Frequently Asked Questions
Abbott Panbio Point of Care Covid 19 testing

What if I don’t see my question on this list of Frequently Asked Questions?
   a. Please email any additional questions you have to POCTlab@saskhealthauthority.ca and
      the point of care team will respond to your inquiry.

Set up and Training

1. Who can perform Abbott Panbio Covid tests?
   a. The classification to perform Panbio is open to those trained on the technique and
      reporting part of the process, no restrictions. Training is required to be signed off for
      due diligence and alignment with insurance purposes of accountability.

2. Do I need to fill the lab License document for Panbio point of care testing?
   Antigen testing has been deregulated, and no longer requires a lab license.

3. What is the temperature log? How do I know the temperature of the room?
   a. The product must remain between 15-30 degrees therefore as per laboratory protocol
      the temperature of the room needs to be recorded daily. A log is provided in the Clinical
      Procedure.
   b. Each location or situation may be different:
      i. If the room has a thermostat then you can record that temperature.
      ii. You may also use a thermometer that measures the temperature of the room,
          and cartridges.
      iii. If the hospital has an energy room that is tracking room temperature and
          monitoring fluctuations that would be acceptable, as long as the Super-User has
          confirmed that they are able to obtain those records if a product fails to
          perform as expected.

4. What are the temperature restrictions for the test to be performed?
   a. The kits are stable between 2-30 degrees as the IFU indicates. It is recommended to run
      the tests with the kits at room temperature so if it is incredibly cold in the locations you
      are running them in Saskatchewan, a tent may be necessary to ensure the components
      of the kits are kept between 15-30 degrees Celsius while running the tests. The
      alternative is to take the samples outside and run the test inside (the samples are stable
      for up to 2 hours at room temp once you collect the sample and place it in the
      extraction tubes).

Specimen Swabs

1. Abbott Panbio swabs seem different than NP swabs?
   a. Yes that is correct. The swabs in the Panbio kit are meant only to be used with the
      Panbio device. They are currently an NP swab, but Abbott Panbio has recently been
      approved for a nasal swab, so watch the labelling on the packaging for updates.
b. If you have to use an alternate swab due to dropping or contaminating the swab provided with the Panbio test kit you may use an NP or Nasal swab that has not been placed in transport media

2. How long is the sample stable?
   a. It is always best to test a fresh sample, however if that is not possible a swab may be held in the buffer solution at room temperature up to two hours.

3. Is the Confirmatory specimen always sent to a reference SHA Molecular Diagnostic laboratory for PCR testing?
   a. Collect a New NP swab, place in viral transport media, and refer to your local SHA Laboratory for referral to a Molecular Diagnostic laboratory per usual referral patterns.

Temperature Monitoring

1. How often does the temperature need to be monitored and recorded?
   a. The temperature where the testing occurs is to be monitored daily and recorded on the POCT Room Temperature Chart. The acceptable range is 15-30 degrees Celsius. No special thermometer is required as long as it accurately displays the temperature in Celsius. Keep the thermometer close to where the testing occurs.

2. The package insert states to keep the test devices at 2 – 30 degrees Celsius. The POCT Room Temperature Chart only shows 15-30 degrees Celsius?
   a. The test devices can be stored at 2 – 30 degrees Celsius, however the stability of the test kits does not change if stored at room temperature. The test kits must be at room temperature prior to using to perform a test so it is recommended the test kits are stored at room temperature eliminating the need for a warm up period.

Testing

1. There is not enough test solution after adding the swab to the buffer to perform the test.
   a. The 300 microliters of buffer added to the test tube should be sufficient to run more than one test. Make sure you are squeezing out the swab to remove all collected sample into the buffer and break up mucous. Do not add additional buffer as this will dilute the sample possibly causing inaccurate results.
   b. If you believe the NP swab is plugging the dropper
      Instruction was to pull up the swab, hold tube between fingers and then break off at break line. This relieves pressure on the dropper, with a shorted NP Swab.
   c. With cap on tight, tap to ensure NP swab is not logged in dropper, or a mucous plug is not blocking the dropper.

2. What might be causing my dropper to become blocked?
   a. Some tips include recapping the tube with the white cap and flick the tube vigorously to dislodge the “mucousy” swab if it gets lodged in the bottom.
   b. Another suggestion is recapping the tube as well and inverting it a few times. These methods will not have an impact on the reaction itself.
   c. Pull up the swab, hold tube between fingers and then break off at break line. This relieves pressure on the dropper, with a shorted NP Swab.
3. Can the buffer be dispensed prior to testing and how long is it stable?
   a. If extraction tubes are pre-poured and the caps are placed on them, there’s no real difference between this and the buffer being in the buffer bottle (there are no active reagents in the buffer). Ensure that dispensing the buffer does not lead to mixes the components of the kits. The buffer and tests strips must be from the same original test kit.

**Differences in type of testing platforms**

1. Do all the testing platforms find all variants of COVID 19?
   a. All COVID-19 tests in SK, including POC tests, will *detect* all known variants of COVID-19 at this time. However, none of the diagnostic tests can differentiate the virus into which variant it represents. This requires additional analysis (i.e. genetic sequencing) which is done at reference labs – this is the reason we are asking all sites to submit their positive specimens to RRPL as soon as they are reported.

