

# **Employer-led Supervised Self Swabs (ESSS) Companies Guidebook**

*V2.1, Updated 7 Feb 2022 (To be effective 7 Feb 2022)*

- The intent of this Guidebook is to provide basic principles and guidelines to assist the companies in planning and executing **Employer-led Supervised Self Swabs (ESSS)**.
- As the companies' operating environment and conditions vary considerably, it is the responsibility of the companies to adapt and apply the basic principles and guidelines to execute the operations based on their business needs .
- The companies should take the highest care within their ability to ensure the health and safety of their employees during the ESSS operations.

# Change log

- V2.1
  - Changes to AG+ Results Handling Workflow based on Prevailing National Testing Policy Protocol 2. (Page 19)
  - Additional slide on Protocol 2. (page 20)
- V2.0
  - Changes to individuals that are required to comply to FET-RRT regime. (Page 8)
- V1.0
  - First version

# Content of Guidebook

1. Supervisors – Criteria and Roles & Responsibilities
2. Exemption from FET-RRT Regime
3. Overview of the Employee’s Journey in the ESSS
4. Recommended Site Set-up and Infection Prevention and Control (IPC) Considerations for On-site ESSS
5. Results Management
6. End of Ops - Cleaning and Waste Disposal
7. High Level Overview of Submission of Test Results for Workers under ESSS Model Swab Registration System (SRS)
8. Annex A - Infection Prevention & Control (IPC) for On-site ESSS
9. Annex B - ART Kits, Bulk Breaking and Self-Swab Process
10. Annex C - Anterior Nares Swab

# **1. Supervisors – Criteria and Roles & Responsibilities**

# Supervisors – Criteria and Roles & Responsibilities

**Supervision is required for RRT to ensure compliance, and as part of broader measure to promote workplace health and safety.**

## **Requirements**

- All supervisors should be fully vaccinated based on prevailing national policy.
- Supervisor must maintain at least a 3m distance from employees undergoing self-swab. Minimum Personal Protective Equipment (PPE) required are surgical 3-ply mask and face shield/goggles.
- If the 3m distance cannot be maintained for the operations or when there is a need for the supervisor to be in close contact to assist the employee, then the supervisor must be in N-95 mask (properly fitted), gown, gloves of proper size, face shield/goggles, and hair net (for individual with long hair) are required.

## **Roles & Responsibilities of Site Supervisors**

- Before commencing the swab process, supervisor need to ensure that workers:
  - Do not have any ARI symptoms
  - Do not have any nosebleed (past 24hrs), facial surgery (last 8 weeks), nasal surgery (last 4 weeks)
- Ensure Infection Prevention & Control (IPC) measures are observed
- Ensure that self-swabbing and testing is done properly, e.g. through observation of the individuals performing the self-swab and testing.
- Ensure safe management measures (SMMs) are observed
- Attendance-taking and collection and documentation of results

## **2. Exemptions from FET-RRT Regime**

# Exemptions from FET-RRT Regime

From 1 Jan 2022, individuals who have recovered from a COVID-19 infection but are not fully vaccinated will be required to comply to FET-RRT Regime

## Client/Employee:

- To submit the Declaration Form to Employer to seek exemption from FET-RRT

## Employer:

- To check and approve the exemption on the Declaration Form
- To track the total count of the exemption cases and report to Sector Leads.



## Cases exempted from the FET RRT are listed below:

### 1. Exemption due to contraindication

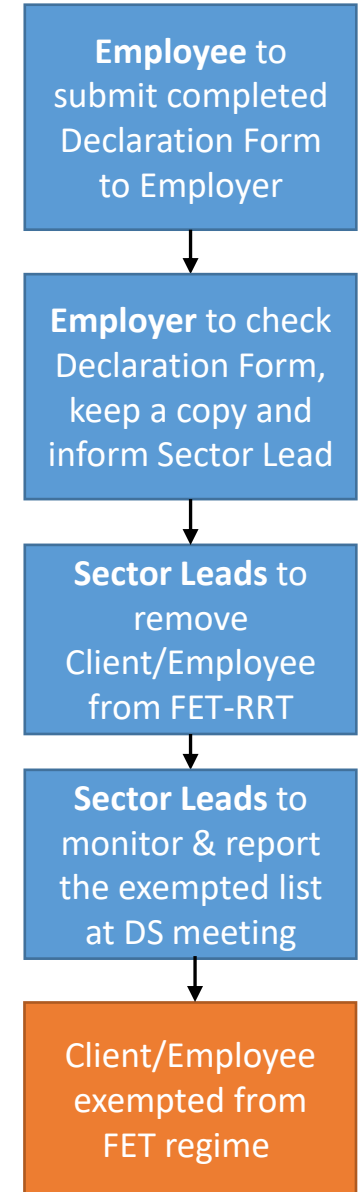
- Nasal Surgery
- Facial injury (*that may affect the collection of nasal samples from the nostril*)

### 2. Exemption due to special needs and disability

- Special needs such as autism
- Disability such as vision loss, physical impairment

### 3. Exemption due to past infection from COVID-19 and if fully vaccinated

- Fully vaccinated employees who recovered from a previous COVID-19 infection





# Additional Time-Limited Exemption Criteria from FET-RRT Regime

In additional, employees can be exempted from the FET RRT on a time-limited basis based on the criteria below:

## **1. Long Term Leave**

- Staff on long term leave of at least a month (e.g. maternity leave, study leave) can be temporarily exempted from RRT. After their leave ends, they would need to be placed back on RRT

