Corrigendum and updates 20 July 2022 v3.0

This document lists the ley modifications made to the training package materials from v2.0 to v3.0. Please note that the published version of the materials (v3.0) includes these changes.

File, text location	Current text to replace	Corrigendum and/or required update
02- Overview of SARS-CoV-2 testing, slide 4	While vaccination against SARS-CoV-2 is now being implemented, diagnostic testing remains an essential tool against COVID-19.	While the pandemic continues to unfold with the emergence and spread of new variants, diagnostic testing remains an essential tool against COVID-19.
02- Overview of SARS-CoV-2 testing, slide 5	Diagnostic testing is a critical component of the COVID-19 response, as it can be used to: •confirm infection in patients who fulfil COVID-19 clinical criteria •rapidly screen suspected cases (especially in community settings) • screen for infection in asymptomatic contacts of confirmed COVID-19 cases • determine exposure (current and past) to the virus to understand the true extent of the outbreak, map the pandemic across countries and monitor trends.	Diagnostic testing is a critical component of the COVID-19 response, as it can be used to: •confirm infection in patients who fulfil COVID-19 clinical criteria •screen for infection in asymptomatic individuals at high risk of infection, including contacts (of confirmed or probable cases) and health workers •rapidly screen suspected cases (especially in community settings) •determine exposure (current and past) to the virus to understand the true extent of the outbreak, map the pandemic across countries and monitor trends.
02- Overview of SARS-CoV-2 testing, slide 7	Table: Molecular tests	Molecular tests (PCR based assays) Additional footnote: * Some tests are also designed to detect specific mutations of the virus and to identify variants. These are not diagnostic tests but may be helpful for monitoring variants within a country's variants surveillance strategy.
02- Overview of SARS-CoV-2 testing,		New slide added: SARS-CoV-2 Ag-RDT - Key message around AgRDT use by trained operators pre-determined by product

SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – v3.0 – Corrigendum and updates, 20 July 2022

additional slide added- slide 10		
02- Overview of SARS-CoV-2 testing, slide 11	Diagnostic testing is critical to confirm COVID-19 diagnosis and to screen asymptomatic contacts of confirmed COVID-19 cases	Diagnostic testing is critical to confirm COVID-19 diagnosis and to screen asymptomatic contacts of confirmed or probable COVID-19 cases
03- SARS-CoV-2 testing strategies	The majority of slides are replaced and contents modified in alignment with the latest interim guidance Antigen-detection in the diagnosis of SARS-CoV-2 Infection Interim guidance 6 October 2021. Geneva: World Health Organization; 2021 (https://www.who.int/publications/i/item/antigen-detection-in-the-diagnosis-of-sars-cov-2infection-using-rapid-immunoassays)	
03- SARS-CoV-2 testing strategies, slide 4	Antigen-detection in the diagnosis of SARS-CoV-2 infection using rapid immunoassays. Interim guidance – 11 September. Geneva: World Health Organization; 2020 (https://apps.who.int/iris/handle/10665/334253)	Antigen-detection in the diagnosis of SARS-CoV-2 Infection Interim guidance 6 October 2021. Geneva: World Health Organization; 2021 https://www.who.int/publications/i/item/antigen-detection-in-the-diagnosis-of-sars-cov-2infection-using-rapid-immunoassays Use of SARS-CoV-2 antigen-detection rapid diagnostic tests for COVID-19 self-testing. Interim guidance- 9 March 2022. Geneva. World Health Organization. https://www.who.int/publications/i/item/WHO-2019-nCoV-Ag-RDTs-Self_testing-2022.1
03- SARS-CoV-2 testing strategies, slide 8	• NAAT molecular tests (1st and 3rd bulletpoint) • 2nd bulletpoint ´…by shifting testing from the reference laboratory to the clinical facility. '	• NAAT • '…by shifting to decentralised testing.' • Antigen-detection in the diagnosis of SARS-CoV-2

