

FACT SHEET FOR HEALTHCARE PROVIDERS

University of California San Diego Health
UCSD RC SARS-CoV-2 Assay

July 31, 2020

Coronavirus
Disease 2019
(COVID-19)

This Fact Sheet informs you of the significant known and potential risks and benefits of the emergency use of the UCSD RC SARS-CoV-2 Assay that has been issued an Emergency Use Authorization (EUA) by FDA.

The UCSD RC SARS-CoV-2 Assay is authorized for use on certain respiratory specimens collected from individuals suspected of COVID-19 by their healthcare provider.

All patients whose specimens are tested with the UCSD RC SARS-CoV-2 Assay will receive the Fact Sheet for Patients: UCSD RC SARS-CoV-2 Assay.

What are the symptoms of COVID-19?

Many patients with confirmed COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g., cough, dyspnea). The current information available to characterize the spectrum of clinical illness associated with COVID-19 suggests that symptoms include cough, shortness of breath or dyspnea, fever, chills, myalgias, headache, sore throat or new loss of taste or smell. Based on what is known about the virus that causes COVID-19, signs and symptoms may appear any time from 2 to 14 days after exposure to the virus, and the median incubation period is approximately 5 days. For further information on the symptoms of COVID-19 please see the link provided in “*Where can I go for updates and more information?*” section at the end of this document.

Public health officials have identified cases of COVID-19 infection throughout the world, including the United States. Please check the CDC COVID-19 webpage (see link provided in “*Where can I go for updates and more information?*” section) for the most up to date information.

What do I need to know about COVID-19 testing?

Current information on COVID-19 for healthcare providers is available at CDC’s webpage, *Information for Healthcare Professionals* (see links provided in “*Where can I go for updates and more information?*” section).

This test is to be performed only using self-collected nasal specimens (collected on site) and certain clinician-collected upper respiratory specimens collected from individuals suspected of COVID-19 by their healthcare provider.

- The UCSD RC SARS-CoV-2 Assay is authorized for use on clinician-instructed self-collected nasal swab specimens (collected on site), and clinician-collected upper respiratory specimens (nasopharyngeal, mid-turbinate, anterior nares or oropharyngeal swab specimens) collected from individuals suspected of COVID-19 by their healthcare provider.
- The UCSD RC SARS-CoV-2 Assay is authorized for the detection of COVID-19 in individuals suspected of COVID-19 by their healthcare provider.
- The UCSD RC SARS-CoV-2 Assay is also authorized for the qualitative detection of nucleic acid from the SARS-CoV-2 in pooled samples containing up to five individual upper respiratory specimens (nasopharyngeal, mid-turbinate, anterior nares or oropharyngeal specimens) that are collected under observation using individual vials containing transport media from individuals suspected of COVID-19 by their healthcare provider.
- The UCSD RC SARS-CoV-2 Assay is only authorized for use at the University of California San Diego Health located at Center for Advanced Laboratory Medicine, which developed the test for COVID-19, is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. §263a, and meets requirements to perform high complexity tests.

Specimens should be collected with appropriate infection control precautions. Current guidance is available at the CDC’s website (see links provided in “*Where can I go for updates and more information?*” section).

When collecting and handling specimens from individuals suspected of being infected with COVID-19, appropriate

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personal protective equipment should be used as outlined in the CDC *Interim Laboratory Biosafety Guidelines for Handling and Processing Specimens Associated with Coronavirus Disease 2019 (COVID-19)*. For additional information, refer to CDC *Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation (PUIs) for Coronavirus Disease 2019 (COVID-19)* (see links provided in “Where can I go for updates and more information?” section).

What does it mean if the specimen tests positive for the virus that causes COVID-19?

A positive test result for COVID-19 indicates that RNA from SARS-CoV-2 was detected, and therefore the patient is infected with the virus and presumed to be contagious.

Laboratory test results should always be considered in the context of clinical observations and epidemiological data in making a final diagnosis and patient management decisions. Patient management should be made by a healthcare provider and follow current CDC guidelines.

The UCSD RC SARS-CoV-2 Assay has been designed to minimize the likelihood of false positive test results. However, in the event of a false positive result, risks to patients could include the following: a recommendation for isolation of the patient, monitoring of household or other close contacts for symptoms, patient isolation that might limit contact with family or friends and may increase contact with other individuals with COVID-19, limits in the ability to work, the delayed diagnosis and treatment for the true infection causing the symptoms, unnecessary prescription of a treatment or therapy, or other unintended adverse effects.

The laboratory using this test must follow the standard testing and reporting guidelines according to their appropriate public health authorities.

What does it mean if the specimen tests negative for the virus that causes COVID-19?

A negative test result for this test means that SARS-CoV-2 RNA was not present in the specimen above the limit of detection. However, a negative result does not rule out COVID-19 and should not be used as the sole basis for treatment or patient management decisions. A negative result does not exclude the possibility of

COVID-19. Specimens with low viral loads may not be detected in sample pools due to the decreased sensitivity of pooled testing.

When diagnostic testing is negative, the possibility of a false negative result should be considered in the context of a patient’s recent exposures and the presence of clinical signs and symptoms consistent with COVID-19. The possibility of a false negative result should especially be considered if the patient’s recent exposures or clinical presentation indicate that COVID-19 is likely, and diagnostic tests for other causes of illness (e.g., other respiratory illness) are negative. If COVID-19 is still suspected based on exposure history together with other clinical findings, re-testing with an alternate method should be considered by healthcare providers in consultation with public health authorities.

Risks to a patient of a false negative include: delayed or lack of supportive treatment, lack of monitoring of infected individuals and their household or other close contacts for symptoms resulting in increased risk of spread of COVID-19 within the community, or other unintended adverse events.

What is an EUA?

The United States FDA has made this test available under an emergency access mechanism called an Emergency Use Authorization (EUA). The EUA is supported by the Secretary of Health and Human Service’s (HHS’s) declaration that circumstances exist to justify the emergency use of in vitro diagnostics (IVDs) for the detection and/or diagnosis of the virus that causes COVID-19.

An IVD made available under an EUA has not undergone the same type of review as an FDA-approved or cleared IVD. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, available alternatives, and based on the totality of scientific evidence available, it is reasonable to believe that this IVD may be effective in diagnosing COVID-19.

The EUA for this test is in effect for the duration of the COVID-19 declaration justifying emergency use of IVDs, unless terminated or revoked (after which the test may no longer be used).

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What are the approved available alternatives?

There are no approved available alternative tests. FDA has issued EUAs for other tests that can be found at: <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization>

Where can I go for updates and more information?

CDC webpages:

General: <https://www.cdc.gov/COVID19>

Symptoms:

<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

Healthcare Professionals:

<https://www.cdc.gov/coronavirus/2019-nCoV/guidance-hcp.html>

Information for Laboratories:

<https://www.cdc.gov/coronavirus/2019-nCoV/guidance-laboratories.html>

Laboratory Biosafety:

<https://www.cdc.gov/coronavirus/2019-nCoV/lab-biosafety-guidelines.html>

Isolation Precautions in Healthcare Settings:

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

Specimen Collection:

<https://www.cdc.gov/coronavirus/2019-nCoV/guidelines-clinical-specimens.html>

Infection Control:

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/index.html>

FDA webpages:

General: www.fda.gov/novelcoronavirus

EUAs: (includes links to patient fact sheet and manufacturer's instructions) <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/vitro-diagnostics-euas>

LABORATORY CONTACT:

Contact information for the University of California San Diego Health must be provided to the Healthcare Provider in the test report or material/mechanism (e.g. email) that accompanies this Fact Sheet and the test results.

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