## **2. Part Time Staff who works less than Once a Month**

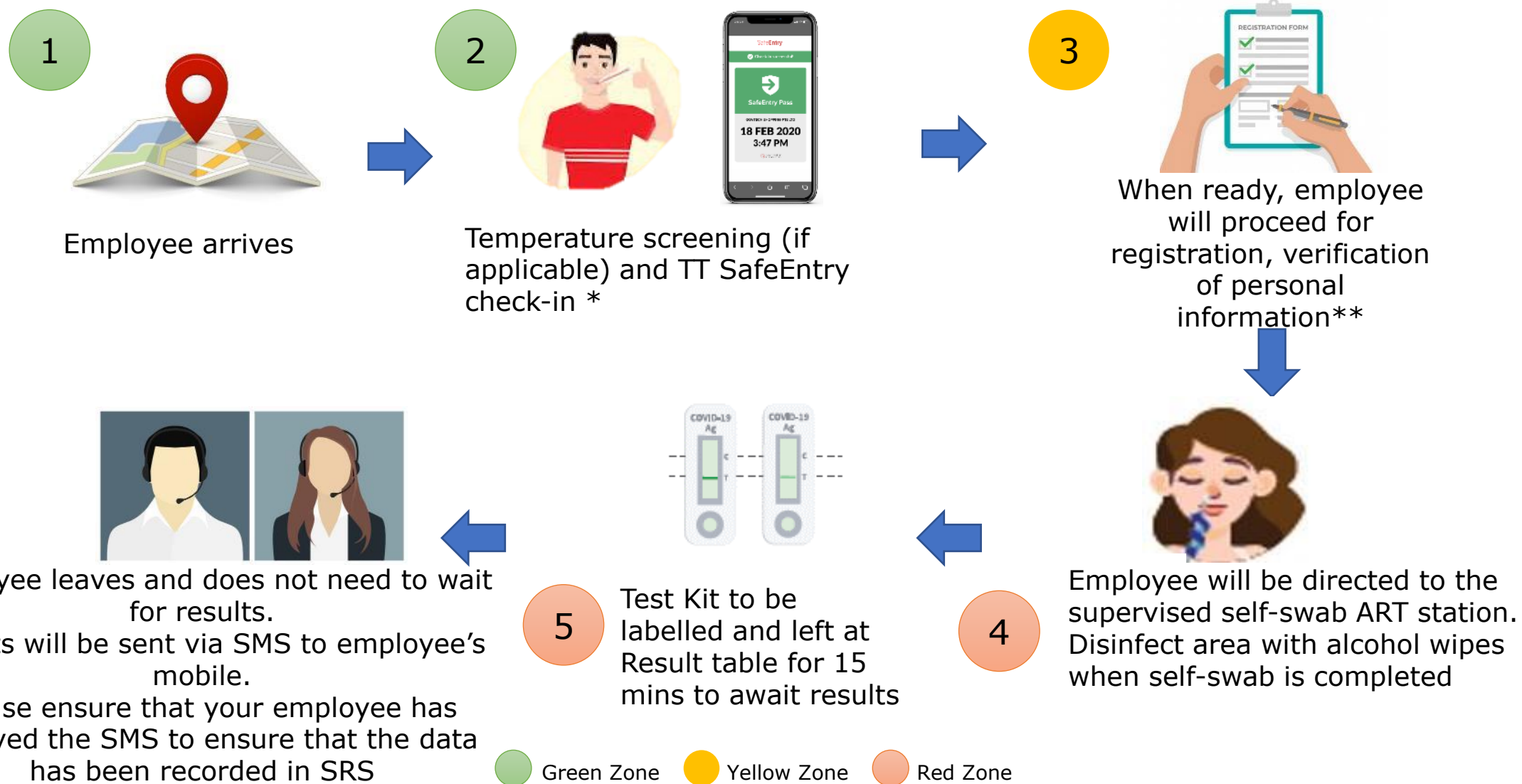
- Part-time staff who works for at least once a month would need to be subjected to the full RRT regime. If they work less frequently than once a month, they need not be placed on RRT

## **3. Staff on Short-Term Overseas Leave**

- Full Time Staff on short-term overseas leave can be temporarily exempted from RRT for the time period that they are overseas even if it's less than one month. When they are back from overseas, they would need to be subject to the prevailing border measures and thereafter resume RRT once they return to work

### **3. Overview of the Employee's Journey in the ESSS**

# Possible Arrangement for ESSS with On-Site Test (10-15 mins)



\* Temperature taking for employees (under ESSS) at company premises will be dependent on Sector Lead's advisory/ requirements. If client has ARI-symptoms, on-ground staff to direct worker to nearest SASH-PHPC for ART-PCR swab test (as per workflow for ARI-patients)

\*\* If client has contraindications, employers can seek exemption requests (See Exemption from FET-RRT section)

# Workers who are unvaccinated and medically ineligible would be required to show proof via doctor memo, for FOC test at QTC

Note: ESSS can also be conducted virtually. (See next slide)

# Alternative Approaches to On-Site Supervision For ESSS

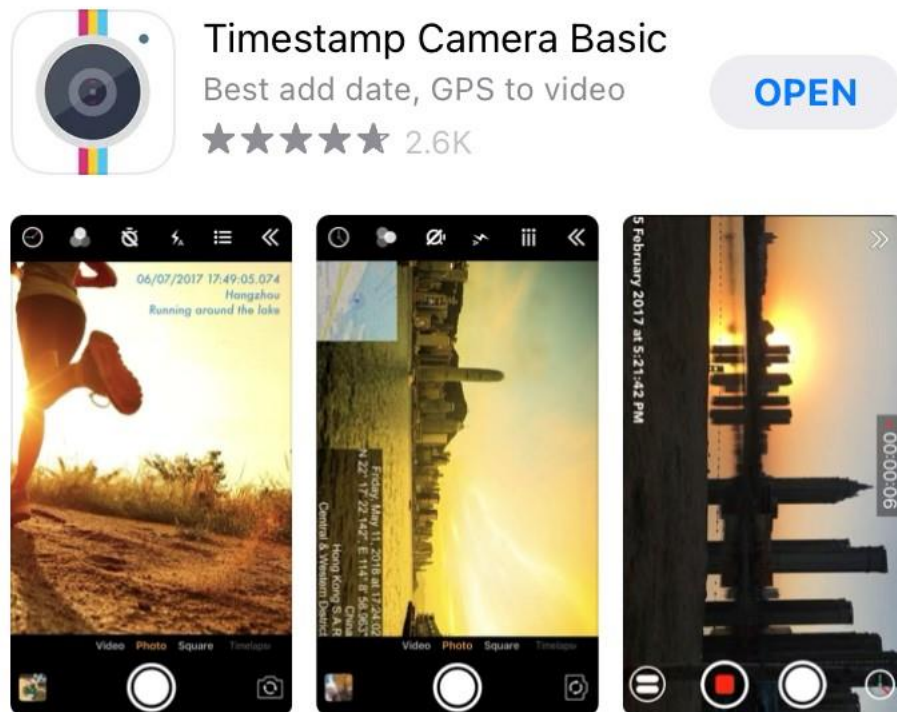
- For operational flexibilities for ESSS in order to ease the workload of employers and supervisors, possible alternative to on-site supervision includes:
  - Virtual-Live Supervision:
    - ART swabbing process to be supervised real-time via virtual platforms.
    - During virtual call, employees annotate details (name & timestamp) on the test kit and perform self-swab.
    - Employees can exit the virtual platform after self-swab and submit a photo of the test kit result to supervisors thereafter.
    - Supervisor-employee ratio can be up to 1:10 on virtual platforms.
  - Post-Swab Video Supervision:
    - Employees take a video of themselves self-swabbing and submit the video alongside a photo of the ART test kit results. Both video and photo should show a timestamp.

