Figure 1. IDSA Algorithm for SARS-CoV-2 Nucleic Acid Testing

Symptomatic Individuals***

- Suspicion for COVID-19 is high
  - Non-Hospitalized Patients
    - Lower respiratory tract symptoms
      - Known exposure
      - High prevalence area
    - Hospitalized Patients
  - Direct SARS-CoV2 nucleic acid amplification testing
    Nasopharyngeal, Anterior Nasal, Mid-turbinate, Saliva or Combined Nasal/Oropharyngeal over Oropharyngeal alone
    Provider-collected or self-collected specimens acceptable for different specimen types except nasopharyngeal
      - If negative, repeat testing
      - If negative, repeat testing (from lower tract if possible)
      - If negative, and high suspicion, repeat testing
      - If negative, do not repeat testing

Asymptomatic Individuals

- Suspicion for COVID-19 is low
  - Exposed and testing is available
  - Hospital admission, when prevalence in the community is high
  - Before solid organ or stem cell transplantation
  - Major time sensitive surgery
  - Time-sensitive aerosol generating procedures when PPE is limited and testing is available

*** Testing should be prioritized for symptomatic patients first. When resources are adequate, testing for selected asymptomatic individuals can also be considered.