



Suggestions for COVID-19 antibody assay clinical comments

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Consistent messages about the interpretation of positive SARS-CoV-2 antibody are important. This is especially so with the lack of current data to associate any such positive result with clear evidence of protection against reinfection.

Suggestions for clinical comments in the light of current data are provided in this document. The EQUIVOCAL category may not be needed, depending on local practice.

SARS-CoV-2 antibody DETECTED

Consistent with exposure to SARS-CoV-2 at some time.

This test detects IgG/both IgG and IgM, but a history of symptoms or confirmed COVID-19 at least six weeks ago makes current infection less likely. At this time, it is not known if this result excludes re-infection.

SARS-CoV-2 antibody EQUIVOCAL

The weakly reactive antibody result is difficult to interpret. Please send a repeat clotted blood in two weeks.

SARS-CoV-2 antibody NOT detected

No serological evidence of SARS-CoV-2 infection. Consider as susceptible. Please send a combined nose and throat swab for SARS-CoV-2 PCR if infection in the past week is suspected, or another clotted blood sample for repeat serology in four weeks.