Why are graduate and undergraduate students separated out in entry testing but not in diagnostic testing on the dashboard?

This was due to the way the data were collected, however the University dashboard has been recently updated to now separate the positive student cases into graduate and undergraduate.

If a student tests positive but not through Wash U, will that be added to the dashboard?

Yes, that information is added to the dashboard. The St. Louis County and St. Louis City Health Departments notify the University of positive tests on University students.

If a student has mild symptoms, can they get a test?

Yes, even mild symptoms, if they are symptoms often associated with COVID-19, will generate a request to be tested. We highly recommend that all students who develop any concerning symptoms please call Habif Health and Wellness Center at 314-935-6666 or the COVID call center at 314-362-5056. The staff are highly trained to gather the correct information and follow protocols to ensure that everybody with a reasonable suspicion of COVID-19 is referred to testing, which can usually be performed the same day with results in 24-48 hours.

If a student has a known exposure but is asymptomatic, could they get a test?

Yes, under certain circumstances. Students who have a known exposure to a person with COVID-19 should call Habif Health and Wellness Center at 314-935-6666. The staff will collect all the details of the possible exposure to determine if the caller would meet criteria to become a contact requiring quarantine. Contacts may be asked to undergo diagnostic testing to more quickly identify secondary cases, however it is important to remember that a negative test in this situation does not alter the duration of quarantine that is necessary.

How many positive cases have shown up from surveillance testing vs. diagnostic testing?

This information is captured on the dashboard. Now, more than half of the positive cases are being identified by diagnostic testing. Diagnostic testing is even more important than asymptomatic surveillance testing because symptomatic people are more contagious and more likely to be the source of large clusters.

Why aren't graduate students included in surveillance testing?

Surveillance testing is being used on undergraduates because this population was deemed to be most likely to be the source of large clusters of infection. Specifically, undergraduates are more likely to live communally, less likely to follow public health measures and (because of their younger age) more likely

to be asymptomatic while infected. The purpose of this testing is solely to serve as an early warning sign of increased infection on campus. It has limited utility for an individual. The University is continuously monitoring the data to determine if this strategy needs to change.

Why were students on the Medical campus not given entry tests?

The medical campus has been communicating separately and regularly with its students regarding policies and testing. The strategy for mitigation amongst medical students parallels the strategy used for other medical school personnel.

How many tests has the University given?

The University does approximately 2700-3000 surveillance tests per week. In addition, it does as many diagnostic tests as are needed for all students, faculty and staff across all campuses. This fluctuates greatly from day to day but has been markedly increasing in the last few weeks as cases have increased.

Why is the WashU policy not "if you want to be tested, you will be tested"? Is the expectation that the number of people who want to be tested would exceed WashU's testing capacity?

The purpose of surveillance testing is for population health monitoring as an early detection system that would more rapidly identify an outbreak on campus. The purpose of diagnostic testing is to rapidly determine if a person with symptoms has COVID-19. People with symptoms are more likely to spread to others and it is critical that symptomatic cases are identified as quickly as possible. There are some unintended negative consequences with performing more tests on asymptomatic individuals than are needed. These include false positives that could lead to unnecessary isolation and quarantine of contacts, false negatives that could generate a false sense of security that could lead to less vigilance in strictly following masking, gathering and distancing, and diversion of limited resources (as has been seen on campus and in many other places), and most importantly, the need to ensure we have adequate testing capacity for those who are ill and those who are at greatest risk (people in nursing homes, people in jail or prison, healthcare workers and first responders, etc).

Why is the university testing undergrads without symptoms if we think this surveillance testing may lead to high risk behavior due to a false sense of safety?

After careful consideration of the overall risks and benefits within various populations, it was determined that surveillance testing benefits may exceed risks in undergraduates. The University is actively monitoring the utility of this strategy and will adjust either expand or contract surveillance testing in response to the data and pandemic conditions.

What is the procedure for a confirmed contact?

When a person tests positive they become a case. University staff interview every case to re-trace their steps and identify all people who were potentially exposed. Those who are identified as having a high-risk exposure are considered contacts, who are then called to inform them they are considered a contact. Once confirmed, the process of quarantine is initiated. This includes a set of instructions to the individual, a confirmation of living space and food delivery, and establishing a health monitoring plan with Habif Health and Wellness staff. A similar process is followed on the medical campus.

While undergraduates do live in communal living spaces, the same can be said of graduate students. With the opening of the rec center and the mixing of graduate students in class and lab spaces, does the university plan to introduce surveillance testing for graduate students?

(This question is answered above).