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**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Helping people. It's who we are and what we do.



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Effective: August 4, 2021

**STANDING ORDER FOR COVID-19 TESTING SARS-COV-2 (COVID-19)
LOCATIONS LABORATORY TEST: SARS-CoV-2 RT-PCR**

Purpose:

This standing order is issued by the Nevada Division of Public and Behavioral Health, Department of Health Services. This standing order authorizes any medical provider/trained personnel at a medically supervised COVID-19 testing unit in the State of Nevada to collect and send a SARS-CoV-2 RT-PCR test for any individual in accordance with NRS 652.210 with the conditions of this order.

Standing Orders Authorization: This standing order is issued pursuant to the Governor's Declaration of State of Emergency on March 12, 2020, pursuant to Nevada Revised Statutes, Chapter 414, which directs state agencies to "save lives, protect property, and protect the health and safety of persons in this state."

The results of such tests shall constitute protected health information and may be disclosed, only as authorized by law. All test results shall be shared in accordance with the State's mandated laboratory reporting laws, as noted below.

PATIENT ELIGIBILITY

The following criteria are required for medical provider/trained personnel at a testing unit to collect a SARS-CoV-2 RT-PCR test by this standing order:

Individual who is concerned that he or she has been exposed to and infected with COVID-19

AND

Individual who has signed a consent and voluntary isolation agreement (or parent/guardian, if patient cannot legally consent).

PLAN OF CARE

Medical provider/trained personnel operating at a testing unit may collect any of the below and order a SARS-CoV-2 RT-PCR. Confirm with the laboratory you plan on utilizing to process your specimens, what specimens they will accept before collection.

Nasopharyngeal specimen (NP) collection /Oropharyngeal (OP) (throat) specimen collection (performed by a trained healthcare provider, only);

Nasal mid-turbinate (NMT) specimen (performed by a healthcare provider or the patient after reviewing and following collection instructions);

Anterior nasal specimen (performed by a healthcare provider or the patient after reviewing and following the collection instructions);

Nasopharyngeal wash/aspirate or nasal wash/aspirate (performed by a trained healthcare provider);

Saliva (collected by patient with or without supervision).

PREPARATION TO COLLECT SPECIMENS:

1. Ensure correct testing materials: Use the test collection device that has been authorized by the laboratory where the specimen will be sent in accordance with the test system that the laboratory will be using for COVID analysis.
2. Ensure appropriate personal protective equipment (PPE) for medical provider: gloves, gowns, surgical mask (or respirator) and eye protection (goggles or face shield).

INSTRUCTIONS FOR COLLECTING SPECIMENS:

NP specimen (performed by a trained healthcare provider):

Tilt patient's head back 70 degrees.

Gently and slowly insert a minitip swab with a flexible shaft (wire or plastic) through the nostril parallel to the palate (not upwards) until resistance is encountered or the distance is equivalent to that from the ear to the nostril of the patient, indicating contact with the nasopharynx.

Gently rub and roll the swab.

Leave swab in place for several seconds to absorb secretions.

Slowly remove swab while rotating it. Specimens can be collected from both sides using the same swab, but it is not necessary to collect specimens from both sides if the minitip is saturated with fluid from the first collection.

If a deviated septum or blockage create difficulty in obtaining the specimen from one nostril, use the same swab to obtain the specimen from the other nostril.

Place swab, tip first, into the sterile viral transport media tube provided.

Instructions for collecting an OP specimen (performed by a trained healthcare provider):

Insert swab into the posterior pharynx and tonsillar areas.

Rub swab over both tonsillar pillars and posterior oropharynx and avoid touching the tongue, teeth, and gums.

Place swab, tip first, into the sterile viral transport media tube provided.

Nasal mid-turbinate (NMT) specimen (performed by a healthcare provider or the patient after reviewing and following collection instructions):

Use a tapered swab.

Tilt patient's head back 70 degrees.

While gently rotating the swab, insert swab less than one inch (about 2 cm) into nostril parallel to the palate (not upwards) until resistance is met at turbinates.

