

Considerations for Interpreting Antigen Test Results in Nursing Homes

Testing of symptomatic residents or HCP

- If an antigen test is positive, no confirmatory test is necessary
 - Residents should be placed in Transmission-Based Precautions or HCP should be excluded from work.
 - If the resident or HCP is the first positive test for SARS CoV-2 within the facility (i.e., an index case), an outbreak response should be initiated immediately*
- If an antigen test is presumptive negative, perform RT-PCR immediately (i.e., within 48 hours)
 - Symptomatic residents and HCP should be kept in transmission-based precautions or excluded from work until RT-PCR results return
 - Some antigen platforms have higher sensitivity when testing individuals within 5 days of symptom onset. Clinical discretion should be utilized to determine if individuals who test negative on such platforms should be retested with RT-PCR.
 - Note: If an individual has recovered from SARS-CoV-2 infection in the past 3
 months and develops new symptoms suggestive of COVID-19, alternative
 diagnoses should be considered prior to retesting for SARS-CoV-2.

Testing of asymptomatic residents or HCP in nursing homes as part of an outbreak response*

- If an antigen test is positive, no confirmatory test is necessary
 - Residents should be placed in Transmission-Based Precautions, and HCP should be excluded from work.
- If an antigen test is presumptive negative, residents should be placed in *appropriate* precautions for facilities with an outbreak. HCP should be allowed to continue to work with continued symptom monitoring. The facility should continue serial viral testing (antigen or RT-PCR) every 3-7 days until no new cases are identified for a 14-day period.
- Note: Asymptomatic individuals who have recovered from SARS-CoV-2 infection in the
 past 3 months and live or work in a nursing home performing facility-wide testing
 should not be tested for SARS-CoV-2.

Testing of asymptomatic HCP in nursing homes without an outbreak per CMS recommendations

CMS recommends initial testing of all HCP as part of the nursing home reopening process and serial testing of HCP at an interval based on local incidence of COVID-19.

- If an antigen test is positive, perform confirmatory RT-PCR test within 48 hours of the
 antigen test, especially in counties with low prevalence. If confirmatory test is
 performed, HCP should be excluded from work until confirmatory test results are
 completed.
 - If the confirmatory test is positive, then exclude the HCP from work and initiate an outbreak response including facility-wide testing of all residents and HCP.

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.



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- o If the confirmatory test is negative, discuss results with the local public health department to determine how to interpret the discordant results and next steps. The incidence of SARS-Co-V-2 infection in the local community can help interpret the likelihood of a false positive antigen test. The time between antigen test and RT-PCR test should also be considered. If RT-PCR is performed >48 hours after an antigen test, it is possible that the viral dynamics have changed during the time between antigen and RT-PCR and testing. Therefore, the antigen test may indicate a true infection even if the RT-PCR is negative.
- If an antigen test is presumptive negative, allow HCP to continue to work. The HCP should continue to monitor for symptoms and serial testing should continue per CMS recommendations.
- Note: HCP who have recovered from SARS-Co-V-2 infection in the past 3 months and are asymptomatic should not be tested for SARS-CoV-2.

Notes:

*A COVID-19 outbreak response in a nursing home is triggered when a resident or HCP tests positive for SARS-CoV-2. An index infection in a resident should include SARS-CoV-2 infections that originated in the nursing home and should NOT include:

- Residents who were known to have COVID-19 on admission to the facility and were placed into Transmission-Based Precautions.
- Residents who were placed into Transmission-Based Precautions on admission and developed SARS-CoV-2 infection within the 14-day period after admission.

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https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-antigen-testing.html

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