COVID-19 TESTING PRIORITIES AND TYPES OF TESTS

HIGH PRIORITY

- Hospitalized patients
- Healthcare facility workers, workers in congregate living settings, and first responders with symptoms
- Residents in long-term care facilities or other congregate living settings, including prisons and shelters, with symptoms
- Persons identified through public health cluster and selected contact investigations

PRIORITY

- Persons with symptoms of potential COVID-19 infection, including: fever, cough, shortness of breath, chills, muscle pain, new loss of taste or smell, vomiting or diarrhea and/or sore throat
- Persons without symptoms who are prioritized by health departments or clinicians, for any reason, including but not limited to: public health monitoring, sentinel surveillance, or screening of other asymptomatic individuals according to state and local plans.

MOLECULAR TESTING

- Detects the presence of viral genetic material
- Tells you if an individual is actively infected with COVID-19
- Collected via nasal swab or saliva sample
- Requires chemical reagent and testing machine
- Can take from a few hours to a few days to get results

SEROLOGICAL TESTING

- Detects the presence of antibodies
- The presence of antibodies does not necessarily mean you are immune. Active investigation continues.
- May tell you if an individual has been exposed to the virus
- Collected via blood sample
- Antibodies are not present until one to two weeks after infection
- Upwards of 90 tests on the market, but only a small few have been given “emergency authorization” by the FDA

Guidance provided by CDC and SC DHEC as of April 29, 2020. For more information, visit the CDC website here.