



COVID-19 Microbiology Testing Restrictions

With the increased requirement for molecular COVID-19 testing other microbiology and molecular requests need to be restricted or reduced to free up staff and preserve reagents and consumables for this testing. These restrictions are effective immediately.

We would ask that all microbiology testing is minimised and specifically require the following:

1. Restriction in Asymptomatic Chlamydia and Gonorrhoea Testing

Testing will be available on the following patient groups:

- Those with urethritis and/or discharge (discharge not candida or BV)
- Sexual assault

**Clinical details outlining indication for testing will be required.
Testing will not proceed without this.**

Please note: patients who are contacts of known cases should be treated empirically without testing.

Information regarding the management of suspected cases of all sexually transmitted / related infections can be found here - <https://www.nzshs.org/guidelines>

2. Restriction of HSV/VZV and viral eye swabs

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

3. 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.

- **Faeces** – except if history of bloody stools, risk factors for *Clostridioides difficile*, part of public health outbreak investigation
- **Urines** – except complicated UTI including empiric therapy failure, pregnancy, pre-urological surgery
- **Skin or wound swabs** – except in cases of empiric therapy failure
- **Mycology Skin scrapings, Toe and finger-nail clippings** – except in cases of empiric therapy failure

If testing outside of the criteria for these specimen types is still considered necessary and will make a significant clinical difference to patient management, please discuss with our Clinical Microbiologist before testing.

We appreciate your understanding and assistance at this unusual time.

Murray Robinson
Lead of Speciality, Microbiology

**Please ensure all members of your institution
receive a copy of this clinical update.**

