

ANTI-
SARS-CoV-
2 TOTAL
ANTIBODY

**Orderable - ACOV2/
GENX - "Priority testing for monoclonal
antibody treatment" at PHOL Toronto**
Turnaround Time: Up to 48 hours

Alternate Name(s):

Anti-SARS-CoV-2 Antibody
COVID Serology
Anti-SARS-CoV-2 (IgG + IgM)

Specimen:

Adult:	Pediatric:
4.5 mL Green (Lithium Heparin) top Vacutainer	0-2 years: 0.5 mL Green or Gold top Microtainer 2-10 years: 3 mL Green top or 2 mL Gold top tube
Serum from a 5 mL Gold top or 6 mL Red top is also acceptable.	

Collection Information:

Collect blood aseptically in a Vacutainer tube.

Reference Ranges:

See report

Interpretive Comments:

Interpretive Comments: Testing detects both IgG and IgM antibodies (total) to SARS-CoV-2 nucleocapsid (N) antigen.

Negative Results:

Negative results do not rule out acute SARS-CoV-2 infection. If acute infection is suspected, consider SARS-CoV-2 RNA testing or repeat testing in 7 to 10 days. False-



Laboratory:
Core Lab



Requisition:
GENERAL LABORATORY
REQUISITION



Method of Analysis:
Test performed by Roche
Elecsys Anti-SARS-CoV-2
Electrochemiluminescence
immunoassay targeting
the nucleocapsid (N)
antigen.



Test Schedule:
Monday - Friday
0800 - 1600 h



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negative results may occur in immunocompromised individuals or those with mild illness. Negative results do not preclude SARS-CoV-2 infection and should not be used as the sole basis for patient management decisions.

Positive Results:

Presence of SARS-CoV-2 antibodies indicates current or previous infection. False-positive results may occur due to cross-reacting antibodies or other causes. It is unknown whether antibodies indicate protective immunity.

Comments:

Serology testing examines a person's blood to see if they have antibodies to COVID-19. Testing detects both IgG and IgM antibodies (total) to SARS-CoV-2 nucleocapsid (N) antigen of the SARS-CoV-2 virus.

Serology testing is limited to the currently approved uses in Ontario ([See PHO COVID-19 Serology](#)) including:

- The investigation of suspected cases of Multisystem Inflammatory Syndrome in Children (MIS-C) or adults (MIS-A)
- **With Approval:** Serology may be considered in patients with severe illness who have tested repeatedly negative by PCR and where serology results would be a helpful adjunctive tool for clinical/public health action and decision making.
- **Treatment decisions for patients eligible for monoclonal antibody therapy,** Outlined by the Science Table Brief. Contact Dr Michael Knauer, Clinical Biochemist or the Clinical Biochemist on-call to arrange for ***“Priority testing for monoclonal antibody treatment” at PHOL Toronto.*** This testing requires special handling follow instructions on PHOL website.

Serology testing should **NOT** be used for:

- the diagnosis of acute infection or determining if a patient is infectious
- determining immune status of the patient

Please contact Dr Michael Knauer, Clinical Biochemist (ext. 52237 or pager 17130) for questions and approval.

Storage and Shipment:

Samples stable 7 days at 2-8 °C, freeze at -20 °C for longer storage.