Showing Timestamp for Video	Showing Timestamp for Photo
<ul style="list-style-type: none"><li>• Use TimeStamp Camera App* (available in App Store and Google Play)</li><li>• Perform self-swab after showing date and time from a phone / watch to the camera.</li><li>• Perform self-swab in a room with a visible digital clock / watch with date shown.</li></ul>	<ul style="list-style-type: none"><li>• Use TimeStamp Camera App* (available in App Store and Google Play)</li><li>• Put another phone/watch with date shown next to test kit</li></ul>

- Employers should conduct 100% checks on the videos; Sector Leads can adopt an audit approach

*\*See Next Page for Screenshot of TimeStamp App and sample of photo taken using the app*

# Timestamp Camera App



Screenshot of Timestamp Camera App available on App Store



Sample of Photo taken using Timestamp Camera App (note: test kit shown here is only meant for display, and has not been used)

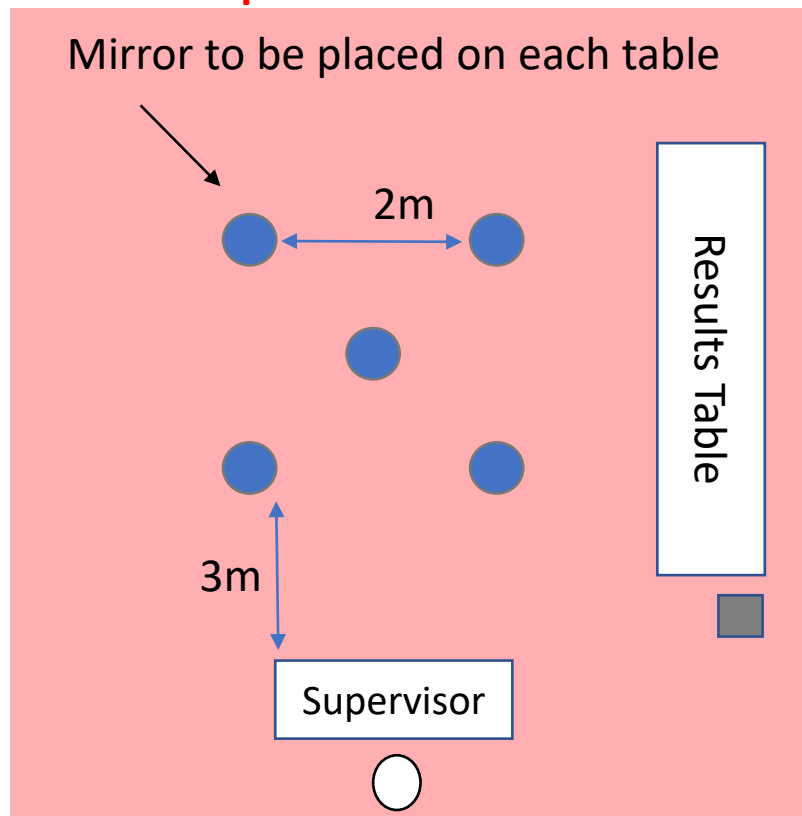
## **4. Recommended Site Set-up and IPC Considerations for On-site ESSS**

# Proposed Site Layout – On-site ESSS

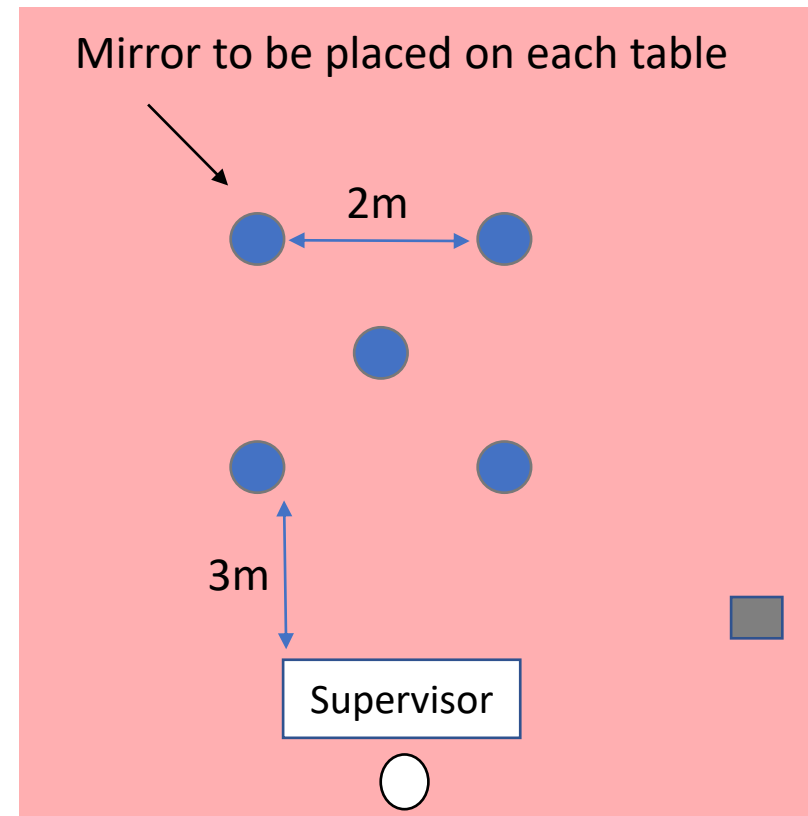
## The swab area should:

- Well ventilated, preferably outdoor.
- Have non-absorbent flooring, walls and furniture for ease of cleaning. Avoid carpeted and cloth covered furniture.
- To prevent cross infection when mask-off during the self swab, it is recommended to have at least 2m separation between worker's undergoing swab
- Supervisor must be at least 3m from the employees conducting the self-swab
- All non-essential personnel should not be inside the testing area when there are employees undergoing self-swab operations




### Option 1: Swab and Go



### Option 2: Swab and Hold for Results



If the ART tests are read at a central testing area, the test devices will need to be labelled clearly to avoid mix-up. The central testing area must be wiped down after each batch of tests are read.

Legends	Descriptions
	Chairs with Tables (non-absorbent) and Small Mirror (instructions poster to be included)
	Tables
	Dustbin (double-lined, preferably with a lid/cover)

