

ELC ENHANCING DETECTION: WASHINGTON DC TESTING PLAN

2020 Overarching Jurisdictional SARS-COV-2 Testing Strategy

Jurisdiction:	Washington DC
Population Size:	705749

1. Describe the overarching testing strategy in your state or jurisdiction.

As of May 29th, approximately 37,881 residents of the District of Columbia have been tested for COVID-19. In addition to close contacts of all new positives, priority groups for testing include the following:

- Hospitalized patients and healthcare facility workers with COVID-19 symptoms of fever, cough, and shortness of breath. Many of the patients in this group are currently receiving testing within hospitals and through their health systems' occupational health programs.
- Patients in long-term care facilities with symptoms; patients over the age of 65 with symptoms; patients with underlying conditions such as diabetes, heart disease, lung disease who also have symptoms; and first responders with symptoms.
- Critical infrastructure workers with symptoms; individuals who do not meet any of the above categories but have symptoms; healthcare facility workers and first responders; and individuals in detention centers and individuals experiencing homelessness with symptoms.

DC Health in collaboration with the DC Public Health Laboratory is supporting COVID-19 testing in a myriad of ways. In addition to testing within hospitals, efforts have been directed toward standing up drive-thru testing sites, a mobile truck laboratory for skilled nursing facilities and group homes, and community mass screenings targeting the populations such as the homeless. DC Health has established a hotline(1-855-363-0333) to provide residents with assistance in locating available testing sites. Some of the current testing partners include: United Medical Center; UDC-CC; AllCare Family Medicine; Children's National Hospital; Kaiser Permanente; Capitol Hill Medical Center; CVS Pharmacy; George Washington Hospital; Howard University Hospital; and MedStar Health.

In addition to diagnostic testing, DC Health is collaborating with the DC Public Health Laboratory to work with health care providers in area in conducting a citywide sero-prevalence survey to understand the rates of exposure to COVID-19 in the District. The seroprevalence study is designed to test 5-10% of the Districts population to provide a clearer picture of the percentage of susceptible residents.

The DC Public Health Laboratory has supported drive-thru, walk-up, clinic sites, and mobile truck testing using a combination of RT-PCR testing platforms at the lab, Abbott ID Now, and the Cepheid GeneXpert. With the increased number of molecular testing being performed in the District the Public Health Laboratory is planning to purchase two more Cepheid Xpert 16 in June and a Hologic Panther in July. The Cepheid Xpert instruments will be used for overflow and high priority specimens, while the Hologic Panther will be used for mass sampling events. In addition to molecular based instruments, the DC Public Health Laboratory is looking to purchase an Abbott Alinity to perform serology testing in June and another one in July. This instrument has a lower cost per test kit and will allow staff to perform the same number of serology tests needed to meet the needs of the city.

ELC ENHANCING DETECTION: WASHINGTON DC TESTING PLAN

DC Health and the DC Public Health Laboratory are currently in the process of identifying additional staffing needs and the most efficient mechanisms for addressing such needs.

ELC ENHANCING DETECTION: WASHINGTON DC TESTING PLAN

Table #1a: Number of individuals planned to be tested, by month

BY MONTH:	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TOTAL
Diagnostics*	15,000	20,000							35,000
Serology		TBD							0
TOTAL	15,000	20,000	0	0	0	0	0	0	

Table #1b: Planned expansion of testing jurisdiction-wide

Name of testing entity	Testing venue (select from drop down)	Performing Lab (if different from testing entity)	Daily diagnostic throughput	Daily serologic throughput	Platforms or devices used (list all)	Specific at-risk populations targeted (list all)

ELC ENHANCING DETECTION: WASHINGTON DC TESTING PLAN

2020 Direct Expansion of SARS-COV-2 Testing by Health Departments

2. Describe your public health department's direct impact on testing expansion in your jurisdiction.

As of May 29th, approximately 37,881 residents of the District of Columbia have been tested for COVID-19. In addition to close contacts of all new positives, priority groups for testing include the following:

- Hospitalized patients and healthcare facility workers with COVID-19 symptoms of fever, cough, and shortness of breath. Many of the patients in this group are currently receiving testing within hospitals and through their health systems' occupational health programs.
- Patients in long-term care facilities with symptoms; patients over the age of 65 with symptoms; patients with underlying conditions such as diabetes, heart disease, lung disease who also have symptoms; and first responders with symptoms.
- Critical infrastructure workers with symptoms; individuals who do not meet any of the above categories but have symptoms; healthcare facility workers and first responders; and individuals in detention centers and individuals experiencing homelessness with symptoms.

