Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

March 29, 2021

DEPARTMENT MEMORANDUM
No. 2021-0169

TO : **ALL UNDERSECRETARIES AND ASSISTANT SECRETARIES; DIRECTORS OF BUREAUS AND CENTERS FOR HEALTH DEVELOPMENT; MINISTER OF HEALTH - BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO; EXECUTIVE DIRECTORS OF SPECIALTY HOSPITALS; CHIEFS OF MEDICAL CENTERS, HOSPITALS, SANITARIA AND INSTITUTES; PRESIDENT OF THE PHILIPPINE HEALTH INSURANCE CORPORATION; ALL DISEASE REPORTING UNITS; ALL OTHERS CONCERNED**

SUBJECT : **Interim Guidelines on Rapid Antigen Test Reporting for the NCR Plus Bubble**

I. BACKGROUND

Department Memorandum No. 2020-0512 (Revised Omnibus Interim Guidelines on Prevention, Detection, Isolation, Treatment and Reintegration Strategies for COVID-19), Department Memorandum No. 2020-0468 (Supplemental Guidelines on the Use of Rapid Antigen Test Kits), and their amendments lay down the policy directions for the acceptable use of rapid antigen test kits that have been authorized for use by the Food and Drug Administration (FDA). This is in consonance with Administrative Order No. 2020-0013 (Revised AO 2020-0012 'Guidelines for the Implementation of the Inclusion of the Coronavirus Disease 2019 (COVID-19) in the list of Notifiable Diseases for Mandatory Reporting to the Department of Heath' dated March 17, 2020) and its amendments.

To operationalize the use of rapid antigen tests as a mechanism to close the testing gap given the recent increase in cases in the NCR Plus Bubble as defined in IATF Resolution No. 104, these guidelines outline the proper use of rapid antigen testing and reporting of results.

II. IMPLEMENTING GUIDELINES

A. The use of rapid antigen tests in the NCR Plus Bubble shall strictly conform to the guidelines laid down in DM No. 2020-0468.

B. In accordance with the Operation Listo Manual of the Department of the Interior and Local Government (DILG), local government units (LGUs) in the NCR Plus Bubble,

supported by the DOH Epidemiology Bureau and the NCR Plus Centers for Health Development (CHDs), shall identify selected outbreak areas where Coordinated Operations to Defeat Epidemic (CODE) and rapid antigen testing shall be implemented.

C. Only the following rapid antigen tests conducted among suspect or probable cases and close contacts shall be considered valid, reported to the epidemiology and surveillance units (ESU) of NCR Plus, and publicly reported:
    1. Antigen tests conducted in the context of CODE strategies as reported by local government units; and
    2. Antigen tests done in hospitals for their inpatient consultations, admissions, and pre-procedure screening.

D. Conduct of rapid antigen testing outside of CODE activities or not in a hospital setting shall be considered not valid and shall require a repeat rapid antigen testing in allowed facilities or an RT-PCR test.

E. Only a licensed and trained healthcare professional shall oversee the use and interpretation of antigen tests since these need to be correlated with the overall clinical and epidemiological context.

F. A positive antigen test for a suspect or a probable COVID-19 case (as defined in Administrative Order No. 2020-0013-B) in the abovementioned settings shall be interpreted as a confirmed COVID-19 case. Negative antigen test results from persons with high index of suspicion (e.g. symptomatic persons with unknown transmission or travel history) should be confirmed using RT-PCR or repeat antigen testing no less than 24 hours and no longer than 48 hours of the initial test.

G. Individuals identified as a confirmed COVID-19 case on rapid antigen test within the NCR Plus Bubble shall not be required to undergo RT-PCR retesting prior to their isolation or transfer outside the area. Close contacts of those considered a confirmed COVID-19 case via rapid antigen test within the NCR Plus Bubble shall be traced, tested, quarantined/isolated, and managed as per existing DOH guidelines, regardless if they reside within the NCR Plus Bubble or outside said area.

H. For purposes of immediate diagnosis and management, individuals testing positive on rapid antigen test, but not fitting the criteria for a confirmed COVID-19 case, shall also be immediately isolated, managed, and treated as a confirmed case.

I. All results must be released to the patient within four (4) hours and to the local epidemiology and surveillance unit (LESU) within the same day of the conduct of the test. Facility of first contact shall be tasked to release the result to the patients (e.g. Disease Reporting Unit (DRU) such as the health center, BHS, or hospital that assessed the individual).