Rotate the swab several times against nasal wall and repeat in other nostril using the same swab.

Place swab, tip first, into the sterile viral transport media tube provided.

Anterior nasal specimen (performed by a healthcare provider or the patient after reviewing and following the collection instructions):

Insert the entire collection tip of the swab provided (usually $\frac{1}{2}$ to $\frac{3}{4}$ of an inch, or 1 to 1.5 cm) inside the nostril.

Firmly sample the nasal wall by rotating the swab in a circular path against the nasal wall at least 4 times.

Take approximately 15 seconds to collect the specimen. Be sure to collect any nasal drainage that may be present on the swab.

Repeat in the other nostril using the same swab.

Place swab, tip first, into the sterile viral transport media tube provided.

Nasopharyngeal wash/aspirate or nasal wash/aspirate (performed by a trained healthcare provider):

Attach catheter to suction apparatus.

Tilt patient's head back 70 degrees.

Instill 1 mL-1.5 mL of non-bacteriostatic saline (pH 7.0) into one nostril.

Insert the tubing into the nostril parallel to the palate (not upwards). Catheter should reach depth equal to distance from nostrils to outer opening of ear.

Begin gentle suction/aspiration and remove catheter while rotating it gently.

Place specimen in a sterile viral transport media tube.

Saliva (collected by patient with or without supervision):

Collect 1-5 mL of saliva in a sterile, leak-proof screw cap container. No preservative is required. Follow additional instructions from the healthcare provider or manufacturer.

INSTRUCTIONS TO PROCESS CLINICAL SPECIMENS:

1. Store specimens based on the laboratory's instructions of where the specimen will be sent and in accordance with the test system that the laboratory will be using for COVID analysis.
2. Process specimens in accordance with national biological safety regulations, procedures as listed under the CDC Emergency Authorization Agreement, and the supervising Nevada healthcare facility.

FOLLOW-UP AND REPORTING REQUIREMENTS

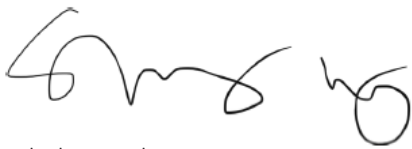
1. Test results should be reported to the patient within one week of the testing unit's receipt of the test result.

2. A positive result requires continued in-home isolation per local health department recommendations.
3. All COVID-19 laboratory test results are **required to be reported** to the Division of Public and Behavioral Health (DPBH) and Local Health District/Department (Southern Nevada Health District, Washoe County Health District, and Carson City Health and Human Services) as required under NRS 441A.120 and NAC 441A.108, subsection 2, c.

NAC 441A.085 "Extraordinary occurrence of illness" defined. ([NRS 441A.120](#)) "Extraordinary occurrence of illness" means: 1. A disease which is not endemic to this State, is unlikely but has the potential to be introduced into this State, is readily transmitted and is likely to be fatal, including, but not limited to, typhus fever. 2. An outbreak of a communicable disease which is a risk to the public health because it may affect large numbers of persons or because the illness is a newly described communicable disease, including, but not limited to: (a) An outbreak of an illness related to a contaminated medical device or product. (b) An outbreak of an illness suspected to be related to environmental contamination by any infectious or toxic agent. (c) An outbreak of a newly emerging disease, including, but not limited to, avian influenza. 3. A case of an illness that is known or suspected to be related to an act of intentional transmission or biological terrorism.

Please note this must be reported immediately for confirmed cases and for suspect cases that are still awaiting laboratory confirmation.

4. All providers of healthcare, healthcare facilities, and medical laboratories **must report all suspect, probable and confirmed cases of COVID-19 and all laboratory test results** by using Nevada's Confidential Morbidity Report Form, located online: [http://dpbh.nv.gov/Programs/OPHIE/Public Health Informatics and Epidemiology - Home/](http://dpbh.nv.gov/Programs/OPHIE/Public_Health_Informatics_and_Epidemiology_-_Home/)



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