

Delta Health
Policies & Procedures – COVID-19

COVID TESTING POLICY FOR FULLY VACCINATED PERSONS
OR THOSE WHO HAVE HAD DOCUMENTED COVID INFECTION <90 Days AGO

This policy supersedes previous testing guidelines described in [COV.053](#) and [COV.045](#) only when patients are fully vaccinated (2 weeks out from completion of the needed vaccine series) OR have had documented COVID infection <90 days ago.

PREOPERATIVE Testing:

- Preoperative testing will no longer be required for patients who are fully vaccinated (ie >2 weeks out from completion of Pfizer OR Moderna 2 dose vaccine series OR Johnson/Johnson single dose vaccine).
- Patients should be instructed to bring documentation of their vaccination status to their surgery, and with this documentation can opt out of the preoperative COVID testing.
- Patients who are <90 days out from a documented COVID infection (i.e. a positive test by antigen, POC, OR PCR testing) do not need a preoperative COVID test. Elective surgeries should generally proceed around 30 days after the onset of a documented COVID infection to ensure the patient is no longer infectious. There are some reports of increased morbidity among surgeries post COVID infection; timing of elective surgeries must proceed according to the surgeon's discretion and in all cases should be delayed until the patient is completely recovered from their COVID infection.
- All other patients must continue to receive a preoperative test for COVID according to the previous protocol.
- Universal symptom screening will continue according to be the previous protocol.

ADMISSION Testing:

- Admission testing is no longer needed for patients who are fully vaccinated OR have had a documented COVID infection <90 days ago, unless the clinical picture is compelling for possible COVID reinfection.
- COVID + patients admitted OR readmitted prior to the completion of their quarantine period should be assumed infectious and appropriate infection precautions taken.
- If a patient is unsure of their vaccination status OR whether/when they had a documented COVID infection, then pre admission testing should be done according to the previous protocol.

RATIONALE for Use of the Post COVID 90 Day Interval for Retesting:

- According to the CDC, for adults recovered from SARS-CoV-2 infection, a positive SARS-CoV-2 RT-PCR result without new symptoms during the 90 days after illness onset more likely represents persistent shedding of viral RNA than reinfection.
- If such an adult remains asymptomatic during this 90-day period, then any viral retesting is unlikely to yield useful information, even if the adult had close contact with an infected person.

- If such an adult becomes symptomatic during this 90-day period, and an evaluation fails to identify a diagnosis other than SARS-CoV-2 infection (e.g., influenza), then the adult likely warrants evaluation for SARS-CoV-2 reinfection.
- Reinfection with COVID is infrequent and uncommon <90 days out. The probability of reinfection increases over time post infection, likely between waning immunity and increasing risk of exposure to variants. This policy may well change as the prevalence of variants increases in our community.

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