**Recommend 1 Supervisor : 5 clients (per cycle).**

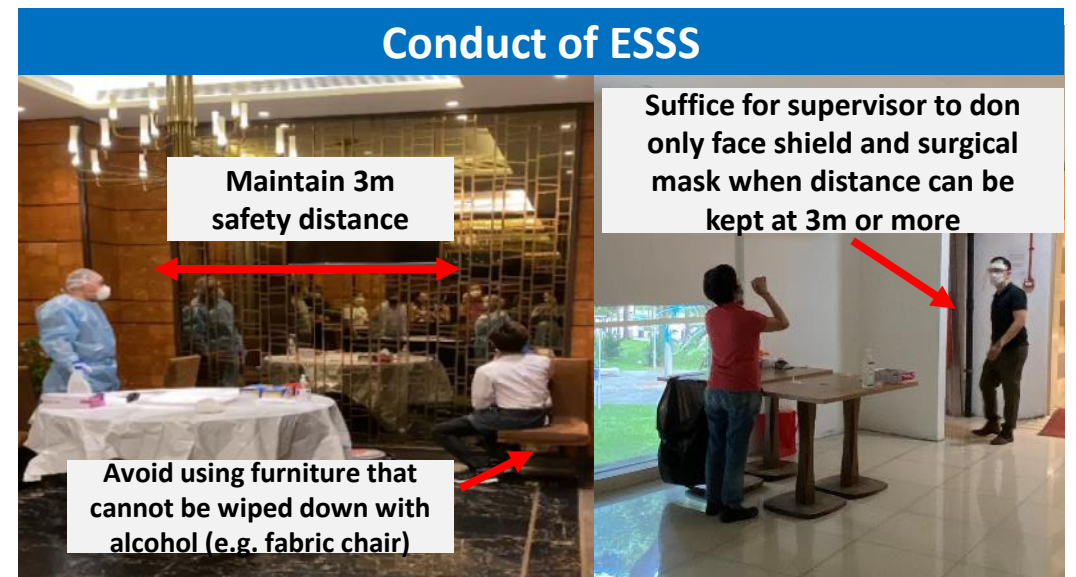
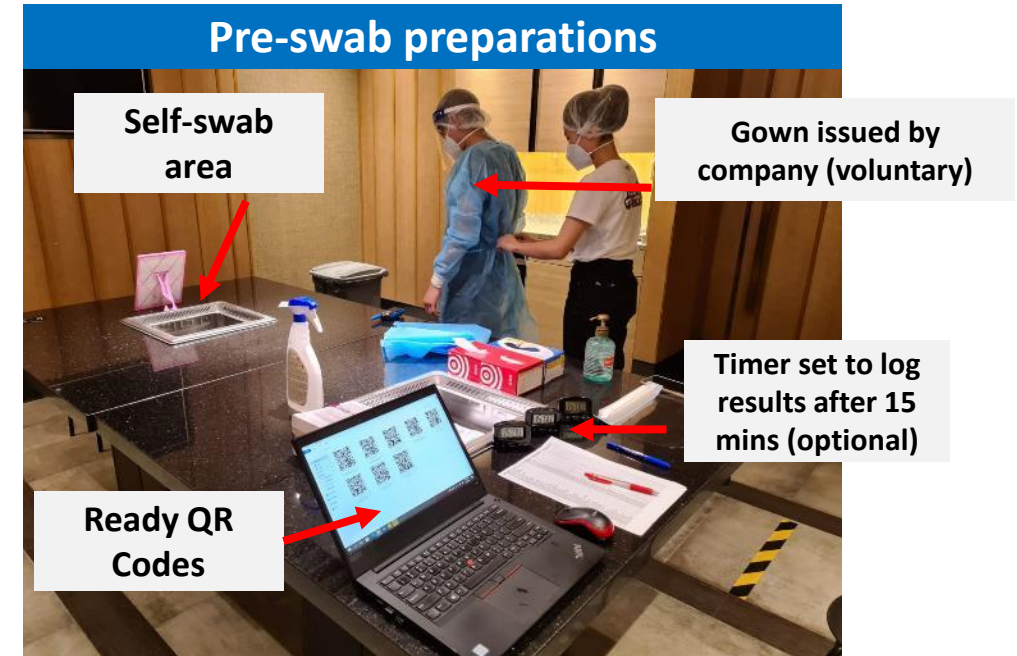
**New companies can consider 1 Supervisor : 2 clients (per cycle) before scaling up.**



# Good Practices for On-site Employer Supervised Self-Swab (ESSS)

## Site set-up and IPC Considerations

1. Keep self-swab area clutter-free. To minimally have nearby:
  - a. FET kit (for self-swab)
  - b. Hand sanitizer (for before/after self-swab)
  - c. Alcohol wipes (for area wipe-down)
  - d. Pedal bin (to discard test kit and wipes)
  - e. Mirror is optional
2. Employer/ employees to have ready individual specific QR code (generated via COVID-19 Self Testing Portal) either screenshot or saved on employer/ employees mobile device (e.g. hp, tablet, laptop)
3. Choose a quiet area for supervisors to easily provide instructions to self-swabbing employee while maintaining 3m safety distance.
4. If test site is located at a public area (e.g. outside a food court), to cordon off the area to prohibit public access.
5. Employer to share videos/ materials on how to conduct self-swab with employee before day of swab.
6. Supervisors can do a demonstration beforehand (without removing surgical mask) to alleviate employees concern on pain or self-swabbing wrongly.
7. To remind employees to perform hand hygiene before leaving Test area
8. Supervisors (or client) should wipe down the swab station after an individual has completed self-swab. The supervisor should also ensure that the wipe down of each station is done properly (“S-Shape Technique”).





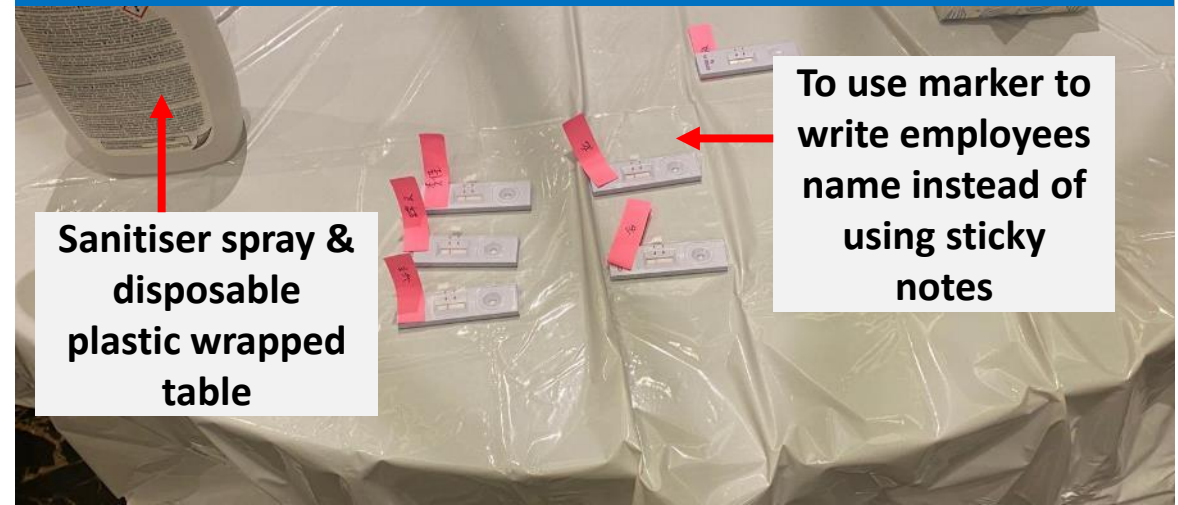
# 5. Results Management

# Good Practices for Employer Supervised Self-Swab (ESSS)

## Awaiting test results/ loading of test results

1. To wait at least 15 minutes for results to appear on the test kit before submitting/uploading on SRS.
2. Use white label stickers or permanent markers to indicate employees' initials to avoid mixing up test kits while waiting for results.
3. Supervisors to ensure employees are contactable if they adopt the "swab and go back to work" model, instead of "swab and wait for results before going back to work" model.
4. Check to ensure employees receive an SMS indicating their test results (only applicable for local mobile number).