J. The CHDs that are part of the NCR Plus shall maintain a database of Disease Reporting Units (DRUs) conducting rapid antigen testing. The CHDs shall ensure that DRUs strictly comply with all guidelines and that they designate a Disease Surveillance Officer (DSO) who shall act as contact person and ensure that recording and reporting requirements are complied with. Only DRUs that are in the database of the CHD may release an official antigen test result.

K. Pending the release of an information system for antigen tests, the CHDs that are part of the NCR Plus shall create and maintain a disaggregated line list of all cases tested using rapid antigen kits using the data dictionary defined in **Annex A**. The DSOs and the CHDs shall ensure that the reason for testing is clearly indicated in the reporting forms and reflected in the line list of the CHD. A line list template can be found in **https://tinyurl.com/AgTestTemplate.**

L. All registered DRUs offering rapid antigen testing are required to submit a completely-and legibly-accomplished Case Investigation Form (CIF), following Department Memorandum No. 2020-0542 (Interim Guidelines on the Compliance of COVID-19 Testing Laboratories to Data Submission and Quality Standards), along with the duly countersigned result form to the CHD and the LESU for all cases undergoing rapid antigen testing. All CIFs, test results, and completed line lists of tests done for the previous 24 hours shall be submitted on or before 6:00 PM to the concerned LESU and RESU, including notification of zero conducted tests for the day. All scanned copies of CIFs and test results must be submitted by the DRUs and all consolidated line lists must be submitted by the RESU to the COVID-19 Surveillance and Quick Action Unit (CSQAU) on or before 11:59 PM of the same day. Failure to comply with data quality and completeness requirements shall expose the DRU to appropriate sanctions.

M. All DRUs within the NCR Plus Bubble and their supervising ESUs shall ensure that all rapid antigen test results released within fourteen (14) days before the effectivity of this Department Memorandum shall be submitted in line list format to the CSQAU on or before 8 April 2021. All results released before that period shall be included in the line list on or before 30 April 2021. The CSQAU shall harmonize the daily tallies as necessary.

For strict compliance.

FRANCISCO T. DUQUE III, MD MSc
Secretary of Health

ANNEX A
Mandatory Variables for Rapid Antigen Testing Line List

General Guidelines:

1. Line lists for rapid antigen testing must contain the priority fields described in the Data Dictionary below. RESUs shall include other fields after the last priority field described.
2. Line lists to be submitted to the CSQAU must be flat filed; i.e. no unnecessary visual formatting, no summaries in the footers, no multiple headers, no merged headers, no hidden rows or columns.
3. Line lists for rapid antigen testing shall be submitted in another file separate from the main line list of the RESU.
4. The Laboratory Results (2nd) section shall be used to record confirmatory tests done for initial negative antigen test results.

Data Dictionary:

Field	Definition	Values	Data Type
Last Name	Full last name of the patient, not an initial		String
First Name	Full first name of the patient, not an initial		String
Middle Name	Full middle name of the patient, not an initial		String
Suffix	Extension name of the patient, if applicable	JR. SR. I II III IV V	String
Date of Birth	Birthdate of the patient		Date
Sex at Birth	Sex of the patient at birth	Male Female	String
Nationality	Nationality of the patient	Dropdown	String
Occupation	Occupation of the patient		String
Current House No. / Lot / Bldg. / Street	House no. / lot / building no. / street where the patient is currently residing		String
Current Province	Province/HUC/ICC where the patient is currently residing	Dropdown	String
Current Municipality or City	City or municipality where the patient is currently residing	Dropdown	String
Current Barangay	Barangay where the patient is currently residing	Dropdown	String

Current Home/Cell Phone Number	Active telephone number of the patient		String
Province of Disease Reporting Unit	Province Region of the health facility that first reported/detected the case	System-generated	String
Name of Disease Reporting Unit	Name of the health facility that first reported/detected the case	Dropdown	String
Date Reported	Contains the date when the result was released by the facility		Date
Health Worker	Refers to medical, allied medical, and other necessary personnel regardless of the nature of employment assigned in hospitals, and health facilities who are directly catering to or exposed to persons who are classified as either suspect, probable or confirmed COVID-19 cases.	Yes No Unknown	String
Returning Overseas Filipino	Filipino citizens who are returning to the Philippines from abroad.	Yes No Unknown	String
History of exposure to known probable and/or confirmed COVID-19 case 14 days before the onset of signs and symptoms?	History of exposure to known probable and/or confirmed COVID-19 case 14 days before the onset of signs and symptoms?	Yes No Unknown	String
Date of Last Exposure to Known Probable and/or Confirmed Case	Date of last exposure to known probable and/or confirmed case		Date
Have you been in a place with a Known COVID-19 community transmission 14 days before the onset of signs and symptoms?	Have you been in a place with a Known COVID-19 community transmission 14 days before the onset of signs and symptoms?	Yes No Unknown	String
Travel dates (from)	Travel date		Date
Travel dates (to)	Travel date		Date
Place of Exposure			
Fever	Fever		Boolean
Cough	Cough		Boolean
General Weakness / Fatigue	General Weakness / Fatigue		Boolean
Headache	Headache		Boolean
Myalgia	Myalgia		Boolean

