

Emergency measures to conserve laboratory supplies, workforce 19/3/20

In order to rapidly upscale testing and maintain capacity to test for SARS-CoV-2 the community and hospital laboratories need to take emergency measures.

These include:

1. RESTRICTING TESTING THAT REQUIRE COPAN SWABS

As of immediate effect, laboratories will no longer perform routine testing of viral swabs from the community (with the exception of SARS-CoV-2).

This restriction applies to HSV/VZV, and viral eye swabs.

We recognise that testing may be necessary for some special populations e.g. in pregnancy and the immunocompromised. In order for testing of these groups to proceed **we require appropriate clinical details**, otherwise samples will be stored and rejected.

2. RESTRICTING LOW VALUE TESTS IN ORDER TO MOBILISE THE LABORATORY WORKFORCE

There are a number of tests of low clinical value performed in the community setting that we need to immediately restrict in order to free up our scientists to cross-cover and utilise their molecular skills. These include, but are not restricted to:

Test	Clinical details required for testing
Bacterial throat swabs for the diagnosis of GAS pharyngitis	Epidemiological risk RhF (ethnicity, living situation, past RhF, family history RhF)
Ear swabs for otitis externa	Clinical presentation with malignant otitis externa
Routine bacterial sputum culture	Infective exacerbation of COPD not responding to first line antibiotics or pneumonia, or CF / bronchiectasis patients
Toe and finger nail clippings for fungal microscopy +/- culture	Failure of empiric therapy
Faeces for PCR / culture for gastroenteritis	History of bloody stools, risk factors for C. difficile, part of public health outbreak investigation
Wound swabs	Failure of empiric therapy
Urines	Symptoms of infections, pregnancy, pre-uro/gynae surgery where bladder epithelium breached

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