## After self-swab is completed

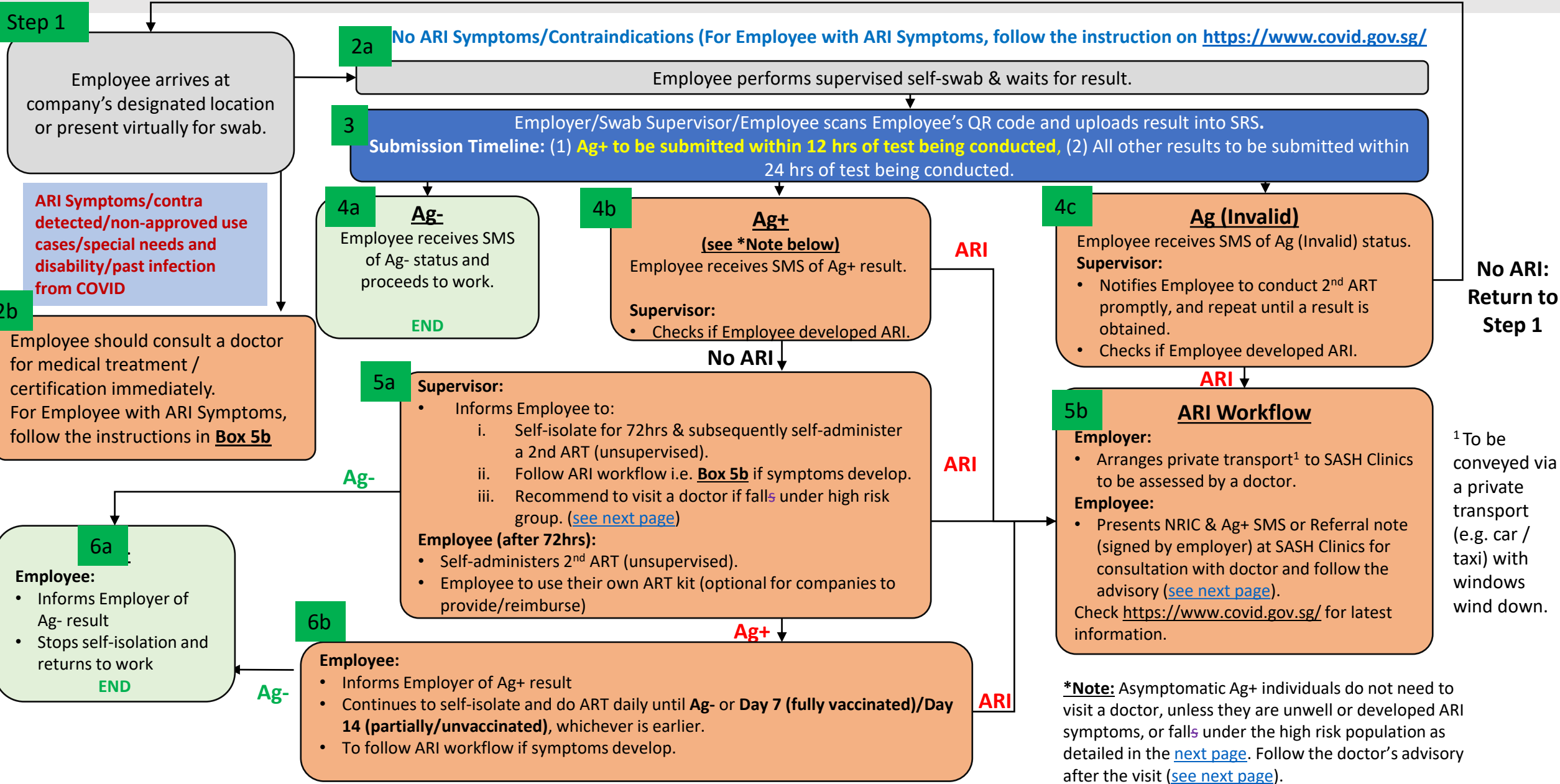


## OTHER GOOD ON-GROUND BEST PRACTICES (ESSS)

### Additional notes

- ✓ Conduct FET during off-peak timing.
- ✓ Put up posters on self-swab instructions at the test site to help employees familiarise themselves with the steps.
- ✓ If there is a mirror, the mirror can be cleaned at the end each day instead after each swab.

# AG+ Results Handling Workflow



**\*Note:** Asymptomatic Ag+ individuals do not need to visit a doctor, unless they are unwell or developed ARI symptoms, or falls under the high risk population as detailed in the [next page](#). Follow the doctor's advisory after the visit ([see next page](#)).

# Healthcare Protocol 2

## Who is eligible?

- Individuals who feel well and have self tested positive; OR
- Assessed by a doctor to be low-risk with mild symptoms.

## Follow these steps:

1. You should self-isolate for **72 hours** at home.
2. After 72 hours, perform a **self-administered ART**. Resume normal activities when you get a negative result.
3. If you test positive, continue to self-isolate and self-test daily until you obtain a negative results OR until 12pm on **Day 7** (for fully vaccinated individuals and children below 12 years old) or **Day 14** (for unvaccinated / partially vaccinated individual individuals aged 12 years old and above), whichever comes earlier.



## WE RECOMMEND THE FOLLOWING INDIVIDUALS WHO TEST POSITIVE TO SEE A DOCTOR EVEN IF THEY ARE FEELING WELL:

### Persons who are:

- aged less than 5 years old;
- fully vaccinated, and aged 70 years and older;
- partially vaccinated or unvaccinated, and aged 50 years and older.

### Persons who are/have:

- pregnant;
- on dialysis;
- diagnosed with HIV or AIDS;
- had organ transplant surgery;
- been diagnosed with cancer before;
- any disease or taking medications that weaken the immune system;
- any disease affecting their heart, lungs, kidneys, liver or brain that required hospital admission in the last 6 months.

### Persons aged less than 12 years old who have:

- Diabetes Mellitus or Hypertension;
- any congenital condition or growth disorder that affects the heart, lung or brain.

# Referral note for a Confirmatory PCR Test



MINISTRY OF HEALTH  
SINGAPORE

## REFERRAL FOR CONFIRMATORY PCR TEST

**Full Name:** ABCDEF  
(as per NRIC/FIN/ Passport)

**NRIC/FIN/Passport Number:** S1234567A

**Date & Time of Test:** 22/10/2020, 16:45

**Type of COVID-19 Test:** Antigen Rapid Test

**Brand of COVID-19 Test:** BD Veritor/ SD Biosensor/ Standard Q/ Panbio

**COVID-19 Test Result:** ANTIGEN POSITIVE / INVALID<sup>1</sup>

To whom it may concern,

The abovementioned is required to obtain a Government-funded COVID-19 polymerase chain reaction (PCR) test\* to confirm if he/she is infected with COVID-19.

2. For further details, please contact:

- i. [Name of employer/contractor (and branch if applicable), email, phone number]; and/or
- ii. [Name of Antigen Rapid Test Provider (and branch if applicable), email, phone number]

Stamp/Signature/Date

Name and Designation of Swab Supervisor/Trained Swabber:

Name of Antigen Rapid Test ("ART") Provider/Worksite (including branch if applicable):

Name of Employer/Contractor (including branch if applicable):

\*Confirmatory COVID-19 PCR tests for ART-positive and ART-invalid results are available at Swab-and-Send-Home (SASH) Public Health Preparedness Clinics (PHPCs), fully subsidised by the Government. A list of SASH PHPCs can be found at <http://phpc.gov.sg>. Individuals **must** call the clinic to make an appointment and confirm that they are able to obtain a confirmatory COVID-19 PCR test during their visit. Confirmatory COVID-19 PCR tests can also be obtained from non-SASH PCR test providers at the individual's own expense. Individuals **must** self-isolate at home until notification of a negative COVID-19 test result.

