

Q & A: Testing asymptomatic individuals for COVID-19

In this document, “asymptomatic” refers to people who have not had symptoms of COVID-19. This guidance does not apply to people whose symptoms have recently resolved following a confirmed or probable COVID-19 infection.

Q: When should asymptomatic individuals be tested for COVID-19?

A: Almost never. The vast majority of results in asymptomatic people are negative. Negative results are not informative. Positive results will be very rare and potentially misleading.

Negative results are not informative because a person who is exposed to COVID-19 may develop the infection at any time in the following 14 days. During most of the period between exposure and infection, they will test negative, but this negative result does not mean they will not develop the infection. By the time the result is available, the person may already be infectious so a negative result does not eliminate the possibility of infection.

Positive results can be useful, but will be extremely rare in most situations. Given the current prevalence of COVID-19 in BC, thousands of asymptomatic people would need to be tested to find a single positive case. This would put unnecessary pressure on the available testing resources, and delay test results for those at higher risk.

Note that testing resources include not just laboratory capacity, but also swabs, personal protective equipment, and the time health care providers spend ordering tests, collecting specimens, and following up on results.

Q: If I have been exposed, can I be tested?

A: It is unlikely that testing will be useful if you have been exposed but remain asymptomatic. A negative result does not rule out the possibility of developing the infection a few days or even a few hours later, and a positive result is very unlikely so long as you remain asymptomatic. Testing is generally not offered to people who have been exposed to COVID-19 but remain asymptomatic.

If you are identified as having been exposed, counselling will be provided for recommended infection control practices, self-monitoring, and how to access testing in the event that you do develop symptoms.

Q: Could we be unaware of widespread asymptomatic infection in high-risk settings, such as long-term care facilities or homeless shelters?

A: Not if everybody is asymptomatic, and not for long.

The best available evidence has found that the majority of cases do have symptoms. Therefore, if there are two or more cases in a particular setting, it is very likely that at least one of them will have symptoms. Testing that person, per standard guidelines, will reveal the presence of the virus.

In a large group, if nobody has symptoms, it is extremely unlikely that any infectious COVID-19 cases are present. It is possible that the first few cases in any given group will happen to be asymptomatic, but symptomatic cases will soon follow. Repeated mass testing of an asymptomatic group in order to detect the virus a few days earlier would require thousands of tests for a very small benefit.