Consent to SARS-CoV-2 Testing

Harris County is conducting testing of employees for the presence of SARS-CoV-2 to help mitigate the spread of the virus. This form explains the SARS-CoV-2 test and who will get your results.

1. The test that you will receive is designed to detect the presence of SARS-CoV-2, also known as the “coronavirus.” SARS-CoV-2 is the virus that causes the disease known as COVID-19. The results of this test will not reveal if you had the virus in the past or if you have immunity to getting the virus in the future. It only tests for the presence of the virus in your specimen at the time of testing.

2. If you have questions about why you are taking this test or how the County may use the results of your test, please contact HCPH at (832) 927-7575.

3. The type of test offered is a PCR SARS-CoV-2 Nasopharyngeal Swab (NP). One (1) nasopharyngeal swab should be collected by swabbing both sides of the nasopharynx. The NP swab should be placed in a single tube of viral transport medium (VTM). The specimen collection will be completed by a site-based healthcare professional.

4. Additional resources concerning SARS-CoV-2 and COVID-19 as well as information concerning vaccinations can be found on the Harris County Public Health (HCPH) website and by calling HCPH at (832) 927-7575.

5. The results of your test will be shared with you and Harris County. Your results will also be reported to the State of Texas; reporting the results to the State of Texas is mandatory. Following reporting the results to the State of Texas, you will be formally notified of the test results by phone call, text message or email.

6. If your results are positive, please contact your health care provider immediately. As further outlined in the Fact Sheet for Patients, negative results mean that the virus was not detected in your specimen. It is possible for the test to produce an incorrect negative result (called a “false negative”) in some people who have SARS-CoV-2. If you test negative but have symptoms of COVID-19 or concerns about exposure to SARS-CoV-2, contact your health care provider to determine if you should be retested or take other actions.

7. Your Test Administrator does not give medical advice or provide medical care. You should talk to a physician about any health care needs you may have, including any related to receiving this test.
By signing below you are confirming the following:

- that you have read and understand the information in this consent form and related documents such as the Fact Sheet for Patients;
- that you will provide a nasal swab specimen for testing;
- that you will have your specimen tested by Harris County for SARS-CoV-2;
- that Harris County may disclose your test results as outlined in this form;
- that if the test is positive, you will depart the worksite immediately and contact your department’s Human Resources representative for Return to Work guidance;
- that you hold harmless Harris County, its officials, agents, employees, volunteers and officers from any and all claims whatsoever of any nature arising out of or in relation to your participation in this testing program to the fullest extent of the law;
- that you acknowledge receipt of a copy of this signed consent form; and
- that you voluntarily agree to this testing for SARS-CoV-2.

Signed: ___________________________ Date: ______________

Print Name: __________________________

I do not wish to participate in the SARS-CoV-2 testing program and understand that my department may take disciplinary or other action so as to mitigate the spread of SARS COV 2 within the workplace.

Signed: ___________________________ Date: ______________

Print Name: __________________________