



# Grant County Health Department

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Please note that areas of community transmission of COVID 19 are changing rapidly. Release from isolation with negative COVID 19 test result is considered on a case by case basis by local health departments.

Also, note that the Wisconsin State Lab of Hygiene has 7 day a week courier service and is running tests 7 days a week too. Other labs are coming on line soon. Turnaround time on testing is critical.

Be sure to include contact information for person being tested for COVID 19 on Faxes to health departments.

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Date: March 9, 2020

BCD 2020-03

To: Wisconsin Local Health Officers, Tribal Health Officials, Infection Preventionists, and Health Care Providers

From: Ryan Westergaard, MD, PhD, MPH  
Chief Medical Officer and State Epidemiologist for Communicable Diseases

## Updates to COVID-19 Testing Procedures

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#### Summary

The Wisconsin Department of Health Services (DHS) is issuing updated recommendations for clinicians and public health staff involved in evaluating patients suspected of having COVID-19. The key messages include:

- COVID-19 testing is now more widely available at the Wisconsin State Laboratory of Hygiene (WSLH), the Milwaukee Health Department Laboratory (MHDL), and a growing number of clinical and commercial laboratories nationwide.
- Any Wisconsin clinician can obtain a test for COVID-19 for patients suspected to have the disease without prior approval from DHS or MHD. Clinicians are encouraged to use their judgment based on clinical symptoms, evolving epidemiology and testing guidance from CDC, which is summarized in this memo.
- Confirmed and suspected COVID-19 disease remains a reportable condition in Wisconsin. In lieu of prior approval for COVID-19 testing, a patient information form must be completed and transmitted to the patient's local health department or DHS at the time laboratory specimens are submitted.

The rationale for these changes is that the number of locations around the world and in the U.S. where COVID-19 is spreading in communities continues to rise. We know that people with mild symptoms can spread the virus to others. In many areas of the country, new cases are being reported in people who have not traveled to areas known to have widespread transmission. Rapid identification of individuals with COVID-19 is the key to implementing effective strategies to contain the spread of infection.

#### Considerations for COVID-19 Testing

Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Most patients with confirmed COVID-19 have

developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing). Priorities for testing may include:

- Hospitalized patients who have signs and symptoms compatible with COVID-19 in order to inform decisions related to infection control.
- Other symptomatic individuals such as, older adults (age  $\geq$  65 years) and individuals with chronic medical conditions, and/or an immunocompromised state that may put them at higher risk for poor outcomes (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease).
- Any persons, including health care personnel, who within 14 days of symptom onset had close contact with a suspect or laboratory-confirmed COVID-19 patient, or who have a history of travel from high risk geographic areas within 14 days of their symptom onset. Testing should be considered for individuals in these group even if symptoms are mild (e.g. sore throat).

When considering COVID-19 in any patient presenting with respiratory symptoms, whenever possible test for common causes of respiratory illness (e.g., influenza, RSV), and if negative, a test for COVID-19 may be considered. COVID-19 testing is typically not indicated for patients without an exposure risk who have mild respiratory illness or who are asymptomatic.

The WSLH and MHDL will continue to offer fee-exempt COVID-19 testing. Clinicians may send specimens for testing at either commercial or public health laboratories. Testing conducted at commercial labs is *not* fee-exempt and public health agencies do not have funding streams to pay for COVID-19 testing at commercial labs. We anticipate that many health systems will choose to submit samples through these routes.

## Reporting Guidance for COVID-19

While prior approval for COVID-19 testing is no longer required, COVID-19 is a category I reportable condition in Wisconsin, which means information about suspected and confirmed cases must be reported to local public health departments. We are asking all health care providers submitting specimens for COVID-19 testing to report the suspect case to public health while the test is pending.

