



Date: June 24, 2020
To: All Health Care Providers
From: Alberta Precision Laboratories (APL) – Public Health Laboratory
Re: Serology Testing for COVID-19

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Key messages:

- Beginning **July 2, 2020**, serology for COVID-19 will be available primarily for serosurveys and research use.
- Serology should **NOT** be used for diagnosis of acute COVID-19 infection.
- A positive serology does NOT mean a patient is immune to COVID-19.
- Diagnostic testing for acute COVID-19 continues to be done by polymerase chain reaction (PCR) of nasopharyngeal or throat swabs.

Clinical Indications for Serology:

- All serology requests should be discussed with a specialist and **must be approved by the Virologist-on-call prior to testing.**
- There are very few situations in which COVID-19 serology may help with patient diagnosis or management. These may include:
 - [Multisystem inflammatory syndrome](#)
 - Pernio-like acral lesions or Chilblains (COVID-toes)
 - Vasculitis in young children
 - Unusual neurologic or thromboembolic events
- Frequently asked questions about COVID-19 can be found here: [COVID-19 FAQ](#)
- A news release from Alberta Health about other serology studies can be [found here](#).

COVID-19 serology test method:

- COVID-19 serology testing (SARS-CoV-2 IgG assay, Abbott Laboratories) will be implemented July 2, 2020.
- Detection of IgG antibodies was very high at ≥21 days post-symptom onset.
- Use of serology for clinical use prior to 21 days post-symptom onset is **not recommended**.
- No cross-reactivity to other respiratory viruses was detected in our evaluation of the assay.

Inquiries and feedback may be directed to: Dr. Carmen Charlton, Clinical Microbiologist,
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This bulletin has been reviewed and approved by:

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