Does the patient have symptoms* consistent with COVID-19?

**YES**
- Test using PCR†
  - Indicates no active infection
  - Follow situation-specific infection prevention measures
  - Negative test does not rule out the potential for future infection

**NO**

**TEST POSITIVE**
- Indicates current infection
- Report to VDH Morbidity Report
- Patient should self-isolate and close contacts should self-quarantine until no longer infectious
- If admitted to a healthcare facility, use transmission-based precautions
- Follow situation-specific patient management (e.g., delay major surgeries, if possible)

**TEST NEGATIVE**
- Indicates no active infection
- Recommend self-isolation based on exposure and symptoms§
- Consider re-testing and notify VDH if suspicion of COVID-19 still exists, despite negative COVID-19 test
- Advise patient to follow protective measures in place in the community

**TEST POSITIVE**
- Consider testing using PCR† (ideally test 5-7 days after exposure)

**TEST NEGATIVE**
- Indicates no active infection
- Patient should remain in quarantine for 14 days after the last date of exposure until indicated§

**If any of these describe the patient:**
- Pregnant and presenting in labor
- Neonates born to women with confirmed or suspected COVID-19
- Undergoing aerosol-generating procedures with limited PPE at the facility (if testing, test within 48 hours of procedure)
- Undergoing major time-sensitive surgeries (if testing, test within 48 hours of surgery)
- Immunocompromised person being admitted to the hospital
- Undergoing immunosuppressive procedures

**If this describes the patient:**
- A close contact‡ of a person with lab-confirmed COVID-19 (including exposed healthcare personnel)

**If this describes the patient:**
- A resident or staff of a congregate setting
  - See specific congregate setting guidance (LTCF, correctional facility, etc.)

**Any other asymptomatic person**
- Diagnostic testing is likely not indicated
- Recommendations are based on CDC guidance and *Infectious Diseases Society of America Guidelines on the Diagnosis of COVID-19*

* COVID-19 patients may present with typical symptoms of cough, shortness of breath, fever, chills, muscle pain, sore throat, or new loss of taste or smell. Atypical presentations have been described. Older adults and persons with medical comorbidities may have delayed presentation of fever and respiratory symptoms and older persons may have delirium or falls. Some persons with COVID-19 have experienced gastrointestinal symptoms such as nausea, vomiting, or diarrhea. Children have similar symptoms as adults and generally have milder illness. Multisystem Inflammatory Syndrome in Children (MIS-C) has been described in patients aged <21 years.

† For known specimen collection locations in Virginia, see here. Serology testing can be used for public health surveillance or research purposes, but is not recommended for diagnosing active COVID-19 infection or making decisions about returning to work. Antigen tests have a limited interpretation; negative antigen tests should be confirmed with a PCR test.

§ If the person had a known exposure to someone with COVID-19, the person should continue to self-quarantine until 14 days after the last known exposure. If the person did not have a known exposure to someone with COVID-19, the person should self-isolate until at least 24 hours after symptoms resolve (if symptomatic) or follow protective measures in place in the community (if asymptomatic).

‡ For COVID-19, a close contact is defined by CDC as any individual who was within 6 feet of an infected person for at least 15 minutes starting from 48 hours before illness onset (or, for asymptomatic patients, 2 days prior to positive specimen collection) until the time the patient is isolated. Data is insufficient to precisely define the duration of exposure that constitutes prolonged exposure and thus a close contact.