Reporting options for health care providers using submitting specimens for COVID-19 testing are as follows:

1. **Recommended option.** Once COVID-19 testing is ordered: 1) Submit a web report to WEDSS for a suspected case of Coronavirus, novel 2019 (COVID-19); AND 2) complete the patient information form, and upload the completed PUI form to the WEDSS case file cabinet; OR
2. Once COVID-19 testing is ordered: 1) Submit a web report to WEDSS; AND 2) if unable to upload the completed patient information form to the WEDSS file cabinet, fax the PUI form to the patient's local health department; OR
3. Once COVID-19 testing is ordered: If a facility is unable to submit a web report to WEDSS, complete the patient information form and call the patient's local health department to notify them of the pending testing and make arrangements to share the PUI form and demographic information with local public health. **It will be the responsibility of the local health department to enter these suspect cases with pending testing into WEDSS as Coronavirus, novel 2019 (COVID-19) Disease Incidents (New / Suspect).**

In addition, DHS and WSLH are working with commercial laboratories that are bringing on COVID-19 testing, as they are identified. This includes, where possible, making sure these labs can electronically report results to WEDSS. In this phase of the response, we are asking laboratories to report both positive and negative COVID-19 results to public health. This policy may change in the future. We also are working with these labs including local clinical laboratories to make sure COVID-19 positive-specimens from Wisconsin residents are forwarded to the WSLH or MHDH for confirmation, who will coordinate additional confirmation and reporting to CDC per recommended guidelines.

### **Information about Isolation of Symptomatic Individuals and Quarantine of Individuals Potentially Exposed to COVID-19**

The guiding principle for preventing the spread of COVID-19 in communities is minimizing close contact between infected individuals and susceptible, uninfected people. [Guidance for evaluating persons with potential exposure to COVID-19](#) was updated by the CDC on March 7, 2020. Although this interim guidance was developed for communities without known widespread transmission of COVID-19, and is subject to change based on the evolving epidemic, the following key points remain relevant at this time in all Wisconsin communities:

- Asymptomatic persons considered to have high risk exposure to COVID-19 (e.g. living in the same household as a laboratory-confirmed case) are recommended to be quarantined, either voluntarily or under public health orders, for a period of 14 days. *Symptomatic* individuals with this level of risk should be placed in immediate isolation, with diagnostic evaluation guided by CDC's PUI definition.
- Individuals in the medium risk exposure category (travel to an area with known sustained community transmission, or close contact with a laboratory confirmed case), are recommended to remain at home and practice social distancing and monitor themselves for symptoms for 14 days. Symptomatic individuals who are tested for COVID-19 should continue self-isolation (if at home) or appropriate isolation within health care settings for the full observation period.
- Individuals considered at low risk for exposure to COVID-19 (e.g. being in the same indoor environment as a confirmed case without meeting the definition of close contact) do not need to restrict movement or contact with others. Low risk individuals may be tested for COVID-19 at the discretion of their medical provider, and should be isolated while the test is pending. If COVID-19 testing is negative, providers should recommend usual infection control measures for patients with respiratory infections, but prolonged isolation is not required.

### **Contacts**

Please contact [DHSResponse@wi.gov](mailto:DHSResponse@wi.gov) with questions about the COVID-19 response. A team of DHS staff is monitoring the inbox. We will use the incoming questions to update our FAQs and guidance.

For specific questions about considerations for testing, or to discuss a particular case during business hours, please call 608-267-9003 and leave a message or send an email to [DHSDPHBCD@wi.gov](mailto:DHSDPHBCD@wi.gov). For after-hours assistance, call 608-258-0099.



Date: March 13, 2020

BCD 2020-08

To: Wisconsin Local Health Officers, Tribal Health Officials, Infection Prevention Staff, and Health Care Providers

From: Ryan Westergaard, MD, PhD, MPH  
Chief Medical Officer and State Epidemiologist for Communicable Diseases

**Public Health Guidance for Discontinuation of Home Isolation and Voluntary Home Quarantine for Individuals Infected with or Exposed to COVID-19**

**PLEASE DISTRIBUTE WIDELY**

**Summary**

COVID-19 is now a global pandemic caused by a transmissible respiratory virus, SARS-Cov-2. Because it is a novel pathogen, limited information is available to characterize the spectrum of clinical illness, transmission efficiency, and the duration of viral shedding for patients with COVID-19. To promote consistent practices based on the best available information, DHS is providing recommendations for health departments and clinical partners related to decisions about discontinuing isolation and quarantine. These guidelines are based on preliminary research related to the duration of viral shedding in infected persons, and review of practices by health departments in other jurisdictions.

