



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

February 2, 2021

Dear Colleague,

We are writing regarding new circulating genetic variants, or strains, of SARS-CoV-2, the virus that causes the disease COVID-19, to **request your assistance with identifying specimens for genetic sequencing to surveil for SARS-CoV-2 variant strains.** More information from the Centers for Disease Control and Prevention (CDC) about variant strains is available at <https://www.cdc.gov/coronavirus/2019-ncov/more/science-and-research/scientific-brief-emerging-variants.html>.

Infections with the B.1.1.7 (emerged in the United Kingdom), B.1.351 (emerged in South Africa), and P.1 (emerged in Brazil) SARS-CoV-2 lineages have already been confirmed in the United States, including both B.1.1.7 and B.1.351 in Maryland. The Maryland Department of Health (MDH) Public Health Laboratory has the capacity to perform genetic sequencing of SARS-CoV-2. Additionally, MDH is working with a variety of partners to enhance capacity to detect variant strains in Maryland.

As part of these MDH surveillance efforts, MDH requests that clinicians report, via an online portal, COVID-19 cases among any of the following groups:

- **Individuals who first test positive for COVID-19 after receiving COVID-19 vaccination** (either one or two doses)
- **Severely immunocompromised¹ individuals with prolonged COVID-19 infection**
- **Individuals suspected of reinfection** – specifically, symptomatic individuals who test PCR positive for SARS-CoV-2 more than 90 days after an initial infection from which they clinically recovered
- **Individuals with recent international travel (travel in the 14 days prior to symptom onset)**
- **Any other individuals for whom you have clinical suspicion of infection with a possible variant (e.g., unusual clinical manifestation, etc.)**

¹ Examples of individuals who are severely immunocompromised include people who are on chemotherapy for cancer, who are within one year of receiving a hematopoietic stem cell or solid organ transplant, who have untreated HIV infection with CD4 T lymphocyte count <200, who have combine primary immunodeficiency disorder, or who have received prednisone >20mg/day for more than 14 days. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

If you are aware of COVID-19 cases in people in any of the above detailed groups to be considered for sequencing prioritization:

1) **If possible, contact the testing laboratory to ensure the original specimen is not discarded**

2) **Complete and submit case information securely online at: <https://redcap.link/qx8ieby3>**

Submitted case information will be reviewed by MDH. If the specimen is approved for sequencing, MDH or the local health department will request that the clinical laboratory send the specimen to the MDH Public Health Laboratory. Sequencing results will be used to inform public health actions, including contact tracing. **Neither clinicians nor laboratories should send specimens to MDH Public Health Laboratory unless approved and requested by MDH.**

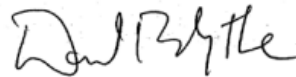
For questions, or if you are unable to use the form, please email: mdh.COVIDsequencing@maryland.gov. Please do NOT include any patient personal identifiable information in the email.

Thank you for your attention to this important public health matter.

Sincerely,



Monique Duwell, MD, MPH
Chief, Center for Infectious Disease
and Surveillance and Outbreak Response
Maryland Department of Health



David Blythe, MD, MPH
Director, Infectious Disease Epidemiology
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