

Risk Groups to be Approved for COVID-19 Testing by DHSS

Risk Group	Clinical Features	Definitions and Further Information
Symptomatic close contacts to a suspect COVID-19 patient with pending laboratory testing or laboratory-confirmed COVID-19 patient	Fever ¹ or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	Close contact is defined as— a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case – <i>or</i> – b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on) If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are met.
Symptomatic residents of congregate living facilities whose residents are at higher risk for poor outcomes	Fever ¹ and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)	Those at higher risk for poor outcomes can include older adults and individuals with chronic medical conditions and/or an immunocompromised state (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease).
Symptomatic hospitalized patients who have signs and symptoms compatible with COVID-19	Fever ¹ and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)	Testing for these individuals should be used to inform decisions regarding infection control.

¹Fever may be subjective or confirmed