<sup>1</sup>An 'ART invalid' test result means that the sample(s) has been tested twice and in both instances, there was no

If the employee is required a referral letter for a PCR Test at the SASH clinics, the employer should complete the following document for the employee.



Adobe Acrobat  
Document

- Pls indicate "name of employer and contact details" and "name of ART provider and contact details" (if applicable)
- To be signed off by employer
- Indicate "Name of trained supervisor"
- Pls indicate name of worksite (e.g. JEM Shopping Mall, XXX Shipyard, etc.)
- Pls indicate company name

## **6. End of Ops Cleaning and Waste Disposal**

# Cleaning and Disinfection

- Cleaning and disinfection should be performed using products listed in NEA's "List of Household Products and Active Ingredients for Surface Disinfection of the COVID-19 Virus" or 70% alcohol wipes ("recommended cleaning products").
- At the end of ops, wipe down all the items (both used and not used) (e.g. equipment) before packing them into the storage boxes. After which, wipe down the storage boxes as well.
- All reusable items (e.g. face shields) shall be properly decontaminated, labelled before storing/reusing.

# Waste Disposal

- If PPE and used kits are not visibly/ heavily soiled, they may be disposed as general waste;
- Items must be disposed of in closed bins (e.g. pedal bins);
- The waste must be then be double-bagged in black trash bags and cable-tied before placing them at the disposal holding area (which must be located away from human traffic and public access) to prevent any unintended exposure and cross contamination;
- Items visibly soiled (i.e. blood or vomitus) should be discarded as biohazardous waste. Upon confirming these are to be treated as Biohazard Waste, staff is to inform the necessary agency to arrange for collection and disposal of the Biohazard Waste.
- Biohazardous waste is to be collected by a licensed biohazardous waste disposal contractor, in accordance to the licensed biohazardous waste disposal contractor's Standard Operating Procedures.
- Waste bin should not touch the result table
- All unsoiled wastes (e.g. PPE, tissues) generated on sites are to be treated as general waste. These are to be double bagged in BLACK TRASH BAGS and each bag to be cable tied. Venue POC will dispose them like any other general waste.
- Only PPE that are heavily soiled and badly contaminated are to be treated as biohazard waste and bagged in YELLOW Biohazard Bag and cable tied.
- For Biohazard (BH) Waste, supervisor to inform their company's Facility Manager or HR to arrange for collection and disposal of the Biohazard Waste.
- Supervisors managing the BH waste disposal must wear PPE comprising of N95 masks, gloves, standard gown and eye protection (face-shield/goggles). PPE gown to be disposed as non bio-hazard waste if there is no visible contamination with any person's bodily fluid.
- Treatment of waste must be treated seriously at all times.



# 7. High Level Overview of Submission of Test Results for Workers under ESSS Model Swab Registration System (SRS)

**Important note:** This section provides an overview, from a process standpoint, of important procedures to take note of. For detailed step by step instruction on the SRS process and associated dependencies, please refer to the SRS guide through the links provided in the slides within this section.

# Overview of Roles in SRS



## Sector Lead

- Have an SRS account
- Have access to Daily Reports specific to sector
- Main Role:
  - Creation of Company Admin accounts
  - Bulk schedule employees for appointments at QTCs
  - Manage the Company HR accounts



## Company HR

- Have an SRS account
- Have access to Daily Reports specific to company
- Main Role:
  - For SRS V1: Upload employees' results in SRS
  - For SRS V2: Maintain the list of swab supervisors in
  - Upload and schedule employees for appointments at QTCs



## Swab Supervisor

- Employee of the company
- Main role:
  - Supervise employees in performing a self-test once or twice every week or as required by sector lead
  - Record employees' results in SRS using excel (SRS V1) or QR code (SRS V2)
  - Ensure that employee has received SMS of result

**SRS V1 and SRS V2 are separate systems, and companies can decide on which system to deploy depending on requirements.**

SRS V1: Most actions can be completed offline, and uploading of results are through the use of a tabulated Excel Spreadsheet containing results of multiple employees.

SRS V2: Real time online system, where uploading of data for each employee is through the use of a QR code.

### **Note:**

**All Ag+ results must be submitted within 12 hours. All other results are to be submitted within 24 hours of the operations.**

# Summary of SRS Accounts, Functions and Roles

**Note:** For detailed step by step instruction on the creation and setup of SRS for ESSS, please download the **SRS Guide for Company HR: ESSS** and **SRS Guide for Company HR: QTC Auto-scheduling of FET RRT Appointments** from the link as below as required.



Microsoft Excel  
Worksheet



Adobe Acrobat  
Document

## Company HR Account (Created by: Sector Lead)

SRS Guide for Company HR: ESSS

[English Language](#)

[Chinese Language](#)

[Malay Language](#)

[Tamil Language](#)

SRS Guide for Company HR: QTC Auto-scheduling of FET RRT Appointments

[English Language](#)

[Chinese Language](#)

[Malay Language](#)

[Tamil Language](#)

### ART Results Submission (Method 1): Upload via Excel

**Swab Supervisor's Role:** Record ART Results using Excel Nominal Roll Template

**Company HR's Role:** Upload Excel Nominal Roll

### ART Results Submission (Method 2): Upload via Company-Specific Link

**Company HR's Role:** Add Swab Supervisor, Generate Company-Specific Submission Link

**Swab Supervisor's Role:** Upload ART Results using Company-Specific Link

### Auto-Scheduling Employees on Fast and Easy Testing Rostered Routine Testing (FET RRT)

**Company HR's Role:** Add Employees Details, Schedule/Reschedule Employees' Appointment

(Appointments will be scheduled on a recurring basis automatically by SRS)

# Personal Data - Standard Notification (For Companies to Display)

**Purpose:** The standard notification will be used as part of the instructions to the companies (communicated via Sector Leads) to notify the employees that their employees will be collecting their Personal Data and FET results to submit to HPB and the Singapore Government.

**Use:** Companies are to print and put up copies of the Standard Notification at prominent spots where the employees will be able to read the notification statement prior to them doing the FET swab.



Standard  
Notification (For Companies to Display)

## NOTIFICATION ON DATA COLLECTION FOR "FAST AND EASY TESTING"

This testing is conducted to collect the following data ("**Data**") required to support the Singapore Government's "Fast and Easy Testing" initiative ("**FET**"), which includes Antigen Rapid Test ("**ART**") or Breathalyser for the prevention and management of COVID-19 in Singapore:

1. Identification Number;
2. ID Type;
3. Country of issue;
4. Full Name (as in ID);
5. Date of Birth;
6. Gender;
7. Nationality;
8. Contact Number;
9. Postal Code;
10. Street Name;
11. Level Number;
12. Unit Number;
13. Date of Test;
14. Time of Test;
15. Test Brand;
16. Test Type;
17. Test Result;
18. Reason for Test

Please note that the set of Data to be collected may be subject to further adjustments.

