

Ambulatory Negative Covid Test Algorithm—Symptomatic Patient

Estimates of the sensitivity of covid 19 PCR testing vary widely but may be in the 70-90% range in ambulatory patients. Sensitivity highest within 3-5d after symptoms onset due to high viral loads.

Factors that may increase false negatives:

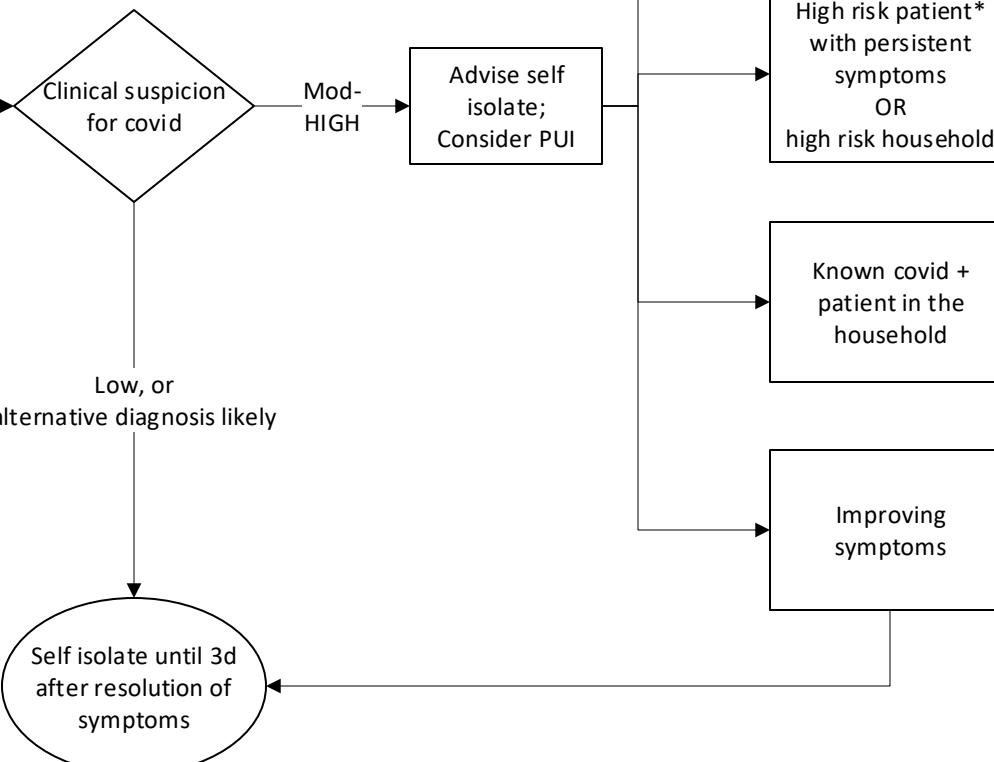
Assay used:

- Lab-based PCR (e.g. YNHH, Mayo, Quest) estimated at 85-90% sensitive
- POC tests (e.g. Abbott ID now and others) predicted to be 10% lower—see orange box

Other factors:

- Poor sample quality or sampling technique
- Advanced disease stage—viral loads are highest EARLY in disease
- Variable viral shedding, including patient-specific factors
- Disease severity

NEGATIVE test result in a **SYMPOMATIC** patient



- Retest for covid in 2-3d
- If initial test was Abbott POC assay, retest using lab-based PCR test
- Ensure high quality sample
- Consider additional diagnostic testing (e.g. labs, CT scan) if can be done safely
- Consider home O2 sat monitoring
- Refer to ED if clinically warranted

- Presume covid positive and self isolate for at least 7d and 72h after symptom resolution;
- Repeat testing not needed unless progressive symptoms

Abbott ID NOW assay

- Currently available by drive through without clinician order at Sargent Drive in New Haven
- 5-15 min TAT
- LESS SENSITIVE than lab assays—estimated at 10% less but so far actual comparative studies are limited
- Abbott is revising methodology in real time (swab type, dilution, etc) in response to experience so this info may change
- Results will be available in Epic via Care Everywhere but may not be pushed to PCPs