

1. What is COVID-19 rapid antigen testing?

Antigen tests can be used for point-of-care testing to detect COVID-19 faster than the regular laboratory-based polymerase chain reaction (PCR) test, providing results in 15-20 minutes.

2. When should you perform a rapid antigen test?

Antigen testing should only be performed on asymptomatic individuals for screening purposes only using a testing device that has been approved by Health Canada and is available in Ontario.

Antigen tests should NOT be used for diagnosis of COVID-19 infection. Any individual who is symptomatic or is a contact of a confirmed case of COVID-19 should be directed to a community assessment centre to seek PCR testing.

3. If an individual previously tested positive for COVID-19, should they be tested again?

An individual who has previously had laboratory-confirmed COVID-19 AND was cleared by the local public health unit (PHU), should not be re-tested for surveillance purposes due to persistent shedding in the 3 months after they were cleared. Previously cleared individuals within the 3-month window should continue to follow public health guidance for COVID-19 prevention, including self-isolating after high-risk exposures to cases. Once the three months has passed since being cleared of COVID-19 rapid antigen testing can be offered again.

4. How does an antigen test compare to regular laboratory-based PCR tests?

Compared to the regular laboratory-based PCR test, an antigen test has a higher risk of a false negative and false positive results. The rapid antigen test is also less sensitive than the PCR test however due to increased frequency of testing is a reliable tool.

5. If I have a positive antigen test, what do I do next?

If an employee tests positive for COVID-19 with a rapid antigen test they will immediately leave the work location and notify their program manager. The employee will need to complete a PCR (polymerase chain reaction) COVID-19 test at a local community testing centre.

If a visitor tests positive for COVID-19 with a rapid antigen test they will not be able to enter the support location and will need to complete a PCR COVID-19 test at a local testing centre.

6. What type of swabs are included in the rapid antigen test kits?

The Abbott Panbio rapid antigen test kits come with a nasal swab that can be used to collect nasal specimens. A mid nasal swab is inserted approximately 1 inch into the nose making it less invasive than PCR testing.

7. Is a new specimen required for the confirmatory laboratory-based PCR test when an individual tests positive on the rapid antigen test?

Yes, a new specimen is required from the individual that tests positive on the rapid antigen test for the confirmatory laboratory-based PCR test. The used test kit is to be discarded in the bio-hazard waste along with other used test kits.

8. Does a preliminary positive result on the Rapid Test mean the site is in outbreak?

No, a preliminary positive result does not mean the site is in outbreak. The individual who tested positive is required to have a confirmatory PCR test. Local public health units will remain the authoritative body on the declaration of a COVID-19 outbreak, which will continue to be based on the presence of positive results on a confirmatory, lab-based PCR.

9. Do COVID-19 rapid antigen tests detect the variants of concern?

Antigen tests detect the nucleocapsid protein rather than the spike protein (where the mutation typically exists in the variants of concern) and therefore is not expected to be affected by a mutation in the spike protein. With this, antigen tests should be able to detect COVID-19 infection caused by a variant of concern.

10. If an individual has been vaccinated for COVID-19, do they still need to be tested?

Individuals who have received a COVID-19 vaccine, regardless of whether they received one or two doses, are still able to receive an accurate result from a rapid antigen test. Vaccinated individuals should be included in rapid antigen screening initiatives, as it is unknown at this time if they can still transmit COVID-19 despite being vaccinated.

11. What information needs to be included on the pre-printed staff labels while conducting the rapid antigen test?

At least 2 unique participant identifiers (e.g., name and date of birth) should be on both the test tube and corresponding test cartridge to avoid errors.

12. Can you explain the importance of squeezing the swab?

When you insert the swab into the extraction tube, you must immerse the swab into the buffer. The tube is flexible, and you should squeeze the tube and pull the swab up through your squeezed fingers. This helps release the sample into the buffer.

13. If we are labelling the extraction tube and then disposing of the tube in a biohazard container, what happens to that staff personal health information?

The extraction tubes should be labelled with 2 unique participant identifiers (e.g., name and date of birth). It is standard practice for tubes with these health identifiers do go into biohazard bags and disposed of according to local regulations. Biohazardous material is traditionally incinerated, resulting in the destruction of any participant identifiers.