# FACT SHEET FOR HEALTHCARE PROVIDERS

University of Arizona Genetics Core for Clinical Services COVID-19 ELISA pan-lg Antibody Test

This Fact Sheet informs you of the significant known and potential risks and benefits of the emergency use of the COVID-19 ELISA pan-Ig Antibody Test.

You should not interpret the results of this test as an indication or degree of immunity or protection from reinfection.

The COVID-19 ELISA pan-Ig Antibody Test is authorized for the detection of antibodies to SARS-CoV-2 in human serum.

All individuals whose specimens are tested with this test will receive the Fact Sheet for Recipients: University of Arizona Genetics Core for Clinical Services - COVID-19 ELISA pan-Ig Antibody Test.

### What are the symptoms of COVID-19?

Many patients with COVID-19 have developed fee and/or symptoms of acute respiratory illness (e.g., cough, dyspnea), although some individuals experie ce only mild symptoms or no symptoms at alk e curre information available to characterize the spectru clinical illness associated with COVI 19 suggests the when present, symptoms include, ugh, st ortness of breath or dyspnea, fever, chills, my headache. sore throat, new loss of taste nell, ausea vomiting or diarrhea. Sign and s any time from 2 to 14 de s after mpton ay appear resorte to the virus, and the median time to sy in onset is approximately 5 days. For further informatic on the symptoms of COVID-19 please see the link privided in "Where can I go for updates and more information?" section.

Public health officials have identified cases of COVID-19 infection throughout the world, including the United States. Please check the CDC COVID-19 webpage (see link provided in "Where can I go for updates and more information?" section at the end of this document) or your local jurisdictions website for the most up to date information.

This test detects human SARS-CoV-2 antibodies that are generated as part of the human adaptive immune response to the COVID-19 virus and is to be performed on only serum specimens.

# What do I need to know about COVID-19 testing?

Current information on COVID-19 for healthcare providers is available C's webpage, Information for Healthcare Professionals (see links provided in "When can I go for updates and more information?" section). links provided in "Where

√ID-19 È⊾ The ( A n-Ig Antibody Test can be ed by. althcal providers to test serum to to SAT 3-CoV-2, indicating recent or prior spon fection

COVID-19 ELISA pan-Ig Antibody Test should ot be used to diagnose or exclude acute infection nd should not be used as the sole basis for tment or patient management decisions. Direct testing for SARS-CoV-2 should be performed if acute infection is suspected.

The COVID-19 ELISA pan-Ig Antibody Test is limited to use by the University of Arizona Genetics Core for Clinical Services, located at the Keating Bioresearch Building, 1657 E. Helen Street, Tucson, AZ 85721, which is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. §263a, and meets requirements to perform high complexity tests.

Please refer to the COVID-19 ELISA pan-Ig Antibody Test instructions for use for additional information.

Specimens should be collected with appropriate infection control precautions. Current guidance is available at the CDC's website (see links provided in "Where can I go for updates and more information?" section).

When collecting and handling specimens from individuals suspected of being infected with COVID-19, appropriate personal protective equipment should be used as outlined in the CDC Interim Laboratory Biosafety Guidelines for Handling and Processing

Report Adverse events, including problems with test performance or results, to MedWatch by submitting the online FDA Form 3500 (https://www.accessdata.fda.gov/scripts/medwatch/index.cfm?action=reporting.home) or by calling 1-800-FDA-1088

**Coronavirus** Disease 2019

(COVID-19)

August 31, 2020

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Specimens Associated with Coronavirus Disease 2019 (COVID-19). For additional information, refer to CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation (PUIs) for Coronavirus Disease 2019 (COVID-19) (see links provided in "Where can I go for updates and more information?" section).

What does it mean if the specimen tests positive for antibodies against the virus that causes COVID-19? A positive test result with the SARS-CoV-2 antibody test indicates that antibodies to SARS-CoV-2 were detected, and the individual has potentially been exposed to COVID-19.

