



# COVID-19 FAQs



June 2020

## WHAT TESTS ARE AVAILABLE AT ALVERNO LABORATORIES FOR COVID-19?

Alverno has three tests for COVID-19:

- COVID-19 High Sensitivity by PCR (CO19H)
- COVID-19 by PCR, Risk Assessment (CO19S)
- COVID-19 Antibody, IgG (COVGA)

## WHAT ARE THE DIFFERENCES BETWEEN THESE TESTS?

Both PCR tests are considered diagnostic for a COVID-19 infection. They will detect viral RNA particles in the patient sample.

- **COVID-19 High Sensitivity by PCR is intended to diagnose patients with signs and symptoms of COVID-19.**
- **COVID-19 by PCR, Risk Assessment is for pre-procedure screening to detect possible asymptomatic carriage.**

Antibody, IgG testing is best used to test for prior exposure and is not recommended for patients in the acute phase of infection. Serology testing is not suitable for diagnosis of active infection.

## ARE THE TWO PCR TESTS DIFFERENT ASSAYS?

No. Both PCR tests are performed on one of our six Abbott analyzers. Alverno has three Abbott m2000 and three Abbott Alinity m Real-Time PCR instruments for the detection of viral COVID-19. These are highly sensitive assays with a limit of detection of 100 viral copies per milliliter. The only difference is the purpose for the order and for infection control monitoring at our hospital sites.

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## MY PATIENT TESTED POSITIVE FOR COVID-19 IgG ANTIBODY. IS HE/SHE IMMUNE FROM COVID-19?

To date there is not enough data to determine if protective immunity is achieved in all patients after infection and if immunity wanes or disappears over time. IgG antibody typically develops around two weeks after symptom onset. Antibody testing may be useful in determining prior infection in individuals that were not tested by PCR during a COVID-19 like illness. Antibody testing is also recommended in tandem with our Risk Assessment PCR assay to screen patients prior to a surgical procedure.

## WHAT SPECIMEN TYPES ARE REQUIRED FOR TESTING?

Alverno Laboratories currently accepts two specimen types for viral COVID-19 PCR diagnosis.

- Nasopharyngeal Swabs collected in Viral Transport Media, Universal Transport Media or Sterile Phosphate buffered Saline.
- Nasal Swab collected with multi-Collect kit.

Antibody IgG testing is performed on a serum sample collected in a gold top serum separator tube.

## HOW ARE SPECIMENS COLLECTED?

- Nasopharyngeal specimens must be collected by trained medical staff. Collections can be done at a physician's office or at several drive-through collection sites.
- Nasal Swab samples are also collected at physician offices or our drive-through locations. Alverno is working to have nasal swab collections available at our PSC locations for asymptomatic individuals.
- Serum collections for our antibody assay can be performed at one of our PSC locations.

**Note: Patients with a suspected active infection are asked to present to a drive-through or hospital ER for specimen collection. Patient's with signs and symptoms such as a fever should not go to a PSC location.**

## HOW SOON CAN I EXPECT THE RESULTS?

For all COVID-19 assays, turn-around-time is 24-48 hours once received at the Central Lab. Specimens for pre-procedure screening should be collected 72 hours before date/time of procedure to ensure results are available the day before.

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## WHAT ELSE DO I NEED TO KNOW ABOUT COVID-19 TESTING?

- Proper timing of tests
  - For diagnosis, Nasal or Nasopharyngeal specimens should be collected while a patient is experiencing symptoms.
  - For antibody detection, serum should be collected at least two weeks after symptom onset.
    - Specimens collected too early in an infection can produce false negative results because the antibody response has not reached detectable levels.
- Proper Collection and Transport
  - Reliable results are dependent on adequate specimen collection and transport.
  - Be sure to tightly cap all collection tubes. Leaking specimens cannot be processed.