	• Footnote- Antigen-detection in the diagnosis of SARS-CoV-2 infection using rapid immunoassays. Interim guidance – 11 September 2020. Geneva: World Health Organization; 2020.	Infection Interim guidance, 6 October 2021. Geneva: World Health Organization; 2021 (https://www.who.int/publications/i/item/antigen-detection-in-the-diagnosis-of-sars-cov-2infection-using-rapid-immunoassays)
05-Safety for SARS-CoV-2 Antigen RDT testing, slide 4	are released when an infected person coughs, sneezes, speaks or sings.	are released when an infected person coughs, sneezes, speaks, breathes or sings.
05-Safety for SARS-CoV-2 Antigen RDT testing, slide6	Footnote: 29 June 2020	12 July 2021
05-Safety for SARS-CoV-2 Antigen RDT testing, slide 8	For more information on conducting risk assessments see: Health workers exposure risk assessment and management in the context of COVID-19 virus: interim guidance, 4 March 2020	For more information on conducting risk assessments see: Risk assessment and management of exposure of health care workers in the context of COVID-19: Interim guidance, 19 March 2020
05-Safety for SARS-CoV-2 Antigen RDT testing, slide 10	Footnote 2-[2] Advice on the use of masks in the context of COVID-19 Interim guidance, 5 June 2020; Rational use of personal protective equipment for COVID-19. Geneva: World Health Organization; 2020, Infection prevention and control during health care when coronavirus disease (COVID-19) is suspected or confirmed. Interim guidance, 26 June 2020	[2] Mask use in the context of COVID-19, 1 December 2020; Rational use of personal protective equipment for • COVID-19 and considerations during severe shortages, 23 December 2020. Geneva: World Health Organization; 2020, Infection prevention and control during health care when coronavirus disease (COVID-19) is suspected or confirmed. Interim guidance, 12 July 2021
05-Safety for SARS-CoV-2 Antigen RDT testing, slide 13	1% bleach	0.5% bleach
05-Safety for SARS-CoV-2 Antigen RDT testing, slide 16	Working concentration 1% (spills)	0.5%
05-Safety for SARS-CoV-2 Antigen RDT testing, slide 18	1% bleach add 20ml of household bleach to 80ml of water	0.5% bleach add 10ml of household bleach to 90ml of water
05-Safety for SARS-CoV-2 Antigen RDT testing, slide 20	1% bleach (1st and 5th bulletpoint)	0.5%

SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – v3.0 – Corrigendum and updates, 20 July 2022

06- Sample collection, slide 4		Nasopharyngeal swabs are often the preferred sample for testing using SARS-CoV-2 Antigen RDTs. Other sample types are also being used, such as nasal and throat swabs (often for self-testing kits). Always refer to the kit's IFU which will specify the type of samples to use.
06- Sample collection, slide 16	Footnote : 21st revision	22nd revision
07- Preparation for testing: Supplies, slide 5	Footnote-[1]Advice on the use of masks in the context of COVID-19 Interim guidance, 5 June 2020; Rational use of personal protective equipment for COVID-19. Geneva: World Health Organization; 2020, Infection prevention and control during health care when coronavirus disease (COVID-19) is suspected or confirmed. Interim guidance, 26 June 2020	Mask use in the context of COVID-19, 1 December 2020; Rational use of personal protective equipment for COVID-19 and considerations during severe shortages, 23 December 2020. Geneva: World Health Organization; 2020, Infection prevention and control during health care when coronavirus disease (COVID-19) is suspected or confirmed. Interim guidance, 12 July 2021
09- Using SARS-CoV-2 RDT data, slide 8		Additional bulletpoint: • Post-market surveillance user feedback form **_here_**
09- Using SARS-CoV-2 RDT data, slide 15	Routine collection and analysis of QIs can assist in the planning and implementation of testing operations	Routine collection and analysis of QIs can assist in the planning and implementation of testing operations, and act as an integral part also contributing to postmarket surveillance
09- Using SARS-CoV-2 RDT data, slide 22		Additional slide 22: Communicating issues promptly with the manufacturer
10- Assuring quality results, slide 9	New lot testing helps to ensure that the SARS-CoV-2 Antigen RDT delivered to the field performs according to the manufacturer's specifications	• New lot testing helps to ensure that the SARS-CoV-2 Antigen RDT delivered to the field performs according to the manufacturer's specifications, and if not this should be reported immediately to the manufacturer (Consider using WHO's user feedback form here) • At least five controls (three positive and two negative) should be tested for each new lot.

10- Assuring quality results		New slides 21-24- on PMS New key points (3)- slide 27
11- Training users, slide 15	Update to user training structure	Additional bulletpoint • **Self-testing (Module S1, optional)**
11- Training users, slide 17	Delete 'and respirators (N95 or FFP2) (various sizes)'	
11- Training users, slide 18	Correction of the list of material 'Two spray bottles (one for bleach, the other for ethanol)'	Corrected the list of material 'Three spray bottles (two for bleach, the other for ethanol)'
S1- Use of SARS-CoV-2 Ag-RDTs for COVID-19 self-testing		Supplementary module on SARS-CoV-2 Antigen RDT self-testing
0_FAQs_SARS-CoV-2_RDT ,page 2	Additional point to principles:	▪ **How do variants affect the performance of this test?** The SARS-CoV-2 virus has mutated over time, resulting in genetic variation in the population of circulating viral strains over the course of the COVID-19 pandemic. One consideration of how the mutations in these strains will impact antigen test performance is dependent upon whether the test detects nucleocapsid (N) or spike (S) protein. Healthcare professionals and laboratory personnel should be aware that false negative results may occur with **any** molecular test for the detection of SARS-CoV-2, particularly if a mutation occurs in the part of the virus' genome assessed by that test. Tests that have received WHO Emergency Use Listing Procedure (EUL) have not shown a decrease in their ability to detect SARS-CoV-2 virus variants.

