What You Need to Know About COVID-19 Testing



Made by the ADVANCE Study









This booklet was created through the "Addressing COVID-19 Vaccine concerns AmoNg people who are in CarcErated" (ADVANCE) Study.

The ADVANCE Study team co-developed educational resources (including this one) with and for PWAI. We asked **People Who Are Incarcerated (PWAI** for short) in BC provincial correctional centres what their concerns about COVID-19 vaccines are, what it's been like being incarcerated during the COVID-19 pandemic, and how they like to get information about things like COVID-19 and vaccines.

We want PWAI in provincial correctional centres in BC to have access to the information that they need to make informed decisions about COVID-19, and to stay as safe and healthy as possible while incarcerated. We hope this helps you think about what would work best for you and to make informed choices about your health and wellness.

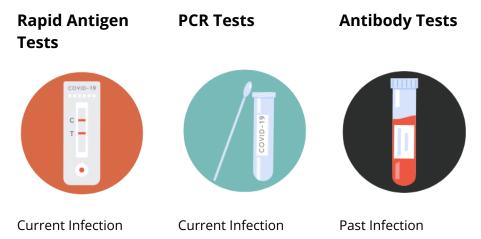
Check out our other resources, listed below. You can ask for a copy from a Programs Officer or from Healthcare Staff:

- Making Informed Choices: A COVID-19 Activity and Info Book
- Making Informed Choices About COVID-19 Vaccines
- Wellness While in Custody
- What You Need to Know About COVID-19 Testing
- Planning for Release

- Overdose Prevention & Harm Reduction
- COVID-19 FAQ Posters
- COVID-19 Myth Busting Posters
- Real Talk Comic
- Needle Hate Comic
- Making Informed Choices: A COVID-19 Activity and Info Book (Reference Edition)

How Many Types of COVID-19 Tests Are There?

There are three types of tests for COVID-19:



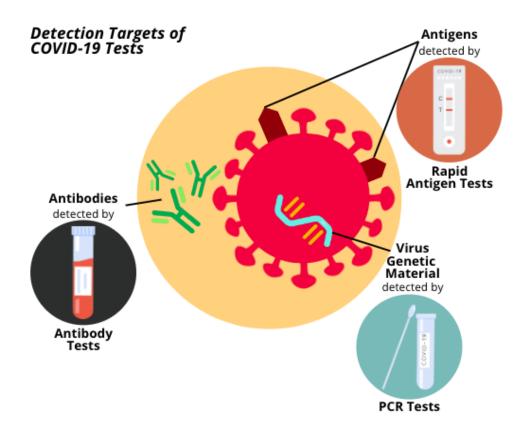
Rapid antigen tests and PCR tests aim to tell if you currently have COVID-19. Antibody tests aim to find out if you've ever had COVID-19.

How Do COVID-19 Tests Work?

Rapid antigen tests react to proteins made by the COVID-19 virus. These proteins are called antigens.

PCR tests react to genetic material from the COVID-19 virus. PCR is short for **P**olymerase **C**hain **R**eaction.

Antibody tests react to COVID-19 antibodies, made by your body to help protect you from infection. Antibody tests can't tell you whether you have enough antibodies to protect you from future COVID-19 infection. Check out the diagram on the next page to see the things different tests react to.



COVID-19 Testing in Provincial Correctional Centres

Provincial correctional centres use COVID-19 rapid antigen tests and PCR tests, depending on the situation.

Rapid antigen testing is done by swabbing inside your nostrils (*not* deep inside your nose) or inside your mouth. You can get these tests at pharmacies to use yourself when you're in the community. In corrections, they're usually done by a healthcare provider when:



- Someone has symptoms of COVID-19 at intake,
- People are transferred between centres, and they have symptoms,

- People leave for in-person court appearances and come back, and they have symptoms,
- People develop symptoms while they're incarcerated.

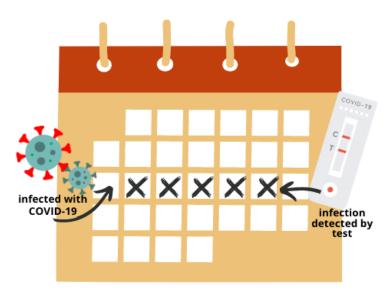
PCR testing is done by swabbing deep inside your nose, or gargling and spitting into a tube. These tests are done by a healthcare provider. They might take place in Corrections when:



- People develop symptoms while they're incarcerated,
- Someone's rapid antigen test comes back positive,
- Someone's rapid antigen test comes back negative, but they have symptoms and a doctor determines it's necessary to do a PCR test.

Window Periods

The window period is the time between being infected with the COVID-19 virus and being able to detect the infection with a test.



Negative results on tests that were done before the window period is over might not be accurate. That's one of the reasons people might be placed on induction units despite a negative test result. The length of the window period depends on the type of test.

How Accurate Are COVID-19 Tests?

Answering the question "How accurate is this COVID-19 test?" is complicated, because accuracy is shaped by lots of things.

A couple of the tools scientists use to assess the reliability of tests are "sensitivity" and "specificity".

- **Sensitivity** is the percentage of positive test results (true positives) a test is able to identify.
- **Specificity** is the percentage of negative test results (true negatives) a test is able to identify.

The higher the sensitivity and specificity of a test, the lower the number of false negatives and false positives the test tends to have. Check out the chart on page __ to compare the sensitivity and specificity of different types of tests.