DC Health in collaboration with the DC Public Health Laboratory is supporting COVID-19 testing in a myriad of ways. In addition to testing within hospitals, efforts have been directed toward standing up drive-thru testing sites, a mobile truck laboratory for skilled nursing facilities and group homes, and community mass screenings targeting the populations such as the homeless. DC Health has established a hotline(1-855-363-0333) to provide residents with assistance in locating available testing sites. Some of the current testing partners include: United Medical Center; UDC-CC; AllCare Family Medicine; Children's National Hospital; Kaiser Permanente; Capitol Hill Medical Center; CVS Pharmacy; George Washington Hospital; Howard University Hospital; and MedStar Health.

In addition to diagnostic testing, DC Health is collaborating with the DC Public Health Laboratory to work with health care providers in area in conducting a citywide sero-prevalence survey to understand the rates of exposure to COVID-19 in the District. The seroprevalence study is designed to test 5-10% of the Districts population to provide a clearer picture of the percentage of susceptible residents.

The DC Public Health Laboratory has supported drive-thru, walk-up, clinic sites, and mobile truck testing using a combination of RT-PCR testing platforms at the lab, Abbott ID Now, and the Cepheid GeneXpert. With the increased number of molecular testing being performed in the District the Public Health Laboratory is planning to purchase two more Cepheid Xpert 16 in June and a Hologic Panther in July. The Cepheid Xpert instruments will be used for overflow and high priority specimens, while the Hologic Panther will be used for mass sampling events. In addition to molecular based instruments, the DC Public Health Laboratory is looking to purchase an Abbott Alinity to perform serology testing in June and another one in July. This instrument has a lower cost per test kit and will allow staff to perform the same number of serology tests needed to meet the needs of the city. DC Health and the DC Public Health Laboratory are currently in the process of identifying additional staffing needs and the most efficient mechanisms for addressing such needs.

ELC ENHANCING DETECTION: WASHINGTON DC TESTING PLAN

Table #2: Planned expansion of testing driven by public health departments

BY MONTH:	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TOTAL
Number of additional* staff to meet planned testing levels	8	2							10
FOR DIAGNOSTIC TESTING									
How many additional* testing equipment/devices are needed to meet planned testing levels? (provide an estimated number, and include platform details in narrative above)	0	2							2
Volume of additional swabs needed to meet planned testing levels ⁺⁺	35,000	35,000							70,000
Volume of additional media (VTM, MTM, saline, etc.) needed to meet planned testing levels ⁺⁺	35,000	35,000							70,000

ELC ENHANCING DETECTION: WASHINGTON DC TESTING PLAN

BY MONTH:	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	TOTAL
Volume of additional reagents needed to meet planned testing levels, by testing unit and platform (i.e. 100K/day - Hologic panther; 100k/day - Thermofisher)	30,000/month - Hologic Panther; 4,500/month - Cepheid; 1,000/month - CDC 2019 nCoV	30,000/month - Hologic Panther; 4,500/month - Cepheid; 1,000/month - CDC 2019 nCoV							
FOR SEROLOGIC TESTING									
Number of additional* equipment and devices to meet planned testing levels	0	1							1
Volume of additional reagents needed to meet planned testing levels, by testing unit and platform (i.e. 100K/day - Hologic panther; 100k/day - Thermofisher)	10,000/month - Diasorin	5,000/month - Diasorin Liaison; 5,000/month Abbott Alinity							

* Report new monthly additions only, not cumulative levels

++ For May and June, only include needs beyond the supplies provided by FEMA. Report new monthly additions only, not cumulative levels.

ELC ENHANCING DETECTION: WASHINGTON DC TESTING PLAN