



MAKING SENSE OF COVID19 TEST RESULTS: INFORMATION FOR CARE HOMES REGARDING PATIENTS DISCHARGED BACK WHO HAVE HAD COVID19

Many care home staff may be worried when their care home is asked to take individuals being discharged from hospital after they have had a COVID19 infection. Care home staff may be understandably fearful that this could introduce infection in their home. The results of tests for COVID19 can also be very confusing. This purpose of this document is to try and give staff the latest information about what we know. This information is based on national guidance and advice from experts at Public Health England, the local acute NHS hospital trusts and CCGs.

- **What is the test used for COVID19?**

People are tested for COVID19 using a special test call PCR (polymerase chain reaction). This involves a swab sample taken from the patient's nose or throat. The sample is then processed to look for fragments of the virus's genetic material (RNA). This is a sensitive test and if even very small amounts of these virus fragments are present in a patient's nose or throat the test will detect that. The test does not tell you if the virus is "viable" (i.e. "live" and can spread and cause other infections) or "not viable" (in other words "dead" and cannot be passed on to others). A positive test can only tell us that viral genetic material has been found.

- **What does the test result mean?**

What the test result means depends on the stage of the COVID19 infection.

Test results early in the infection:

Early in the infection means the 14 days following the onset of symptoms (or the first positive test, if the person has no symptoms).

A POSITIVE test at this time means a person most likely has an active COVID19 infection.

A NEGATIVE test most likely means they do not have COVID19 infection.

Test results later on in the infection:

This means more than 14 days after the onset of symptoms (or the first positive test, if the person has no symptoms).

Studies have shown that a person with COVID19 sheds a lot of virus around the time when they first have symptoms. But, the amount of virus shed reduces after that. Most people with a mild to moderate infection recover and are no longer infectious after 8-9 days. This is why people with COVID19 in the community are asked to isolate for 10 days.

People admitted to hospital with COVID19 generally have a more severe infection. They may take longer to recover and to stop being infectious. For that reason they have to isolate for 14 days.

Most people will test NEGATIVE for the virus after they have recovered but some may shed virus fragments for much longer than that. Some studies have shown this can be up to 90 days. If you test those people, you will get a POSITIVE test result but this does not mean they are infectious!

Remember, all the test is detecting is fragments of the virus. Studies have shown that the virus detected in these people is dead. In other words, they are not shedding "live" virus that can cause infections. They cannot pass the virus on to other people.

It is for this reason that re-testing of patients beyond 14 days is not needed and is no longer recommended in national guidance from Public Health England.

- **So what does it mean for care home residents who have had the COVID19 infection?**

If the resident had symptoms, or a first positive test, that started more than 14 days ago and they have not had a fever for 48 hours without medication, they can safely be assumed not to be infectious any longer. They no longer need isolation and can be safely admitted to a care home. There is no need to re-test them for COVID19 before they are discharged from hospital.

If they have symptoms that started more than 14 days ago and still have a fever, get medical advice.

Be aware that for some people who have recovered from an infection, they may have a cough that lasts for many weeks afterwards. This is a side-effect of the infection. But they are not infectious and do not need to be isolated.

- **Are there any exceptions to this new guidance?**

There is evidence that people with a weakened immune system may shed "live" virus for more than 14 days and could pass the infection on to others. Anyone with a weak immune system will still be tested for COVID19 before discharge to a care home. If the PCR test is still positive guidance will be provided by Infection Control specialists at the hospital and in the community regarding when and where it is safe to discharge that person.

If someone develops symptoms suggestive of a new COVID19 infection, such as a new cough, fever or change to/loss of taste and/or smell, they should also be tested for COVID19, even if they had the infection in the last 90 days.

- **Who can I contact if I still have questions?**

If the care home where you work is in the Vale of York or Scarborough & Ryedale CCG area you can contact the North Yorkshire Community IPC team on 01423 557340 (9am to 5pm, Monday to Friday).

If the care home where you work is in the Hull or East Riding CCG area you can email eryccg.covidcarehomes@nhs.net. This account is checked 8.30am to 6.30pm Monday to Friday.

- **References**

Public Health England. Guidance for stepdown of infection control precautions and discharging COVID-19 patients. Updated 18 Dec 2020. Available at: <https://www.gov.uk/government/publications/covid-19-guidance-for-stepdown-of-infection-control-precautions-within-hospitals-and-discharging-covid-19-patients-from-hospital-to-home-settings/guidance-for-stepdown-of-infection-control-precautions-and-discharging-covid-19-patients> [last accessed 5 Jan 21]

This document is based on one that was originally written by Dr Andrew Lee, Consultant in Communicable Disease Control for PHE Yorkshire & the Humber.

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