

Guidance document for COVID-19 (SARS-CoV-2) evaluation in immunocompromised patients

This guidance applies to significantly immunocompromised patients such bone marrow transplant, solid organ transplant, poorly-controlled HIV, and other forms of severe immunosuppression. Patients with these underlying conditions may present atypically with COVID-19 and may shed virus for prolonged periods of time.

- Testing on admission: Asymptomatic patients should not be tested with rare exceptions as noted below. We generally recommend testing in the following situations.
 - Fever AND respiratory symptoms
 - Respiratory symptoms (particularly cough or unexplained shortness of breath)
 - Patients with fever alone can be considered for testing if no other etiology is present
- Test can be ordered by anyone meeting criteria (without ID or Infection Control consult)
 - Order is NECOV19 Isolation panel (aka COVID)
 - Panel = test and isolation precautions
 - Order simultaneously with other work-up, including RPP
- All admitted patients undergoing testing must go to COVID unit until “ruled out”
 - Primary and consulting teams should provide guidance on management
 - Consultation of the appropriate medical (oncology), surgical (transplant), and ID team is encouraged.
 - Typically, patients in COVID unit will only be physically seen by primary hospitalist or ICU team to preserve PPE.
 - Decision to transfer out of unit and remove isolation will be made by Infection Control and COVID team based on testing results and clinical suspicion for disease (see testing guidance)
- Other situations
 - Pre-transplant COVID-19 screening should be completed PRIOR to scheduled admission or transplant procedure. This testing, which would be on asymptomatic individuals will only be allowed by the appropriate ID consulting service.
 - Decisions for testing in patients already hospitalized should be made on an individual basis, depending on clinical suspicion, likelihood of an alternative explanation and other risk factors. If testing is being considered, strongly recommend consultation of appropriate ID service for evaluation.