



Clinician alert #85 – all clinicians

Effective from 16 June 2022

New information

- Cases do not routinely need to be retested for SARS-CoV-2 within 12 weeks after release from isolation if new symptoms develop and should only be tested where a diagnosis will inform their clinical management.

Testing

- People with symptoms consistent with an acute respiratory infection should stay at home when sick.
- Both RAT and PCR are acceptable methods for diagnosing SARS-CoV-2.
- Anyone with COVID-19 compatible symptoms should continue to be tested for SARS-CoV-2.
- Further information is available in Testing criteria for [SARS-CoV-2 in Western Australia #39](#) (under subheading 'testing').

Reinfection with SARS-CoV-2

- Natural infection with SARS-CoV-2 provides some protection against reinfection, however reinfection is possible, with those who are significantly immunocompromised being at higher risk.
- Diagnosing a true reinfection is important in those people who might benefit from [COVID-19 treatments](#).
- Identifying other respiratory virus causes, such as influenza, may benefit those who are eligible for anti-viral treatment.
- Cases who develop new symptoms within 12 weeks of release from isolation should:
 - stay home until symptoms resolve
 - be tested for respiratory viruses, including SARS-CoV-2, where a diagnosis will inform their clinical management.
- If a person with symptoms subsequently tests positive and a clinician determines the current illness is likely to be a true reinfection (for example, if there is a new symptomatic illness following a period of symptom resolution after the first infection) the clinician may recommend the person isolates for at least 7 days (as per isolation requirements for cases).

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