



GOVERNMENT OF KHYBER PAKHTUNKHWA  
HEALTH DEPARTMENT

Dated, Peshawar the 29<sup>th</sup> April, 2020

**NOTIFICATION**

**NO. E&A (Health)/2-264/2020.**

The Competent Authority in Health Department is pleased to notify the following Revised Policy on Testing for COVID-19:

**Revised Policy on Testing for COVID-19**

Over the last 45 days, the Government of Khyber Pakhtunkhwa has built up testing capacity from scratch to around 1500 tests per day. With the on-boarding of several private sector providers to assist the Government, these capacities will more than double by the beginning of May.

To more successfully manage the spread of the disease, the Khyber Pakhtunkhwa Government intends to use this capacity, by rapidly scaling up testing. Until now, testing has focused on symptomatic patients and travelers, in accordance with the National Policy, but with the spread of the disease, this limited selection of whom to test is not sufficient.

In short, we need to test more.

The Government will therefore periodically issue guidelines to scale up the level of testing. In the very-short term, within May, we intend to double the number of tests conducted, to over 2000 per day, by testing more contacts. Beyond May, we may aggressively ramp up to a much larger number of tests, between 5000 and 10,000 per day, once logistics are worked out.

The guidelines below, which may be periodically updated, should serve as a guide for whom to test within districts.

1. **Healthcare & Frontline Workers:** Any Healthcare worker or any other front line personnel involved in the COVID-19 response in any capacity deemed to be at risk from the disease, either through close contact with COVID-19 patient (even without symptoms), or with COVID-19 symptoms. These individuals will be the first priority for COVID-19 testing, and shall not be denied a test. Samples should be tagged **H**.
2. **Contacts of a COVID19 Patient:**
  - a. **Household contacts:** If there are less than 5 members in the house the testing protocol is to test *all of them*. If there are more than 5 members, test the 5 ones who are at the higher age side or with co-morbidities and must be tagged as **CT1** samples (Annexure).
  - b. **Outside Home/Household Contacts:** All close contacts that satisfy the definition of a close contact (Annexure) should be tested and shall be labeled as **CT 2**.
  - c. **Institutional Screening:** If a positive case has been reported within an institution, the policy implies that whoever within the organization is deemed at risk must be tested and shall be labeled as **CT 3**.
3. **Community Based Surveillance Sampling:** If community-based surveillance (i.e. people within the vicinity of a case, but without known contact history) in an area with a known case or known cases is deemed necessary, a community based surveillance campaign may be carried out, and samples shall be tagged as **CS 1** for further testing.
4. **Public Dealing Personnel:** Any person with suggestive symptoms who is engaged in public dealing e.g. shopkeepers, bank tellers, transport service employees, Law Enforcing Agencies personnel should be tested. Tag as **P**.

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5. **Pneumonia:** Person with pneumonia of unknown aetiology should be tested. Tag as **I**
6. **Unexplained Deaths:** Sampling of all the unexplained deaths is preferred for the purpose of further surveillance and disease spread control. Tag as **D**
7. Any other list shared by Provincial/National authorities for testing shall be tested. Tag as **CS 2**
8. Any person **referred by a Physician/Specialist/Consultant** based on clinical grounds should be tested. Tag as **C**
9. For **in bound flights passengers**, all passengers should be tested after 48 hours of landing and tagged as **E**.
10. For all **follow up testing** for clearance of an already confirmed COVID-19 Patient tag as **R**.

SECRETARY HEALTH  
KHYBER PAKHTUNKHWA

**Endst. No. & date even:**

Copy forwarded to the:

1. Chief Planning Officer, Health Department.
2. Director General Health Services, Khyber Pakhtunkhwa
3. Chief HSRU, Health Department
4. All District Health Officers, Khyber Pakhtunkhwa
5. All Medical Superintendants, Khyber Pakhtunkhwa.
6. All Hospital/Medical Directors, All MTIs in Khyber Pakhtunkhwa
7. Chief Executive Officer, Health Care Commission, Khyber Pakhtunkhwa
8. COVID-19 Clinical Care Committee, Health Department.
9. PS to Minister for Health, Khyber Pakhtunkhwa.
10. PS to Secretary Health, Khyber Pakhtunkhwa.
11. PS to Spl Secretary-I, Health Department.
12. PS to Spl Secretary-II, Health Department.

Farhan Khan  
29/4/2020

(Farhan Khan)  
SECTION OFFICER (GENERAL)



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Annexure

a- Contact:

A contact is a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case:

- i. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes;
- ii. Direct physical contact with a probable or confirmed case;
- iii. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment

OR

- iv. Other situations as indicated by local risk assessments.

Note: for confirmed asymptomatic cases, the period of contact is measured as the 2 days before through the 14 days after the date on which the sample was taken which led to confirmation.

b- Tagging:

For laboratory use.

- i. **H,CT1,P,I,D,C** individual testing recommended
- ii. **CT2,E,R** small pool testing (~3)
- iii. **CT3,CS1,CS2** medium pool testing (~5)

H= Health care worker, CT= Contact Tracing, CS = Community Surveillance  
P= Public, I= Investigational, D= Deceased, C= Consultant, E=Expats, R= Repeat

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