0_FAQs_SARS-CoV-2_RDT ,page 2	Additional point- Self-testing	**Self-testing**
		▪ **What is the benefit of self-testing?** - COVID-19 self-testing is feasible, and self-testers can reliably and accurately perform SARS-CoV-2 Ag-RDTs, as compared to trained testers. - Offering COVID-19 self-testing is acceptable and has the potential to achieve good uptake. - Offering COVID-19 self-testing has the potential to enable timely diagnosis and prompt risk-based decisions and post-test actions, particularly in hard-to-reach communities. - Offering COVID-19 self-testing has the potential to enable additional individual and social benefits including enabling individuals to make quicker post-test actions, including decisions that may affect their health and the health of their families and communities. ▪ **Can all Ag-RDTs be used for self-testing?** Ag-RDTs that have been authorized for self-testing can be used. Typically, these tests are individually packaged with Instructions for Use (IFU) for each test. Professional use tests that have not been authorized for self-testing that have been re-packaged for self-testing should not be used.

		▪ **How should the results of a self-test be used?** For diagnostic purposes, an individual with a positive self-test result can be considered a probable case of SARS-CoV-2 infection and should take post-test actions, including infection control measures, according to current national guidelines. A negative self-test result is consistent with absence of current evidence of infection, but individuals should be made aware of the possibility of false-negative results. Individuals self-testing negative–especially those with persistent or progressing symptoms–should consider re-testing, e.g. 24 to 48 hours later and/or should seek testing for other diagnoses, including for other respiratory infections. Re-testing can be performed through a self-testing or through professional testing.
0_FAQs_SARS-CoV-2_RDT ,page 3	Additional point to specimen requirements	▪ **What samples are commonly used for self-testing?** Nasal swabs are the often-preferred sample for self-testing using SARS-CoV-2 Antigen RDTs. As new tests become available, other sample types are being used, such as throat swabs or saliva. Always refer to the kit's IFU which will specify the type of samples to use.
0_FAQs_SARS-CoV-2_RDT, page 4	▪ **How should I dispose of waste (e.g., used tests, sample containers, etc.)?** All waste generated from the testing of specimens from suspected or confirmed COVID-19 cases should be	▪ **How should I dispose of waste (e.g., used tests, sample containers, etc.)?**

| | classified as biohazardous waste unless indicated otherwise in the kit's Instructions for Use (IFU) and should be handled according to applicable local guidelines. | Unless indicated otherwise in the IFU, all waste generated from the testing of specimens from suspected or confirmed COVID-19 cases should be classified as biohazardous waste and should be handled according to applicable local guidelines.

Note that some antigen RDT kits' extraction buffers, when used according to the IFU, will inactivate SARS-CoV-2 virus when the sample is added to the buffer in the extraction tube. Indicated waste management procedures may be found in the IFU. |
|---|---|---|
| 0_FAQs_SARS-CoV-2_RDT, page 6 | Two extra references added | • World Health Organization. Use of SARS-CoV-2 antigen-detection rapid diagnostic tests for COVID-19 self-testing. Interim guidance- 9 March 2022. Geneva. World Health Organization. https://www.who.int/publications/i/item/WHO-2019-nCoV-Ag-RDTs-Self_testing-2022.1
• US Food and Drug Administration. SARS-CoV-2 Viral Mutations: Impact on COVID-19 Tests. https://www.fda.gov/medical-devices/coronavirus-covid-19-and-medical-devices/sars-cov-2-viral-mutations-impact-covid-19-tests. |

0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 1	Additional sentence in introduction Additional names in acknowledgements	A supplementary module on self-testing is provided for healthcare workers supporting access to self-testing in their settings. Natacha Milhano, Jillian Sachs
0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 3	Additional line in table in section 'Print and electronic materials needed for training'	S1- Use of SARS-CoV-2 Ag-RDTs for COVID-19 self-testing (Optional)
0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 4	Additional line in table in section 'Scope and duration of workshop'	Self-testing (Module S1), 15 minutes
0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 5	Additional line in table in section 'Customizing the training'	S1- Use of SARS-CoV-2 Ag-RDTs for COVID-19 self-testing
0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 7	Figure 1: bleach solutions at 0.1% and 1%	Figure 1 updated: bleach solutions at 0.1% and 0.5%
0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 8	Additional sub section	**Performing the role-play exercise (S1- Use of SARS-CoV-2 Ag-RDTs for COVID-19 self-testing)** The objective of the role-play exercise is for participants to perform realistic scenarios under the supervision of a workshop trainer or facilitator. In this role-play exercise each participant

		should have an opportunity to participate as a health worker and as a community member. The health worker provides instruction on self-testing to a community member, and the community member receives the instruction and asks questions based on the instruction received. To perform the role-play exercise:
		
