


 <p>PHILIPPINE HEART CENTER INCIDENT COMMAND POST</p>	Document Type	Document Code: GL-OED-ICP-041
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	GUIDELINES	
	GUIDELINES FOR RT-PCR GENEXPERT TESTING	

REVISION HISTORY

Rev No.	Review Date	Description of Change	Date of Next Review
01	September 12, 2020	<p>Title Change from Interim Guidelines for COVID-19 GeneXpert Testing to RT-PCR GeneXpert Testing.</p> <p>Expansion of GeneXpert Testing to all critically ill patients.</p> <p>Removed the use of RAT as a tool for room assignment decision making.</p> <p>Changed the validity of Genexpert test result from one week to the whole duration of continuous confinement.</p> <p>Added clinical assessment for patients on continuous confinement.</p> <p>Item 5: Change Acute Decompensated Heart Failure (ADHF) to All critically ill patients.</p> <p>Added item number 9, 10, 11 and 12</p>	September 2023
02	April 04, 2021	<p>Coverage of GeneXpert Testing Repeat GeneXpert testing upon admission</p> <p>Added 2.8 High Risk Exposure</p>	April 2024
03	February 02, 2022	<p>Removed RT PCR testing from COVID to NON-COVID unit, clearance for HCWs diagnosed with COVID-19</p> <p>RT-PCR Testing to cover all admissions instead of emergency admissions and procedures only.</p>	February 2025
04	August 29, 2022	Edited item number 2, 7 and 9	August 2025

Reviewed by:	 GERARDO S. MANZO, MD Incident Commander	Approved by:	 JOEL M. ABANILLA, MD Executive Director
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I. OBJECTIVE


This guideline shall ensure efficient use of the RT-PCR GeneXpert COVID-19 testing of Philippine Heart Center.

II. SCOPE

This guideline applies to all individuals availing the RT-PCR GeneXpert COVID-19 testing of Philippine Heart Center.

III. GUIDELINES

1. All GeneXpert testing should be cleared by the medical team of the COVID-19 Incident Command Post (ICP).
2. GeneXpert testing will be expanded to include:
 - 2.1 All admissions in both COVID and NON COVID Emergency Rooms
 - 2.2 All admissions in the admitting section including elective pre-surgery and pre-procedural patients (except for those classified as previous recovered).
 - 2.3 Repeat test for clinically suspected patients
 - 2.4 Symptomatic HCWs consulting in the Emergency Room
 - 2.5 Patients for surgery with more than 5 days swab result
 - 2.6 Unvaccinated patients who stayed in one unit for more than 5days and is for transfer to another unit
 - 2.7 OPD patients who will undergo procedures considered as Aerosol Generating Procedures
3. The Attending Physician shall request for the test. The test shall be charged to the patient.
4. The Fellow-in-Charge shall endorse the case of the patient to the ICP Medical Team.
5. The Nurse-in-Charge shall carry out and charge the procedure.
6. For elective cardiac catheterization, electrophysiologic studies, and cardiovascular surgical procedures, the following shall be followed:
 - 6.1 Only patients for procedure shall be accepted for testing. An official list shall be submitted to the Molecular laboratory by the chief fellow or clinical research fellow of the department or Division.
 - 6.2 The official list shall be signed by the CRF/chief fellow and an active consultant of the department or division. Changes to the list shall be allowed only if made by the chief fellow or CRF.
 - 6.3 Swabbing schedule shall be from Monday to Saturday from 9:00AM to 11:00AM. Official results shall be released officially within the day of testing.

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6.4 Timing of swabbing prior to the procedures shall be:

6.4.1.1.1 Cardiovascular surgery, Cardiac catheterization and EP studies – one day prior to the procedure or on the day of the procedure.

6.4.1.1.2 Out-Patient GeneXpert testing of Elective Pre-Operative and Pre-Procedure patients should be done before admission.

7. Repeat GeneXpert testing is warranted prior to readmission for any elective procedure after discharge from previous confinement unless previous recovered (within 3 months of positivity).
8. The result of RT-PCR GeneXpert will be valid for the entire duration of confinement:
 - 8.1 For asymptomatic RT PCR negative patients, elective procedures maybe scheduled anytime within 5days without additional tests.
 - 8.2 If elective procedures are scheduled after 5 days, clinical assessment with CBC, repeat CXR and repeat RT PCR testing should be done prior to the date of procedure/surgery and/or as necessary.
9. For RT PCR positive patients, mandatory 21-days recovery must be completed for emergency surgical procedure and 7 weeks for elective surgical procedure
 - 9.1 No repeat RT PCR testing is needed once the prescribed recovery days is completed.
 - 9.2 IDS clearance is recommended for risk assessment for other ongoing infections.
 - 9.3 Scheduled/elective surgical procedures of RT PCR positive patients will be deferred for at least 7weeks.
10. Items not covered in this guideline shall be referred to the Incident Command Post.