**Definitions**

**Isolation** means the separation of a person or group of people known or reasonably believed to be infected with a communicable disease, and potentially infectious, from those who are not infected, in order to prevent spread of the communicable disease.

**Quarantine** means the separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic, from others who have not been so exposed, to prevent the possible spread of the communicable disease.

**Recommendations**

For patients diagnosed with COVID-19 who are recovering in a home (non-hospital) setting, **isolation may be discontinued** when **both** of the following have occurred:

1. The patient is free of fever, productive cough and other acute symptoms of respiratory infection for 72 hours.

AND

2. 14 days has elapsed from the day the patient first experienced symptoms.

Asymptomatic contacts of a confirmed COVID-19 case, with medium or high risk exposure, may be **released from quarantine** 14 days after the last time they were in close contact or shared an indoor living environment with a person with confirmed COVID-19. For people living in the same home, Day 1 of their quarantine would be the day after the case-patient is free of fever, productive cough, and other acute symptoms of respiratory infection.

### **How long should patients be isolated after they are tested for COVID-19?**

Patients who are tested for COVID-19 because there is clinical suspicion, but who do not have known or suspected exposure to SARS-CoV-2 should be in appropriate isolation while the test is pending, but do not require prolonged isolation if the test for COVID-19 is negative. They can return to their normal activities, be mindful of sign and symptoms, and continue to practice good hygiene, consistent with recommendation for all respiratory infections.

Symptomatic patients who are tested and are medium or high risk contacts of a COVID-19 case, or have traveled from a country with a level 3 travel health notice or a U.S. state with community transmission, should remain in isolation for **at least** 14 days after their last exposure (or last date in the affected country/state), **even if their COVID-19 test is negative**. Separation of individuals with exposure to COVID-19 for 14 days is recommended, regardless of if the individual is symptomatic, or if they have respiratory symptoms from any cause.

### **Contacts**

Please contact [DHSResponse@dhs.wisconsin.gov](mailto:DHSResponse@dhs.wisconsin.gov) with questions about the COVID-19 response. A team of DHS staff is monitoring the inbox. We will use the incoming questions to update our FAQs and guidance.

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# COVID-19

## (Coronavirus Disease 2019)



**COVID-19 (Coronavirus Disease 2019) is a respiratory illness that can spread from person-to-person. The virus that causes COVID-19 is a new form of coronavirus that was first found in people in December, 2019. It has the potential to cause severe illness in some people.**



### How is it spread?

- ▶ People with COVID-19 can spread it to others when they cough or sneeze. The virus is found in droplets from the throat and nose. When someone coughs or sneezes, other people near them can breathe in those droplets.
- ▶ The virus can also spread when someone touches an object with the virus on it. If that person then uses their hands to touch their face, mouth, or eyes, the virus can make them sick.



### What are the signs and symptoms?

- ▶ Fever
- ▶ Cough
- ▶ Shortness of breath



### How can it be prevented?

- ▶ Wash your hands often with soap and water. Use hand sanitizer if you do not have soap and water.
- ▶ Cover your nose and mouth when you cough or sneeze, and then throw the tissue away. If you do not have a tissue, cough or sneeze into your sleeve.
- ▶ Do not have close contact with people who are sick and stay home if you are feeling sick.
- ▶ Clean and disinfect surfaces thoroughly.



### What should I do if I have symptoms?

#### Call your doctor if:

- ▶ You have been to an [affected country](#)\* in the past two weeks or have had close contact with someone who has a confirmed COVID-19 infection. *\*Visit [cdc.gov](https://www.cdc.gov) to learn which countries are affected*
- AND**
- ▶ You have symptoms of fever, cough, or shortness of breath.