		1. Divide the participants into pairs;
		2. Describe a specific scenario to the training. Workshop trainers should prepare these scenarios in advance and customize them to setting in which they will be used. For example, if the participants are pharmacists providing self-test in their communities, the scenario can describe a scene whereby a community member approaches their pharmacist on advice on how to perform a self-test. Printing the scenarios or customizing Slide 18 (S1- Use of SARS-CoV-2 Ag-RDTs for COVID-19 self-testing) will facilitate the role-play exercise.
		3. Examples of scenarios that may be included in the exercise include:
		   1. A community member requests a self-test;
		   2. A community member requests instructions on how to perform collect a sample for self-testing;
		   3. A community member requests instructions on how to perform a self-test;
		   4. A community member enquires about follow up actions if they test positive on a self-test;
		   5. A community member enquires about follow up actions if they test positive on a self-test;.
		4. Assign roles to each participant and instruct them to reverse roles once the scenario is complete. Note: ideally every pair should perform every scenario as both the health worker and community member;
		5. Have learners act out the scenario;

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<td>5. Supervise the role-play exercise while moving through the training venue and observing the participants performing the exercise;
6. Repeat for each subsequent scenario;
7. Debrief the exercise by providing feedback, discussing lessons learned and best-practices.

An alternative method to perform the role-play exercise if for the workshop trainers to demonstrate the role-play scenarios and invite discussion after the exercise. This is not as effective as having the participants perform the scenarios themselves but may be useful if there is limited time to perform the exercise or there is a limited number of workshop trainers or facilitators to supervise the exercise.</td>
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<td>0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 9</td>
<td>1) Additional sentence to point 3 in section 'Performing the competency assessment'</td>
<td>If the optional self-testing module (S1- Use of SARS-CoV-2 Ag-RDTs for COVID-19 self-testing) is included in the training, select one question on self-testing, and replace one of the theoretical questions with it.</td>
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<td>2) Additional point in section 'Certificate'</td>
<td>The training certificate template may be revised to include acknowledgement of successful completion of the optional self-testing module (S1-Use of SARS-CoV-2 Ag-RDTs for COVID-19 self-testing).</td>
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<td>3) Three additional points in section 'Supplementary documentation and tools'</td>
<td>Why is testing for SARS-CoV-2 important?
Use of antigen-detection rapid diagnostic tests
What you need to know about COVID-19 self-testing</td>
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0_SARS-CoV-2 Antigen Rapid Diagnostic Test Training Workshop – Trainers Guide, page 13	Annex 1, table: bleach solution concentration to be updated from 1% to 0.5%. Spray bottles (two for bleach working solutions of 0.1% and 1%, one for ethanol)	Annex 1, table: bleach solution concentration updated. Spray bottles (two for bleach working solutions of 0.1% and 0.5%, one for ethanol)

0_SARS-CoV-2 Antigen Rapid Diagnostic Test – competency Assessment, page 10	Two additional questions for the supplementary self-testing module	**SARS-CoV-2 Antigen RDT self-testing** 1. **What priority population should be targeted for self-testing?** ❑Asymptomatic individuals with no known exposure ❑ Essential workers ❑ Individuals at risk of hospitalization or severe disease ❑ Individuals with challenges in accessing existing services 2. **Select all correct statements from the list below.** ❑ A positive self-test result likely indicates active SARS-CoV-2 infection ❑ A positive self-test result is likely false if the individual has no known exposure and live in an area of low prevalence for COVID-19 ❑ A negative self-test must be confirmed by a NAAT (Nucleic Acid Amplification Test) ❑ A negative self-test indicates a lower likelihood of current SARS-CoV2 infection

0_SARS-CoV-2 Antigen Rapid Diagnostic Test – competency Assessment, page 17	Answers to the two questions	**SARS-CoV-2 Antigen RDT self-testing** 1. **What priority population should be targeted for self-testing?** ❑Asymptomatic individuals with no known exposure ■Essential workers ■Individuals at risk of hospitalization or severe disease ■Individuals with challenges in accessing existing services 2. **Select all correct statements from the list below** ■ A positive self-test result likely indicates active SARS-CoV-2 infection ■ A positive self-test result is likely false if the individual has no known exposure and live in an area of low prevalence for COVID-19 ❑ A negative self-test must be confirmed by a NAAT (Nucleic Acid Amplification Test) ■ A negative self-test indicates a lower likelihood of current SARS-CoV2 infection