

To: [redacted] [redacted]@rivm.nl; [redacted] [redacted]@rivm.nl
 From: [redacted]
 Sent: Tue 5/26/2020 10:34:05 AM
 Subject: FW: lit mailing molc testing interessant weer
 Received: Tue 5/26/2020 10:34:06 AM

FYI misschien had je hem al gezien

From: [redacted]@mindef.nl <[redacted]@mindef.nl>
 Sent: dinsdag 26 mei 2020 11:28
 To: [redacted]@mindef.nl; [redacted]@biotrack.nl
 Cc: [redacted] <[redacted]@rivm.nl>
 Subject: lit mailing molc testing interessant weer

ref: [redacted] et al. Clinical performance of
 SARS-CoV-2 molecular testing. MedRxiv 2020. doi:
 10.1101/2020.05.06.20093575

 Abstract

 Molecular testing for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is the gold standard for diagnosis of coronavirus disease 2019 (COVID-19), but the test clinical performance is poorly understood. From [10 Mar to 1 May 2020] New York-Presbyterian laboratories performed 27 377 SARS-CoV-2 molecular assays from 22 338 patients. Repeat testing was performed in 3,432 patients, of which 2,413 had negative and 1,019 had positive 1st day results. Repeat-tested patients were more likely to be older, male, African-American or Hispanic, and to have severe disease. Among the patients with initially negative results, 18.6% became positive upon repeat-testing. Only 58.1% of any-time positive patients had a result of "detected" on the 1st test. The clinical sensitivity of COVID-19 molecular assays is estimated between 66.2% and 95.6%, depending on the unknown number of false negative results in single-tested patients. Conversion to a negative result is unlikely to occur before 15 to 20 days after initial testing or 20-30 days after the onset of symptoms, with 50% conversion occurring at 28 days after initial testing. 49 initially-positive patients converted to negative and then back to positive in subsequent days. Conversion from 1st day negative to positive results increased linearly with each day of testing, reaching 25% probability in 20 days. In summary, our study provides estimates of the clinical performance of SARS-CoV-2 molecular assays and suggests time frames for appropriate repeat testing, namely 15 to 20 days after a positive test and the same or next 2 days after a negative test in a patient with high suspicion for COVID-19.

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