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	Document Title	Revision Number:
	RATIONAL AND APPROPRIATE	00
	USE OF RAPID ANTIBODY SEROLOGY TESTING	Page:
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	REVISION HISTORY				
Rev No.	Review Date	Description of Change	Date of Next Review		

Reviewed by:	GERARDO S. MANZO, MD Incident Commander	Approved by:	JOEL M. ABANILLA, MD Executive Director
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## I. OBJECTIVE

This shall serve as a guide on the appropriate and rational use of Rapid Antibody Serology Testing in response to the increased in the number of incidental COVID-19 findings among patients of Philippine Heart Center.

## II. SCOPE

This guideline applies to all PHC patients who met the eligibility criteria for Rapid Antibody Serology Testing.

## III. GUIDELINES

- 1. The Rapid Antibody Serology Testing shall only be requested for patients who fulfilled the following criteria:
  - 1.1 Positive RT-PCR result but with **HIGH** CT value (greater than 30)
  - 1.2 Asymptomatic
  - 1.3 No history of COVID-19 like symptoms in the past 2 weeks
- 2. Once the patient is eligible for Rapid Antibody Serology Testing, the Attending Physician shall make the order which shall be carried out by the nurse in charge.
- 3. Interpretation of Rapid Antibody Serology Testing result shall be the following:
  - IgG (-) IgM (-) ISOLATE
  - IgG (-) IgM (+) ISOLATE
  - IgG (+) IgM (-) CLEARED
  - IgG (+) IgM (+) CLEARED
- 4. The Rapid Antibody Serology Testing is **<u>NOT</u>** recommended to be used for the following patients:
  - 4.1 Patients who are previous COVID-19 recovered (with written proof of within 3 months of positivity). These patients are considered as cleared.
  - 4.2 Patients with positive RT-PCR result but with LOW CT value (<30). These patients need to ISOLATE immediately.
- 5. Items not covered shall be referred to the Incident Command Post.