Scaled-Up Testing and Contact Tracing

The federal government must use the Defense Production Act to produce and provide on a massive scale:

(A) Polymerase Chain Reaction (PCR) tests for detecting: (1) active COVID-19 infections and (2) latent SARS-CoV-2 infections;

(B) once validated tests are available, IgG serology tests for detecting patients with prior infections.

Sufficient PCR tests for COVID-19 infection must be deployed to:

(A) hospitals, clinics, physicians’ offices, and other health care providers so that all individuals who have symptoms consistent with COVID-19 are promptly tested. All test results must be provided to appropriate state, county, and local health departments.

(B) state, county, and local health departments to better monitor and contain the coronavirus outbreak by: (1) serial targeted coronavirus PCR testing of all asymptomatic individuals at high risk of exposure to the coronavirus, including people living in geographical regions with the highest density of COVID-19 patients, health care providers treating COVID-19 patients, and people at high risk of spreading COVID-19 if infected (i.e., those in essential jobs, such as grocery store workers); (2) community tracing and PCR testing for all contacts of actively infected individuals and appropriate isolation and quarantine measures for such contacts until infection has been ruled out or, if infection is confirmed, the contacts have recovered and are no longer capable of spreading the virus; (3) conducting random nationwide PCR testing for the coronavirus to define the ongoing prevalence of active COVID-19 infections; and (4) deploying IgG serology tests, once available, to establish which individuals can resume work in high-risk occupations without fear of infection or of infecting others, provided a positive serology test can be documented to establish immunologic protection.

Following the course of action under (A) and (B) will, by massive testing, improve our understanding of the prevalence of COVID-19 infections and the trajectory of the disease, and bring the pandemic under control.

The federal government must also provide additional funding for the CDC to:

A) become the central point for receiving and reporting on the testing and tracing data coming in from health departments;

(B) seek information on testing shortages and other material shortages;

(C) coordinate with the new national clearinghouse that is being proposed.

The federal government must also provide additional funding for state, county, and local health departments to:

(A) facilitate any necessary COVID-19 related training and recruit providers and other personnel to collect specimens, trace contacts of infected individuals, and manage the isolation and quarantine of people who test positive.
(B) ramp up the frequency of PCR tests in their own CLIA-approved laboratories and the reporting of results to their own health departments as well as to a central repository (likely within CDC).

1 Quarantine details: Isolate people who test positive for a minimum of 3 weeks, or for an additional 3 weeks if they develop symptoms between 14 and 21 days of isolation, or until their PCR test is negative.