

COVID-19 Rapid Antigen Test Kits for At-Home Use

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Q: Where can I get a COVID-19 at-home test kit?

A: Albertans can get free COVID-19 rapid antigen testing kits for at-home use through the Government of Alberta. They are available, while supplies last, at select [AHS sites and pharmacies](#) across the province, as well as through some workplaces and schools.

Q: What is the name of the rapid antigen test kits?

A: There are many different rapid antigen tests approved by Health Canada for use. All of these have similar accuracy in detecting COVID-19. Currently, Alberta is distributing the BTNX Rapid Response kits for self-testing at home.

Q: When should I perform the rapid antigen test at home, and where are the instructions?

A: Guidelines for testing and instructions for performing the tests, including how-to videos, are available on the Alberta Health website: <https://www.alberta.ca/rapid-testing-at-home.aspx>.

Detailed instructions for performing the tests are also included in each test box.

Q: How accurate are the at-home self-test kits?

A: Rapid antigen tests should catch most cases when used on people with symptoms, but they are not as accurate as lab-based PCR testing. The likelihood of someone with symptoms having a false positive result from a rapid test is low when the disease prevalence is high. The likelihood of someone with symptoms having a false negative result can occur, especially if tested too early from their symptom onset, which is why repeat testing 24 hours later is recommended. Anyone exhibiting symptoms of COVID-19 should self-isolate and follow all public health precautions until their symptoms are gone, regardless of rapid test results.

The likelihood of someone without symptoms having a false negative result is very high, which is why a negative test result cannot replace appropriate public health measures.

Q: What is the purpose of rapid testing if it is not as accurate as PCR testing?

A: When a rapid COVID-19 test is used for people without symptoms, it is a screening test, not a diagnostic test. Screening individuals with rapid tests can identify some, but not all, contagious individuals. Rapid screening does not replace public health measures such as physical distancing, masking, hand hygiene, staying home and accessing testing when sick and the mandatory isolation of COVID-19 cases.

Q: What is the difference between a rapid antigen test and a PCR test?

A: A rapid antigen test looks for a protein from the virus that causes COVID-19, and is a simple test that does not require specialized equipment and can produce a result in as little as 15 minutes.

A polymerase chain reaction (PCR) test looks for the genetic material of the virus that causes COVID-19. They are highly sensitive tests that can identify the virus earlier in an infection than an antigen test. PCR tests can only be done in a lab, by an expert, and it can take one to three days to generate a test result.

Q: If my result is negative, should I test myself more than once?

A: A negative result on a rapid screening test does not mean that a person is not infected or could not become infectious. Performance improves after serial testing, which is why it is suggested to repeat the test approximately 24 hours later if the initial test is negative and you are symptomatic.

Q: If I test positive at home, should I get a PCR test at a lab or assessment centre?

A: To ensure PCR testing is available to those who need it most, only people at high risk of severe outcomes or who work in healthcare and other high-risk settings may need to book a follow-up PCR test if they get a positive result on a rapid test. For more information, see the [‘Test results and next steps’](#) section of the Alberta Health website or complete the COVID-19 online assessment tool at: <https://www.albertahealthservices.ca/topics/Page17058.aspx>

Q: Are rapid antigen tests able to detect the Omicron variant?

A: Yes, the manufacturers of the rapid antigen tests used in Alberta, including BTNX, have stated that the performance of the tests should not be affected by the mutations seen in the Omicron variant of concern.

Q: Are throat swabs more effective at detecting the Omicron variant?

A: We continue to monitor the scientific evidence. At this time, there is no medical or scientific evidence to suggest throat swabs are better at detecting this new variant compared to other forms of COVID-19.

Importantly, commercial tests should be performed according to the manufacturer’s instructions, as these tests have been validated and authorized by Health Canada for use as instructed, including the type of swab that should be used. The BTNX rapid antigen test kits use a nasal swab and use of throat swabs has not been approved.

Q: In general, which test is more effective, the throat swab or nasopharyngeal swab?

A: Either nasopharyngeal or throat swabs can be used for COVID-19 PCR testing, along with other sample types that have been validated and approved for use by Health Canada in various commercial diagnostic tests currently in use. We have recently analyzed data and found that there is not a higher positivity rate for throat swabs

compared to nasopharyngeal swabs. As new information regarding Omicron detection becomes available, the data will be reassessed and changes made to the swabbing strategy as needed.

Q: Can rapid antigen test kits be used if they have been frozen?

A: The manufacturer's specifications state that the kits should be kept at temperatures between 2 and 30 degrees Celsius. Kits that have been frozen may be used once they have returned to room temperature.

Q: Are used test materials considered hazardous waste? How should they be handled?

A: No, used testing materials are not classified as biohazardous and should be disposed of like any other household waste.

Q: Why is Alberta now relying on rapid testing? Has PCR testing capacity been reduced?

A: PCR testing capacity has not changed from previous waves, but due to the increased number of cases seen with Omicron we need to make sure PCR testing is available to those who need it most, including healthcare workers, congregate living and long-term care facilities, and for patient management and treatment decisions.

Provincial testing capacity has consistently remained at approximately 15,000 tests per day with average turnaround time for results of 24 hours. We are able to add additional short-term surge capacity when necessary, but it is not sustainable for the long term.

Widespread vaccination has led to more mild and asymptomatic cases in the community that can best be managed with basic public health measures such as self-isolation.