



# Potential Concerns About a Decrease in the Number of Healthcare Providers Seeking COVID-19 Testing: A Letter to the Editor

Nima Hajian <sup>1</sup> and Mehran Rostami <sup>2,\*</sup>

<sup>1</sup>Student Research Committee, Dental School, Kermanshah University of Medical Sciences, Kermanshah, IR Iran

<sup>2</sup>Deputy of Health, Kermanshah University of Medical Sciences, Kermanshah, IR Iran

\*Corresponding author: Deputy of Health, Kermanshah University of Medical Sciences, Shahid Beheshti Blvd, Kermanshah, IR Iran. Email: m.rostami@kums.ac.ir

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## Dear editor,

In line with the World Health Organization's (WHO) health regulations, two mandatory measures to control coronavirus disease 2019 (COVID-19) are increasing testing capacity and isolating positive cases (1). Healthcare providers, as a sub-population in the community, are at high risk of developing COVID-19, mainly due to occupational exposure (2, 3). The relatively high mortality rate among the medical staff confirms this grim fact. Accordingly, extensive testing and the early detection of positive cases are necessary to maintain this group healthy (1).

To this end, with the outbreak of the third phase of the COVID-19 epidemic in Iran, which has been associated with high morbidity and mortality rates (3), the Iranian Ministry of Health and Medical Education has issued guidelines to perform COVID-19 testing (RT-PCR testing) on individuals directly involved COVID-19, including physicians, nurses, midwives, and other medical hospital workers. In this regard, RT-PCR testing is performed with a 50% discount compared to its free tariff. Moreover, it is also performed with a 30% discount for those indirectly involved in COVID-19, including individuals working in administrative units and other non-medical hospital workers. Given the US sanctions against Iran and its economic consequences in society (4, 5), this sick pay policy could pose two potential concerns. First, the personnel may not take their mild symptoms seriously and keep working without testing and ensuring their health status. In this case, if they were infected and not diagnosed, they would spread the virus and infect other hospital staff. Second, given that a remarkable number of COVID-19 positive cases have been among the hospital staff, the new conditions may decrease the number of positive cases of hospital personnel voluntarily seeking RT-PCR testing.

Consequently, a decrease in the number of the identified COVID-19 cases would be experienced; hence, we should be concerned about the misinterpretation of this situation. The decrease does not imply controlling the next phase and the real decrease in such positive cases. By not imposing the costs of RT-PCR testing and ensuring the early detection of positive cases, we would prevent new outbreaks among healthcare workers and prepare the healthcare workforce for the next phase of the COVID-19. Moreover, the rollout of vaccines for COVID-19 has been slower than expected among this sub-population. A critical measure to fight against this outbreak is ensuring transparency and accessibility of COVID-19-related data and statistics. Since COVID-19 is not political, this measure also must not be politicized.

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