

Ministry of Health

COVID-19 Guidance: Considerations for Rapid Antigen Screening

Version 1.0 December 30, 2020

This document is intended for individuals or organizations conducting rapid antigen screening in Ontario. This guidance provides basic information only. It is not intended to take the place of medical advice, diagnosis, treatment, or legal advice.

Rapid antigen testing is used for screening purposes only and should NOT be used for diagnosis of acute COVID-19 infection. Testing does not prevent someone from getting COVID-19.

Rapid antigen screening can be thought of as an additional screening tool.

Rapid antigen screening does not replace public health measures such as symptom screening, physical distancing, masking and hand hygiene.

Rapid antigen screening does not replace requirements to protect the health and safety of workers.

Please see the [COVID-19 Provincial Testing Guidance](#) for more information. Anyone who falls within the current Provincial Testing Guidance should continue to seek testing at available at participating pharmacies and assessment centres.

In the event of any conflict between this guidance document and any applicable legislation or orders or directives issued by the Minister of Health or the Chief Medical Officer of Health (CMOH), the legislation, order or directive prevails. Please see [Ontario's COVID-19 website](#) for more general information as well as for updates to this document.

Rapid Antigen Screening in Ontario

General Overview

- Organizations should develop a [COVID-19 Workplace Safety Plan](#) to minimize the risk of COVID-19. This includes having written policies and procedures that are in alignment with any sector specific [guidance](#) issued by the Chief Medical Officer of Health and any other specific measures recommended by public health agencies. See [Resources to Prevent COVID-19 in the Workplace](#) for more information.
- Employers are required to follow the [Occupational Health and Safety Act \(OHSA\)](#).
 - All workplace parties (e.g. employers, supervisors, workers) have statutory responsibilities related to [health and safety](#) in the workplace.
 - There are no specific requirements in the [OHSA](#) or its regulations for employers to conduct testing of workers.
- Currently all rapid antigen screening is being conducted using the Abbott Panbio™ test. In the future, additional devices such as the BD Veritor may be used for rapid antigen screening, pending Health Canada approval and availability.
- Prior to initiating screening, organizations must contact their [local public health unit](#) to make them aware that they will be engaging in rapid [screening](#).

Eligibility

- Subject to the specimen collection described below, rapid antigen screening may only be performed on asymptomatic individuals using a testing device that has been approved by Health Canada and is available in Ontario.
- Any individual who is symptomatic or a contact of a confirmed case should be directed to their healthcare provider, to an assessment centre, or participating licensed community lab.
- In general, individuals who have previously been infected with and recovered from COVID-19 should not undergo repeat testing/antigen screening, unless otherwise directed by [local public health](#) or their health care provider as per their symptom and exposure history.

Specimen Collection

- Nasopharyngeal swab (NPS) is the specimen collection type with highest sensitivity and it is this type of specimen collection that is authorized by Health

Canada for use with the Abbott Panbio™ rapid antigen screening test.

- Nasopharyngeal swabs require a specialized workforce and may limit the number of settings that are able to adopt the test.
- Nasopharyngeal swabs may be uncomfortable, particularly where frequent testing is proposed.
- Alternate specimen collection types are also acceptable, including a combined swab of throat and both nares or a deep nasal swab.
- An alternate type of specimen collection may have the advantage of:
 - Increasing the accessibility of tests for screening as a broader range of health care professionals can collect the specimen
 - Reducing the inconvenience or discomfort due to repeated nasopharyngeal swabs
 - Improved adherence to screening programs
 - Potential for more immediate and robust uptake of this test during the second wave in Ontario
- Nasal and throat specimen collection may be less sensitive than nasopharyngeal specimens for the detection of COVID-19.
 - For more details of the effect of specimen collection on sensitivity please see <https://www.publichealthontario.ca/-/media/documents/ncov/evidence-brief/2020/08/eb-covid-19-pcr-testing-alternative-collection-testing.pdf?la=en>
- Frequency of specimen collection and screening:
 - For asymptomatic individuals in high prevalence areas (Yellow/Orange/Red/Grey) specimen collection and screening should be performed 2-3 times per week.
 - For low prevalence areas (Green), specimen collection and screening should be performed 1-2 times per week.

Conducting the Test

- All point-of-care tests, including rapid antigen screening, must be performed in a licensed specimen collection centre or a laboratory licensed under the [Laboratory and Specimen Collection Centre Licensing Act \(LSCCLA\)](#) or by certain regulated health professionals that are specifically exempt from the licensing requirements of the [LSCCLA](#).

- Health care professionals are responsible for satisfying all applicable legislative and regulatory requirements, including those under the [LSCCLA](#), [Health Protection and Promotion Act \(HPPA\)](#), [PHIPA](#), [Health Care Consent Act \(HCCA\)](#), [Regulated Health Professions Act \(RHPA\)](#).
- A positive result on a rapid antigen screening test is considered a preliminary positive and should be followed up with a laboratory-PCR test to act as a confirmatory test, as per [Provincial Testing Guidance](#). Health care professionals must ensure that all personal and health information will be collected, used, disclosed in accordance with relevant legislation, including the [Personal Health Information Protection Act \(PHIPA\)](#).

Organizational Responsibilities

Organizations that conduct rapid antigen screening are responsible for:

- Retaining existing public health measures such as symptom screening, appropriate distancing, using personal protective equipment and hand-washing activities. Rapid antigen screening is not a replacement for any of these measures.
- Following all public health guidance for handling a presumptive positive case and requiring that the employee receive a laboratory PCR test within 24 hours.
- Ensuring any personal health information that is collection must follow relevant legislation including the Personal Health Information Protection Act (PHIPA)
- Cooperating with their local public health unit in the event of a potential workplace exposure of COVID-19 or an outbreak investigation.

Reporting Requirements

- Organizations should have a systematic procedure in place to provide follow up on results.
- Organizations should have plans in place to respond should any individuals be exposed to or diagnosed with COVID-19.
- For tests performed in a licensed laboratory, all test results must be uploaded into the Ontario Laboratory Information System (OLIS).
- All preliminary positive COVID-19 tests performed must be reported to the local public health unit in accordance with the [LSCCLA](#) and the [HPPA](#).