By taking this test, you acknowledge that this Data is submitted to the Health Promotion Board ("**HPB**") and the Singapore Government for these purposes ("**Purposes**"):

- (a) to undertake public health measures to prevent and contain COVID-19 spread, such as contact tracing, work place safe distancing measures, etc.
- (b) to provide services to the person tested; and
- (c) to undertake any other legally permissible purposes for the delivery of government services and performance of public functions.

Where necessary, this Data may also be disclosed to employers to assist with the Purposes above.

HPB will protect your information according its Privacy Policy, set out in <https://www.hpb.gov.sg/privacy-statement>.

This notification may be revised by HPB from time to time according to requirements. The latest update can be found on <https://go.gov.sg/standardnotification-fet>

# Terms & Conditions for SRS V2 (For Companies reference)

**Purpose:** Similar to the Standard Notification, the T&Cs will be used in the SRS V2 as this involves the direct use of an IT system for data submission by the employees.

**Use:** Sector Leads are to inform companies about the T&Cs which employees' Personal Data and FET results will be collected and submitted to HPB and the Singapore Government through SRS V2.

## TERMS AND CONDITIONS

This <System/App> collects data ("Data") required to support the Singapore Government's "Fast and Easy Testing" initiative ("FET"), which includes Antigen Rapid Test ("ART") or Breathalyser for the prevention and management of COVID-19 in Singapore:

1. Identification Number;
2. ID Type;
3. Country of issue;
4. Full Name (as in ID);
5. Date of Birth;
6. Gender;
7. Nationality;
8. Contact Number;
9. Postal Code;
10. Street Name;
11. Level Number;
12. Unit Number;
13. Date of Test;
14. Time of Test;
15. Test Brand;
16. Test Type;
17. Test Result;
18. Reason for Test

Please note that the set of Data to be collected may be subject to further adjustments.

By using this <System/App>, you acknowledge that this Data is submitted to the Health Promotion Board ("HPB") and the Singapore Government for these purposes ("Purposes"):

- (a) to undertake public health measures to prevent and contain COVID-19 spread, such as contact tracing, work place safe distancing measures, etc.
- (b) to provide services to the person tested; and
- (c) to undertake any other legally permissible purposes for the delivery of government services and performance of public functions.

Where necessary, this Data may also be disclosed to employers to assist with the Purposes above.

HPB will protect your information according its Privacy Policy, set out in <https://www.hpb.gov.sg/privacy-statement>.

HPB reserves the right to change, modify or supplement the Terms and Conditions at its discretion and at any time, by posting the changed, modified or supplemented Notification Statement on or through [System/App], or through such other means as we may deem appropriate. Your continued use of [System/App] following the posting of any change, modification or supplement will constitute your acceptance of such change, modification or supplement.



SRS V2 T&C

# SRS workflow for Supervised Self-administered ART (ESSS)

## – Method 1 using SRS V1

- ✓ Leverage existing SRS PCR ecosystem with sector leads and companies
- ✓ Reporting module already available and used by sector leads

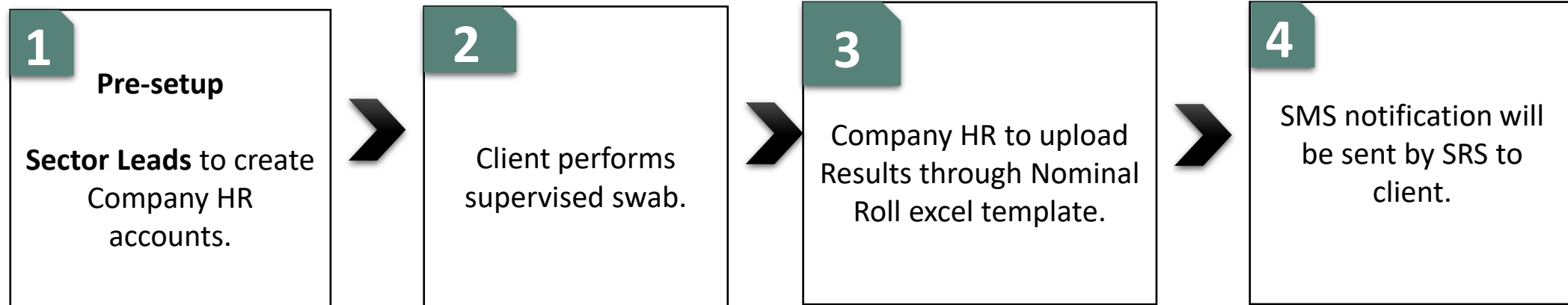
SRS Guide for Company HR: ESSS

[English Language](#)

[Chinese Language](#)

[Malay Language](#)

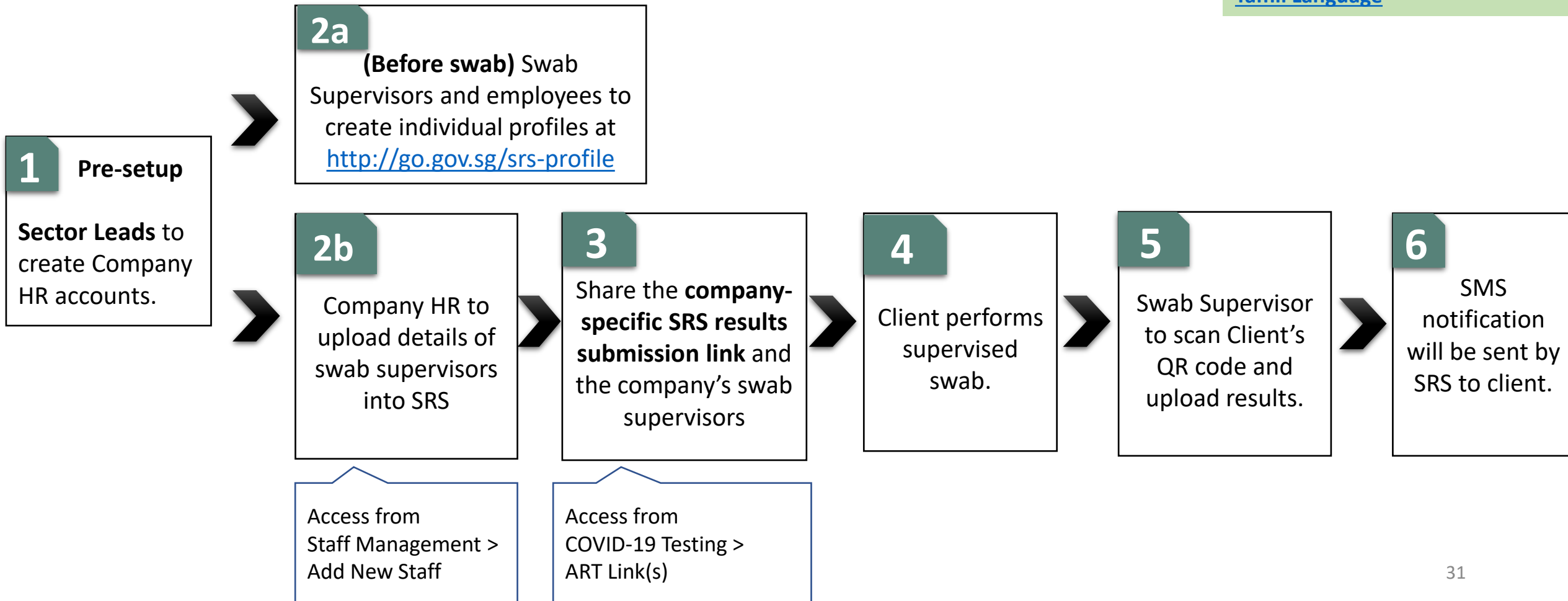
[Tamil Language](#)



