Lab Approval No Longer Required for COVID-19 Testing
Update to York Region health care providers as of February 12, 2020

As of February 10, 2020, the Public Health Ontario Laboratory (PHOL) no longer requires physicians to phone PHOL for approval when testing for COVID-19 (formerly referred to as novel coronavirus or 2019-nCoV). PHOL will accept samples for COVID-19 testing for individuals that meet the criteria for a Person Under Investigation, as per the Ministry's case definition (updated on February 7, found here: http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/2019_guidance.aspx).

Clinical presentations that do not fit case definition, but are considered by the physician at being at risk of COVID-19 infection, will also be accepted for testing.

Please note, case definitions are subject to change and clinicians should regularly check the Ministry website for up-to-date information.

In order to expedite testing, pre-approval for COVID-19 testing is no longer required, provided **that the following mandatory information is included on the requisition**:

1. Whether the individual meets criteria for a person under investigation (yes/no)
2. Travel history (country and dates)
3. Whether the individual was in contact with a confirmed or probable case (yes/no); if no, other sick contacts (yes/no; if yes, describe)
4. Symptom onset date
5. Patient symptoms (fever, cough, shortness of breath, pneumonia)
6. Patient setting (ICU, hospitalized, ED or outpatient)

When requesting testing, include this mandatory information on the **PHO COVID-19 (2019-nCoV) Test Requisition** form. A copy of this form follows this message. Collect two specimens: nasopharyngeal swab and throat swab. For more information on testing, visit the PHOL site here: https://www.publichealthontario.ca/en/laboratory-services/test-information-index/wuhan-novel-coronavirus

Important reminders when testing for COVID-19:

- Remember that COVID-19 is a reportable disease so any suspect cases must be reported to York Region Public Health. Hospitals should continue notifying Public Health upon collection of specimens.

- **For those working outside of a hospital setting, contact York Region Public Health before any specimen is collected for COVID-19.** If you suspect a case of COVID-19 in your practice, call public health immediately (before testing) at **1-877-464-9675 ext. 73588** (Monday to Friday: 8:30 a.m. to 4:30 p.m.) or **905-953-6478** after hours (before 8:30 a.m. and after 4:30 p.m. Monday to Friday and 24 hours per day on weekends/holidays). Public health can provide guidance on how to safely proceed with testing, and closely monitors persons under investigation for COVID-19.

- Remember that guidance for hospitals and acute care settings can be found at the Ministry's website for health care providers and at york.ca/healthprofessionals

York Region

- Currently, testing is limited to individuals who are ill and have had recent travel to mainland China (including Hubei province) or are close contacts (e.g., household members) of an ill person who has traveled to mainland China (including Hubei province).
- Advice around self-isolation can also be found on york.ca/healthprofessionals. Providers are requested to familiarize themselves with this guidance so you can help reinforce public health messaging to your clients.

Visit **york.ca/healthprofessionals** for the latest information on COVID-19, including a link to the Ministry of Health's case definition, guidance on self-isolation and additional resources to help your practice.

Public Health Ontario | Santé publique Ontario

2019-nCoV (Novel coronavirus) Test Requisition

ALL Sections of this form must be completed at every visit

1 - Submitter

Name
Address
City & Province
Postal Code

Submitter lab no. number (if applicable):

Clinician initial / Surname and OHIP / CPSO Number

Telephone: (###) ###-####   Fax: (###) ###-####

cc Doctor/Qualified Health Care Provider information

Name:

Lab/Clinic Name:

CPSO Number:

Telephone: (###) ###-####   Fax: (###) ###-####

Address: Postal Code:

2 - Patient Information

Health Card No.:   Medical Record No.:

Last Name:

First Name:

Date of Birth: yyyy / mm / dd   Sex: M   F

Address:

Postal Code: Patient Phone No.:
(###) ###-####

3 - Risk Factors and Travel (mandatory)

Travel to:

Date of Travel: yyyy / mm / dd   Date of Return: yyyy / mm / dd

Date of Symptom Onset: yyyy / mm / dd

4 - Sick Contact Information (if applicable)

Origin of Contact:

Date of Return: yyyy / mm / dd   Date of Onset: yyyy / mm / dd

5 - Test(s) Requested

2019-nCoV (Novel Coronavirus)

To the best of your knowledge, does this patient meet the Provincial Case Definition of PUI?   Yes   No

6 - Specimens Collect Each (check all that apply)

Mandatory:	If possible/ if warranted:
NPS in UTM	BAL
and	or
Throat Swab in UTM	Sputum

7 - Patient Setting

ER / Inpatient	Community Practice

8 - Patient Symptoms

Fever   (Temperature if known):

Cough

Sore Throat

Pneumonia

Other (specify):

9 - Will the Patient Be Hospitalized?

Yes   No

Ontario