Title: BILH SARS-CoV-2 Interim Indications for Serology (Antibody) Testing

Purpose: To outline indications for antibody testing for SARS-CoV-2 IgG

Guideline Statement: COVID-19 is caused by the virus SARS-CoV-2 and serological testing that can detect the presence of antibodies to SARS-CoV-2 is now available.

Caveats:
- The presence of antibodies is only reflective of past exposure to SARS-CoV-2
- PCR remains the primary test for the diagnosis of COVID-19, but antibody testing may be a helpful adjunctive test, particularly for patients with symptoms ≥7 days and negative PCR
- There are no data as of yet showing that this antibody response is protective against future infection with SARS-CoV-2

Currently, only SARS-CoV-2 IgG antibody testing is available at BILH sites.

Please maintain Droplet precautions with eye protection and Contact precautions for inpatients while a diagnosis of SARS-CoV-2 is being considered (Private Room preferred)

SARS-CoV-2 IgG Indications

- Symptomatic inpatients with two negative COVID-19 PCR tests by NP swab (or OP for pediatrics) AND a strong clinical suspicion for COVID-19 infection after more than 7 days from symptom onset (Consider repeat testing in 7-14 days if antibody test negative and high clinical suspicion)

- Symptomatic healthcare workers with an influenza-like illness and a negative COVID-19 PCR AND a strong clinical suspicion for COVID-19 infection, after more than 7 days from symptom onset (Consider repeat testing in 7-14 days if antibody test negative and high clinical suspicion)

- Symptomatic outpatients with improvement, but not full resolution of influenza-like illness with either negative COVID-19 testing by PCR or in whom a PCR test was not performed, without alternative diagnosis (If PCR testing was not performed previously, it should be obtained concurrent with IgG testing)

- Previously symptomatic patients with clinical presentation suggestive of COVID-19, but negative COVID-19 PCR and negative initial serologic testing performed at <14 days with no alternative diagnosis. (All patients with positive IgG results should be referred for PCR testing to guide need for self-isolation)

- Asymptomatic high-risk patients prior to receipt of immunosuppressive therapy, initiation of hemodialysis or as part of a pre-transplant assessment (Should be performed concurrent with PCR testing)

Note: Indications for SARS-CoV-2 serologic testing may expand when IgM assay or new information becomes available.