# Immunosuppressed Patient COVID-19 and Respiratory Viral Testing Guidelines

<table>
<thead>
<tr>
<th>Clinical Criteria</th>
<th>COVID-19 Test?</th>
<th>Rapid Flu/ RSV or Extended Respiratory Viral PCR Test?</th>
<th>Infection Control Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Fever or Respiratory symptoms</td>
<td>No</td>
<td>No</td>
<td>Standard Precautions</td>
</tr>
<tr>
<td>Fever WITHOUT respiratory symptoms</td>
<td>No</td>
<td>No</td>
<td>Standard Precautions</td>
</tr>
<tr>
<td>Yes for Solid Organ Transplant patients <em>Unless another source of fever identified/known</em></td>
<td>No</td>
<td>No</td>
<td>*Solid organ transplant patients with fever should be placed in Droplet/Contact Precautions if COVID-19 is being considered</td>
</tr>
</tbody>
</table>

| Respiratory symptoms WITH OR WITHOUT fever | YES –  
• High Risk Oncology Patients †  
• All Solid Organ Transplant Patients  
• Other Immunosuppressed Patients ‡  
• Increased Risk Due to Medical Comorbidities § | YES – Extended Respiratory Viral PCR Test  
• High Risk Oncology Patients †  
• Lung Transplant Patients  
Rapid Influenza/RSV Testing Only –  
• Other Solid Organ Transplant Patients  
• Other Immunosuppressed Patients ‡  
• Increased Risk Due to Medical Comorbidities § | Mask patient and place in private room  
Droplet/ Contact Precautions |

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* Respiratory symptoms: cough, shortness of breath, wheezing or chest tightness, sore throat. Consider excluding symptoms attributable to allergies.
† High Risk Oncology Patients: All transplant and immunotherapy, all hematologic malignancy, all active chemotherapy, neutropenia (ANC <500)  
‡ Other immunosuppressed: Biologic agents for immunosuppression, steroids >0.5mg/kg/day prednisone equivalent, congenital or acquired immunodeficiency  
§ Medical comorbidities: Age >60, diabetes, CKD, pregnancy, lung cancer, chronic lung disease, cirrhosis

*Updated March 12, 2020*  
*Adapted from the University of Washington*