**Quality Control**

1. When do I run positive and negative Quality Controls?
   a. Roy Romanow Provincial Laboratory performs QC each time a new lot is shipped to Saskatchewan, so you do not need to run QC for lot changes, unless you have concerns about the shipment to your site being damaged due to extreme weather etc.
   b. Super-user or new user may perform a test by running QC or specimens during training.

2. Can QC swabs be used more than once?
   a. No

3. Can I order more positive control swabs?
   a. There is a positive control in each box of testing cartridges. We will not be bringing additional controls due to cost.

**eReq (Electronic Requisition)**

1. I am having trouble logging into eReq?
   a. In order to comply with Privacy Legislation individual log in per user is being implemented. If your site has switched to individual log-in and you are having trouble assessing eReq then email ereqsupport@saskhealthauthority.ca

2. I thought I did not need a physician order to run this test, because of the medical directive to test as per Medical Health Officer?
   a. Yes there is a medical directive signed that allows testing with only the medical health officer as the physician BUT be aware that failure to enter a local most responsible physician will stop results from getting back to the local site.
b. The referral laboratory software will only send results to physicians entered on the order. The local physician must be entered on eReq if you expect to receive the results from the reference laboratory test.

3. **What is the Outbreak number?**
   a. An Outbreak at a location has an assigned number. You must not abbreviate the number. The entire number and any associated letter at the beginning must be provided or the sample cannot be linked to a known Outbreak.

4. **How detailed does the site information need to be in eReq?**
   a. Give as much information as would be needed for the laboratory to call you to ask a question regarding the collection or swab. Avoid acronyms if possible
   Examples of **inappropriate** specimen collection site:
   i. pre-transfer
   ii. on site
   Examples of **appropriate** specimen collection site
   i. Wynyard Golden Acres Long Term Care 306-655-5555
   ii. Assessment unit, Hospital Name, City 306-555-1235

5. **How do I enter specimen type if I have two types of specimens (one throat and one NP swab)?**
   a. You enter the type of swab that you collected for the point of care test. Therefore, if you used a throat/nares swab for Abbott ID now then record throat nares on eReq even if you are sending a NP swab for the confirmation test.

6. **Why do I always get two blank pages when I print the eReq?**
   a. There is a flaw in the print set up that Digital Health has not been able to find a solution to fix. To avoid the extra blank pages choose only the print page 1 in your print preferences.

7. **What do I do if the patient doesn't have a SK HSN?**
   a. There are provisions in EREQ to accept other provinces and other numbers like corrections For example if you need to enter an EREQ on an inmate,
      i. go to the HSN drop down list and choose “other”.
      ii. This brings up an additional text box, where you can enter that the person is Corrections.
      iii. If the inmate has a corrections health number, you can enter that in the HSN field. If the inmate does not have a corrections health number, you can enter unknown in the HSN field.

8. **How long will the eReq retain the information I have entered?**
   a. The eReqs are set to time out after 60 minutes, so if you have not completed all the information then hit submit to allow future edits. The eReq does not have limits on how many times it can be edited, so the user can enter the information, hit submit, and then search for the requisition when the result is ready. That way there is no need to retype anything, all of the information is captured every time it is submitted.

9. **Can I access eReq information that another user on my site entered into the eReq?**
   a. Yes, by using the search feature you will be able to find information previously entered by any user on your site.

10. **What if I have SHA employees that have not yet been set up for SHA email accounts?**
a. Since they are SHA employees, they need to go through and get the SHA accounts. - When the manager puts in the request for the IT accounts, she can ask to have it expedited (access to the eReq and the POC testing strategy are key COVID initiatives, so that can be leveraged)

11. Most Responsible Physician added to the electronic requisition for Positive COVID-19 test results

   a. When there are more than TWO physicians required to be entered into the electronic requisition follow these instructions:
      i. Order Physician / Provider – enter the Ordering Physician / Provider information. (Example Surgeon)
      ii. Go to Additional Copy screen – enter details of Provider that requires a copy of patient report. (Example: Family Physician / Provider to reschedule surgery)
      iii. When reporting Positive COVID-19 patient results, remember to FAX the printed requisition / report to the MHO / Public Health at fax 306-766-3398.
      iv. Send patient report to Ordering Physician / Provider and Additional Copy to provider.

Reporting Results

1. What do I say to a client who I am testing? What if they test positive?
   a. Refer to the PROV-43 Clinical Procedure section 11 for the dialogue to communicate to the client.
   b. Algorithms for client management can be found on SHA COVID website.

2. Do I have to wait for the Roy Romanow Provincial Laboratory confirmation test before the patient can be transferred?
   a. Algorithms can be found on the SHA COVID Website under Information for Health Care Providers.

3. Do I need to keep checking for the confirmation swab results to ensure that a negative test on Abbott Panbio has not been found to be positive on the confirmatory testing?
   a. The Laboratory will report all confirmation swab results through the normal laboratory result pathway. The laboratory will also fax the MHO with any positive results. A positive result is considered a critical result and therefore will be phoned to most responsible physician listed on eReq.

Cleaning and Waste

1. Do I need to discard in biohazard waste?
   a. Yes discard all swabs and testing devices in a biohazard waste container.