Sore Throat	Sore Throat		Boolean
Coryza	Coryza		Boolean
Dyspnea	Dyspnea		Boolean
Anorexia / Nausea / Vomiting	Anorexia / Nausea / Vomiting		Boolean
Diarrhea	Diarrhea		Boolean
Altered Mental Status	Altered Mental Status		Boolean
Difficulty of Breathing / Shortness of Breath	Difficulty of Breathing / Shortness of Breath		Boolean
Anosmia (Loss of Smell)	Anosmia (Loss of Smell)		Boolean
Ageusia (Loss of Taste)	Ageusia (Loss of Taste)		Boolean
Others	Other signs and symptoms not listed		Boolean
Date of Onset of Illness	Date when signs and symptoms were first observed.		Date
Chest X-ray Done?	Chest X-ray Done?	Yes No Unknown	String
Date when Chest X-ray was Done	Date when Chest X-ray was Done		Date
Chest X-Ray Results	Other Chest X-Ray Results	Normal Pending Hazy opacities, often rounded in morphology, with peripheral and lower lung distribution Others	String
Others, please specify	Specification of findings, if not listed above		
Chest CT Results	Chest CT Results	Normal Pending Multiple bilateral ground glass opacities, often rounded in morphology, with peripheral and	String

		lower lung distribution Others Chest CT not done	
Others, please specify	Specification of findings, if not listed above		String
Lung Ultrasound	Lung Ultrasound	Normal Pending Thickened pleural lines, B lines (multifocal), B lines (discrete), B lines (confluent), consolidative patterns with air bronchograms, consolidative patterns without air bronchograms Others Lung Ultrasound not done	String
Others, please specify	Specification of findings, if not listed above		String
Date Specimen Collected	Date when the specimen was collected		Date
Date Specimen Received by Laboratory	Date when specimen was received by the laboratory		Date
Type of Test	Actual test performed	Antigen Test rRPAT ASSAY Rapid Antibody RT-PCR GeneXpert-COVID Rapid test IgG Rapid test IgM	String

		ELISA Others	
Date of Release of Result	Date when the result was provided by the laboratory to the patient		Date
Test Result	Result of the test performed	Positive Negative Inconclusive Pending Equivocal Presumptive Positive Invalid	String
Lab where Testing was Done / Health Facility	Name of the laboratory where the testing was done	Dropdown	String
Reason for Antigen Testing	Contains the reason for the usage of rapid antigen test in accordance to DM 2020-0468	Close Setting Close Contact GIDA Outbreak Other	String
Test Kit Brand	Contains the brand name of the test kit used. Test kit brands should use the names reported in the list provided by the FDA.	Standard Q COVID-19 Ag Test (SD Biosensor, Inc.) Panbio COVID-19 Ag Rapid Test Device (Abbot.) Wondfo 2019-nCoV Antigen Test, Lateral Flow Method (Guangzhou Wondfo Biotech Co., Ltd.) Others	String
Health Status	Health status of the patient at the time of the interview.	Asymptomatic Mild Moderate Severe Critical	String

Disposition of the Case	Latest whereabouts of the patient based on the checkboxes	Admitted in a Health Facility Quarantined in a Health Facility In Home Isolation Discharged Transferred to another Facility Lost to Follow Up	String
Date Admitted/Isolated/Discharge	Date of first or earliest hospital admission, if admitted to multiple health facilities.		Date
Region of Facility where patient was first admitted	Region of facility where patient was first admitted	Dropdown	String
Province of Facility where patient was first admitted	Province of facility where patient was first admitted	System-generated	String
Name of Facility where patient was first admitted	Name of health facility where the patient was first admitted	Dropdown	String
Outcome	Outcome of the patient after illness. Patients that still have the disease are classified as Active, those that have died and recovered as Died and Recovered, respectively.	Active Recovered Died	String
Date Recovered	Date when the patient was evaluated to be recovered		Date
Date Died	Date when the patient died.		Date
Cause of Death	Cause of death of the patient.	Unknown <ICD-10 Codes>	String
Classification	COVID-19 Classification	Suspect Probable Close Contact	