

SARS-CoV-2 (COVID-19) Serology / Antibody Test Results Guide



WHAT YOUR RESULTS SUGGEST:

If IgG to COVID-19 is NEGATIVE

- Suggests that as of the time of this test, you have **NOT** mounted an antibody response to the COVID-19 coronavirus.
- Indicates that you have **NOT** previously been infected, nor have you developed neutralizing antibodies.
- Suggests that you are **SUSCEPTIBLE** to infection if you come into contact with SARS-CoV-2 (the COVID-19 virus).

If IgG to COVID-19 is POSITIVE

- Suggests you **HAVE** had a **prior infection/ exposure** to SARS-CoV-2 that may now provide neutralizing antibody and may also provide some protective immunity against reinfection with the COVID-19 coronavirus.
- In conjunction with public policy and primary care physician, can also facilitate contact tracing, surveillance and/or occupational return-to-work policies.

IMPORTANT TEST DETAILS:

Antibodies have long been used as markers of exposure or prior infection within the field of Infectious Disease. IgG antibodies become detectable later in the infection; appearing about 7-8 days after initial infection.

The objective of this qualitative diagnostic test is to detect the presence of IgG antibodies in your blood, which is immune system response to a component of the SARS-CoV-2 virus (the virus that has been identified as causing COVID-19 acute respiratory syndrome in humans).

This SARS-CoV-2/ COVID-19 test is very sensitive and capable of detecting very low concentrations of IgG antibodies directed toward a SARS-CoV-2 antigen (protein tag specific to the coronavirus that causes COVID-19).

DISCLAIMER:

➤ Results of this assay should be used in conjunction with clinical findings and other serological tests and should not be used as the sole basis for the diagnosis and exclusion of novel coronavirus pneumonia.

➤ Not all disease positive patients are necessarily positive for the COVID-19 antigens. Negative results do not rule out SARS-CoV-2 infection, particularly in those who have been in contact with the virus. Follow-up testing with a molecular diagnostic (nucleic acid/ PCR test) should be considered to rule out active infection in these individuals.

➤ Positive results (cross-reactivity) may be due to past or present infection with non-SARS-CoV-2 coronavirus strains, such as coronavirus HKU1, NL63, OC43, or 229E.

➤ This LabCorp Antibody/Serology testing shows whether someone has been exposed to or was potentially **PREVIOUSLY INFECTED** with the coronavirus and developed the antibodies to fight the infection. It doesn't guarantee immunity, but some physicians suggest a positive antibody test indicates that a patient may have some level of protection against reinfection.

➤ For someone trying to detect the presence of viral RNA (nucleic acid) for **CURRENT, ACTIVE INFECTION** with SARS-CoV-2, a nasal swab-based testing for RNA would need to be performed via qPCR test.