Antibodies to SARS-CoV-2 are generally detectable in blood several days after initial infection. Individuals may have detectable virus present for several weeks following seroconversion. If IgG antibodies are present, it often indicates a past infection but does not exclude recently infected patients who are still contagious.

It is unknown how long antibodies to SARS-CoV-2 will remain present in the body after infection and is not known if they confer immunity to infecti Incorrect assumptions of immunity may lead to premature discontinuation of physical distancin requirements and increase the risk of inc tion fo individuals, their households and the public.

Regardless of the test result, in vidua should continue to follow CDC guidelines educe ie risk of infection, including sog wearing tanc masks.

False positive results may ar due to cross-reactivity from pre-existing antibodies of ther possible causes.

The COVID-19 ELISA pan-Ig Antibody Test has been designed to minimize the likelihood of false positive test results. However, in the event of a false positive result, risks to the patient include the following: risk of infection by exposure to persons with active COVID-19. If a recent infection is suspected a false positive result may lead to a recommendation for isolation of the patient, monitoring of household or other close contacts for symptoms, patient isolation that might limit contact with

family or friends and may increase contact with other potentially COVID-19-infected patients, limits in the ability to work, or other unintended adverse effects. Laboratory test results should always be considered in the context of clinical observations and epidemiological data in making patient management decisions.

All laboratories using this test must follow the standard testing and reporting guidelines according to their appropriate public health authorities.

in if the specimen tests negative for t virus the causes COVID-19? su, with thirdest means that What does it me antibodies again A negative st resu SARS-C 2 specific tib dies were not present in men a ove the mit of detection. However, the spe pati Ints d early fter infection may not have tibo es despite active infection; in det ctable tion, it is certain that all infected patients will add detectable antibody response to le S-CoV-z infection. A negative result should not ed to rule out infection. Direct testing of SARSbe V-2 should be performed if acute infection is spected.

he absolute sensitivity of the COVID-19 ELISA pan-lg Antibody Test is unknown.

Risks to a patient of a false negative result include: restriction of activities potentially deemed acceptable for patients with evidence of an antibody response to SARS-CoV-2, lack of monitoring of infected individuals and their household or other close contacts for symptoms resulting in increased risk of spread of COVID-19 within the community, or other unintended adverse events

### What is an EUA?

The United States FDA has made this test available under an emergency access mechanism called an Emergency Use Authorization (EUA). The EUA is supported by the Secretary of Health and Human Service's (HHS's) declaration that circumstances exist to justify the emergency use of in vitro diagnostics (IVDs) for the detection and/or diagnosis of the virus that causes COVID-19.

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An IVD made available under an EUA has not undergone the same type of review as an FDA-approved or cleared IVD. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, available alternatives, and based on the totality of scientific evidence available, it is reasonable to believe that this IVD may be effective at diagnosing recent or prior infection with SARS-CoV-2 by identifying individuals with an adaptive immune response to the virus that causes COVID-19..

The EUA for this test is in effect for the duration of the COVID-19 declaration justifying emergency use of IVDs, unless terminated or revoked (after which the test may no longer be used).

What are the approved available alternatives? There are no approved available alternative tests. FDA has issued EUAs for other tests that can be found at: https://www.fda.gov/emergency-preparedness-andresponse/mcm-legal-regulatory-and-policyframework/emergency-use-authorization.

August 31, 2020

**Coronavirus** Disease 2019 (COVID-19)

## Where can I go for updates and more information?

#### CDC webpages:

General: https://www.cdc.gov/COVID19 Symptoms:

https://www.cdc.gov/coronavirus/2019-ncov/symptomstesting/symptoms.html

## Healthcare Professionals:

https://www.cdc.gov/cor avirus/2019-nCoV/guidance-hcp.html Information for Lak https://www.cdc.gov/coronavirus/2019dito

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ction Con https://www.cdc.gov/coronavirus/2019ontrol/index.html

#### FDX webpages:

In

eneral: www.fda.gov/novelcoronavirus UAs: (includes links to fact sheet and manufacturer's instructions) ttps://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/vitro-diagnosticseuas

### COMPANY/LAB NAME:

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