Other things that impact accuracy:

- Whether the test was done during or after the window period
- The test manufacturer
- The sample type (e.g. from the mouth or from the nose)
- How widespread COVID-19 is in a particular area
- Type of test (e.g. antigen, antibody or PCR)
- Whether or not someone has symptoms (especially for rapid antigen tests)

...And more. Told ya it's complicated. No test for COVID-19 is 100% accurate, and it's important not to rely on test results alone. This is another reason why people are placed on induction units or in isolation if they have symptoms, even if their test comes back negative.

COVID-19 Testing Quick Reference

	Rapid Antigen Test	PCR Test
Also known as	Rapid Antigen Detection Test (RADT)	Polymerase Chain Reaction Test, Molecular Test
Used for	Helping to diagnose if you have COVID-19	Helping to diagnose if you have COVID-19
Reacts to	COVID-19 proteins	COVID-19 genetic material (part of the virus itself)
When used	People have symptoms of COVID-19 OR in workplaces, schools, during intake into Corrections, and other settings where routine testing is offered.	People have symptoms of COVID-19 AND are hospitalised, pregnant, eligible for treatment, or live/work with those at high risk from COVID-19.
Method (sample collection)	Nasal or mouth swab by healthcare provider or self	Nasal swab or mouth rinse/gargle collection by healthcare provider
Why used	To help diagnose COVID-19 cases when	To help diagnose COVID-19 cases, when

	people have symptoms OR to help screen for COVID-19 in places that are high-risk for the virus/negative impact.	having a diagnosis would impact what action is taken (e.g. whether someone should be treated, hospitalised, etc.).
Window period	3 - 7 days after exposure	5 days after exposure
Positive means	If you have a positive test and symptoms, you most likely have COVID-19	If you have a positive test and symptoms, you most likely have COVID-19
Negative means	COVID-19 antigens were not found in your sample. You could still have COVID-19.	COVID-19 virus material was not found in your sample. You could still have COVID-19, but the likelihood of false negatives is lower than with rapid antigen tests.
Sensitivity (% of positive results the test identifies)	In people with symptoms: 73% sensitive This means 28 out of 100 people who have COVID-19 and have symptoms will test negative, but actually have COVID-19. In people without symptoms: 55%	In people with symptoms: 85% - 90% sensitive. This means 10 - 15 out of 100 people who have COVID-19 and have symptoms will test negative, but actually have COVID-19. In general/on average (people with and without

	sensitive. This means that 45 out of 100 people who have COVID-19 but don't have symptoms will test negative, but actually have COVID-19.	symptoms): 70 - 90% sensitive. This means 10 - 30 out of every 100 people who have COVID-19 will test negative, but actually have COVID-19.
Specificity (% of negative results the test identifies)	About 99% specific for both people with and without symptoms. This means 1 out of every 100 people tested who are not infected with COVID-19 will incorrectly test positive.	In people with symptoms: 99% - 100% specific. This means 0 - 1 of every 100 people tested who are not infected with COVID-19 will incorrectly test positive. In general (people with and without symptoms): 97% specific. This means that up to 3 out of every 100 people tested who are not infected with COVID-19 will incorrectly test positive.

If Your Rapid Antigen or PCR Test Is Positive...

• If you have COVID-19 symptoms. If you have COVID-19 symptoms, it's recommended that you isolate until you no longer have a fever (without use of meds) and your symptoms have improved. If you cannot isolate while you

- have symptoms, wear a mask indoors, cover your coughs or sneezes with your elbow, and clean your hands often.
- If you don't have COVID-19 symptoms, you do not need to stay home or avoid others, regardless of test results.
 People who work in settings with people at higher risk of severe COVID-19 illness should consult their workplace-specific policies for guidance though.
- If you have an underlying medical condition, contact your healthcare provider or call 8-1-1. There are some treatments for COVID-19 that you might be eligible for, which work best if started soon after symptoms develop.
- Take good care of yourself. Drink lots of fluids and get lots of rest. Non-prescription medications like acetaminophen (a.k.a. Tylenol®) and ibuprofen (a.k.a. Advil®) can be used to help with some symptoms of COVID-19.
- If you're having a hard time managing your symptoms, find it hard to breathe or drink, have chest pain, or feel confused, tell a healthcare provider or call 8-1-1 to speak to a nurse. They will tell you the best place to go for medical attention (i.e. which hospital is taking COVID-19 patients).
- If you're not sure what to do, ask a healthcare provider.
 If you're not currently in custody, call 8-1-1, or check the
 BC Centre for Disease Control website for up-to-date information (bccdc.ca).

If you have COVID-19 infection and are a First Nations person with status, there are some supports available through First Nations Health Authority when you are in the community:

• The FNHA Health Benefits Isolation Support team can help you with accommodation, travel and meals if you need to

- self-isolate. To see if you are eligible or to find out more, call 1-888-305-1505.
- Indigenous people (and their non-Indigenous family members) may contact the First Nations Virtual Doctor of the Day program if you are unsure or concerned, or want medical advice (phone: 1-855-344-3800).

If Your Rapid Antigen or PCR Test Is Negative...

If you have COVID-19 symptoms, you should still isolate
until you no longer have a fever (without use of meds) and
your symptoms have improved. If you cannot isolate while
you have symptoms, wear a mask indoors, cover your
coughs or sneezes with your elbow, and clean your hands
often.

If the test is negative, it could be because you're still in the early phases of infection. This is especially true when it comes to rapid antigen tests. You can still pass the virus to others during this time. If you're using rapid tests, you can do another one later on if you want (like the next day) if you have symptoms.

If You Didn't Get Tested but Have Symptoms...

 Self-isolate until you no longer have a fever and your symptoms improve.



ISBN



2022 ADVANCE Study Team. Attributions mandatory for originals and adaptations. https://stbbipathways.ca/covid-19/