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Antigen and Molecular Testing for SARS-CoV-2 – Differences in Test Methods

Antigen tests for SARS-CoV-2 are meant to be used for symptomatic individuals, not as a screening of those without symptoms. In a symptomatic population, it is approximately 85% effective at correctly identifying positive patients, depending on which test is used. Its efficacy in asymptomatic individuals is unknown, as this is outside the EUA (Emergency Use Authorization) for the test. The biggest point of concern is that the test can give false negatives, meaning the antigen test will come back negative, but the molecular test is positive, and they are actively infectious and can spread COVID-19 unknowingly to others they come in contact with.

Molecular tests for SARS-CoV-2 are the gold standard. PCR (Polymerase Chain Reaction) and TMA (Transcription-Mediated Amplification) are much more sensitive and look for the virus itself. They detect SARS-CoV-2 with a sensitivity and specificity near or at 100%. Both molecular methods are in use at Mi Health Laboratory, and we are able to offer results you can rely on.

The other major benefit of molecular test methods, aside from more accurate results, is that student athletes can test anytime in a 72-hour window before competitions/games, whereas with antigen tests, that pre-game window is only 24 hours.

There is no cost to you for the testing. Mi Health Clinic is a no-cost testing site for COVID-19, meaning that we bill insurance or the state, and not individuals. You will not receive a bill for any testing your student athlete needs to practice or compete.

For middle and high school student athletes, Mi Health Clinic collects specimens using non-invasive techniques. We will collect either oropharyngeal (back of the throat), anterior nares (just inside the nose), or saliva specimens. We **DO NOT** collect nasopharyngeal (deep inside the nasal cavity) specimens on minors.