Testing (Quarantine Centre Workers) Directions (No 4).
- The Perth International and Domestic Airport, unless these staff are subject to the Presentation for Testing (Airport Workers – International Arrivals).
- Any sea Port or place where sea Port activities are carried out.
- Any controlled border crossing into Western Australia by land, such as those located near Eucla and Kununurra.
- Any other premises or location that may be subsequently approved and notified as appropriate.

Further information regarding the DETECT BORDERS CHO approval can be found [here](#).

Indian Ocean Territory arrivals

- According to the [Exempt Traveller Approval \(Indian Ocean Territories\)](#) arrivals from the Indian Ocean Territories (IOT) are no longer required to undergo 14 days quarantine in WA.
- According to the [Presentation for Testing Directions \(No. 15\)](#) arrivals from the IOT who have not been outside the IOT or WA in the 14 days before arrival, are not required to present for Day 11 testing.
- Asymptomatic patients who have arrived from the IOT can be managed with standard precautions in hospital settings.

Exemptions from isolation in WA

The following people do not need to isolate after testing, provided they do not have symptoms of COVID-19:

- People tested under the Presentation for Testing (Quarantine Centre Workers) Directions (No 4)
- People tested under the Transport, Freight and Logistics Directions (No 2)
- People tested as part of the DETECT borders program

- Carers of a dependent who has been tested, whilst waiting for the result of the dependent person.
- People who undergo serology testing.
- People who need to provide evidence of a negative COVID-19 test for overseas governments.

Testing modalities

PCR testing

PCR is the test of choice for diagnosing acute COVID-19 infection.

Contact public health on **1300 316 555** to discuss testing in a **previously cleared** COVID-19 case.

Serology testing

Serology has utility for the diagnosis of **past** COVID-19 infection. Serology **does not** have a role for diagnosis during acute illness. Testing using serology before two weeks from the onset of symptoms can result in false negative results due to the time it takes to seroconvert.

The clinician should provide the date of onset of symptoms to enable accurate interpretation of serology testing results.

The requesting clinician is responsible for informing the patient of negative serology results. If the serology results are positive the patient will be contacted by Department of Health and provided further advice.

Serology can be considered for a person who meets the following criteria:

At least 2 weeks have passed since the onset of symptoms (fever (37.5⁰C) OR history of fever OR acute respiratory symptoms (including sore throat/cough/shortness of breath/runny nose)

AND the patient has one of the following risk factors:

- Identified as a close contact of a confirmed or probable case.
- International travel since 01/01/2020.
- Passengers or crew who have travelled on a cruise ship since 01/01/2020.
- Healthcare, aged or residential care workers, and staff with direct patient contact.
- People who have lived in or travelled through a geographically localised area with elevated risk of community transmission, as defined by public health authorities.

Serology should not be performed on someone who has previously tested positive to COVID-19 by PCR except if re-exposed to COVID-19 (see below).

Serology testing for recovered cases re-exposed to COVID-19

Recovered COVID-19 cases exposed to COVID-19 eight weeks after symptom onset (or first positive PCR if asymptomatic illness) and immunocompromised recovered cases exposed any time after release from isolation, can be considered for serology testing in consultation with PHEOC and a microbiologist or virologist at PathWest or private pathology providers when making decisions regarding quarantine and exclusions from high-risk settings.

Testing advice

1. Use of PCR tests in the clearance of cases from infection

- In the hospital setting, testing a person to confirm clearance of COVID-19 infection can be undertaken by the clinician to inform infection control requirements.
- Public health will request testing for those who require it for clearance purposes outside the hospital setting.
- Refer to the [Release from Isolation Factsheet](#) for information relating to the criteria that need to be met for case clearance.

2. Specimen Request information

- All requests must include patient demographic information (name, residential address, date of birth, gender, **mobile phone number**, Indigenous status*), date of test, clinical reason for testing, and location test was taken.
- *Refer to [How to identify Aboriginal and/or Torres Strait Islander clients](#).

3. Specimen Collection

- Patients who are displaying **severe** symptoms should be referred to the nearest Emergency Department for assessment and testing (call ahead).
- Testing can be performed at WA government COVID clinics, hospitals, Commonwealth-endorsed GP respiratory clinics, and private pathology COVID collection centres approved by the Chief Health Officer, as listed on [Healthy WA](#). Tests can also be performed by domiciliary specimen collectors. GPs can collect swabs in residential care facilities, prisons or for the homeless population.
- Regional testing can also occur in health centres and remote health clinics operated by WACHS, Silver Chain, Aboriginal Medical Services or the Royal Flying Doctor Service (RFDS).
- Appropriate PPE must be used in all testing locations to ensure protection of staff and patients as well as to ensure preservation of PPE supply. Please see [here](#) for further information.
- To perform specimen collection, use a single swab for oropharyngeal sampling (via the mouth) followed by a deep nasal swab.

4. Patient advice

- People who are PCR tested for acute COVID-19 infection need to be advised to isolate until they receive their COVID-19 result. Both the requesting clinician and the specimen collector should provide this advice to the person to be tested.
- If the person cannot isolate, alternative accommodation can be organised by calling 13COVID and selecting 3 then 1.
- The requesting medical practitioner who orders PCR test or serology is responsible for ensuring a system is in place for informing the patient of their test results if negative.
- If their PCR test is negative for COVID-19, patients **should** be advised to remain home until their symptoms have resolved. Those already in quarantine for the below reasons **must** complete their original 14-day quarantine period even if their test is negative for COVID-19:
 - returned from international or interstate travel, or
 - been informed they are a close contact of a positive case.
- If their PCR or serology test is positive for COVID-19, patients will be contacted by the Department of Health and provided further information.

5. Reporting

- **Notify** all suspect COVID-19 cases,ⁱ or if the practitioner otherwise suspects that the person has, or may have, COVID-19 by completing the notification form either [ONLINE](#) or by printing out the notification form and forwarding to WA Health via Fax 08 9222 0254 or email cdc@health.wa.gov.au Notifying by phone is not necessary.
- All laboratories report both positive and negative results to the WA Department of Health, as per the COVID Testing Reporting Directions.
- All laboratory reports need to include whether the test was by PCR or serology and if it was self-collected.

ⁱ A person who meets the following clinical AND epidemiological criteria:

Clinical Criteria: Fever ($\geq 37.5^{\circ}\text{C}$) or history of fever (e.g. night sweats, chills) OR acute respiratory infection (e.g. cough, shortness of breath, sore throat, runny nose) OR loss of taste or loss of smell.

Epidemiological criteria:

In the 14 days prior to illness onset:

- Close contact with a confirmed or probable case
- Lived in or travelled through a geographically localised area with elevated risk of community transmission
- Healthcare, aged or residential care workers and staff with direct patient contact
- International or interstate travel
- Passengers or crew who have travelled on a cruise ship

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This document can be made available in alternative formats on request for a person with disability.

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