# SRS workflow for Supervised Self-administered ART (ESSS) – Method 2 using SRS V2

- ✓ Leverage existing SRS PCR ecosystem with sector leads and companies
- ✓ Reporting module already available and used by sector leads

SRS Guide for Company HR: ESSS  
[English Language](#)  
[Chinese Language](#)  
[Malay Language](#)  
[Tamil Language](#)





# Screenshots of SRS Web Interface for ESSS – Method 2 using SRS V2

## Creation of Profile & Keying-in Personal Results

Generic Link for Employees Profile Creation:

<http://go.gov.sg/srs-profile>

Content to be finalised

Profile is tied to NRIC + Mobile Number

Mobile Number can be the same for different profiles (e.g. husband & wife sharing a phone)

Fields required same as Nominal Roll

QR code will be generated upon submission of data (i.e. profile created)

Note: Employee needs to select the type of kit at the result submission portion in SRS

Personal details remembered for subsequent login

Key in results

Personal details remembered for subsequent login

Key in results



# Screenshots of SRS Web Interface for ESSS – Method 2 using SRS V2

## Submission of Results – Supervised Version

**Swab Supervisor** logs into their SRS Web profile through company-specific SRS results submission link.

COVID-19 SELF TESTING PORTAL

ID Type  
NRIC

ID  
S12345  
67U

Mobile Number  
Enter mobile number to receive an OTP code for login  
91234567 SEND OTP  
✓ OTP sent to 91234567

OTP  
89372

VERIFY

**Swab Supervisor** to + ADD ART by tapping on the 3 bars at the top right.

A Singapore Government Agency Website

Your Profile

+ ADD ART

LOGOUT

**Swab Supervisor** to scan the client's QR Code and verify name, NRIC and mobile correct is correct. Tap **Save**.

A Singapore Government Agency Website

Add Test Results

Hi, Harmen

Test Reason \*  
SUPERVISED ART

Test Kit Brand \*  
BD VERITOR

SCAN QR Code

Test Date/ Time \*  
2021-06-07 14:54

Test Result \*  
-- Please select a value --

Cancel Submit



Test Reason \*  
SUPERVISED ART

Full Name \*  
Harmen Porter

NRIC/ FIN \*  
S9384752T

Mobile Number  
91234567

Registration Date/ Time  
2021-06-07 14:54

Save

Cancel

**Results to be read after 15min.**

Please refer to your test kit for specifics on timing and on how to interpret the results.

### Submit Test Results

PENDING RESULT

Full Name: Harmen Porter, XXXXX752T  
Registration Date/ Time: 2021-06-07 14:54

PENDING RESULT

Full Name: Carrie Lee, XXXXX111A  
Registration Date/ Time: 2021-06-07 14:20

PENDING RESULT

Full Name: Ng Siu Man, XXXXX431F  
Registration Date/ Time: 2021-06-07 14:30

Select the accurate test result, double check client's details and submit.

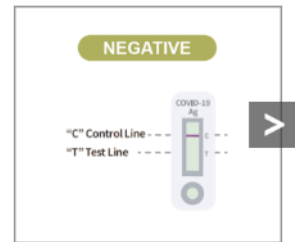
Full Name  
Harmen Porter

NRIC/ FIN  
S9384752T

Mobile Number  
91234567

Registration Date/ Time  
2021-06-07 14:54

Test Result \*  
Click/ Tap on the following images to select a test result. Selected result will be highlighted in blue



Remarks  
Some remarks here

Submit

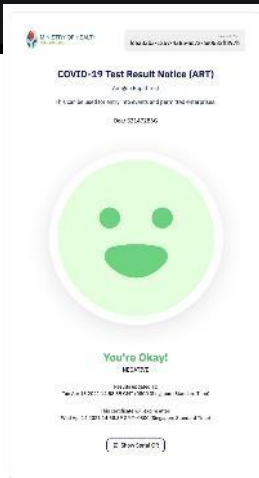
Cancel

# Sample of ART Results SMS

SMS will be sent once results have been successfully uploaded into SRS. Refer to SRS guide for instructions

## AG NEGATIVE

Dear F\*\*\*\*289U, your ART result is **NEGATIVE** for the test performed on 11-Jun (Fri) 11:35 AM. This result is uploaded by (BULKHEAD PTELTD)



Do note that the links expire in 24 hours after text message is sent.

Dear F\*\*\*\*514U, your ART result is **INVALID** for the test performed on 30-Sep (Thur) 10:15 AM. You will be required to do another ART.

If you are not under SHN/QO and this is your 2nd INVALID result, you are to self-isolate for 72 hours and subsequently self-administer an ART.

If your subsequent ART result is **POSITIVE/INVALID**, you are to self-isolate and self-administer an ART daily until your ART result is **NEGATIVE**.

At any time you have any Acute Respiratory Infection (ARI) symptoms such as fever, cough, running nose, sore throat and loss of taste or smell, or feeling unwell, please go to the nearest SASH GP clinic (<https://flu.gowhere.gov.sg>) immediately for a confirmatory PCR test. After your PCR test, please self-isolate till results are out.

(<https://checker...>)

## AG INVALID

### COVID-19 Test Result Notice (ART)

Antigen Rapid Test

For patients with respiratory infection, it is a legal requirement to stay home until you receive your PCR results.

Dear F6689514U



You need a retest.

INVALID

## AG POSITIVE

Dear F\*\*\*\*919K, your ART result is **POSITIVE** for the test performed on 30-Sep (Thur) 10:15 AM.

If you are not under SHN/QO and this is your 1st ART (**POSITIVE**), you are to self-isolate for 72 hours and subsequently self-administer a 2nd ART.

If your subsequent ART result is **POSITIVE/INVALID**, you are to self-isolate and self-administer an ART daily until your ART result is **NEGATIVE**.

At any time you have any Acute Respiratory Infection (ARI) symptoms such as fever, cough, running nose, sore throat and loss of taste or smell, or feeling unwell, please go to the nearest SASH GP clinic (<https://flu.gowhere.gov.sg>) immediately for a confirmatory PCR test. After your PCR test, please self-isolate till results are out.

(<https://checker...>)

### COVID-19 Test Result Notice (ART)

Antigen Rapid Test

For patients with respiratory infection, it is a legal requirement to stay home until you receive your PCR results.

Dear F1928289U



You need a retest.

POSITIVE

# **8. Annex A**

## **Infection Prevention & Control (IPC) for On-site ESSS**

# Infection Prevention & Control (IPC) Guidelines for Supervisors to Note

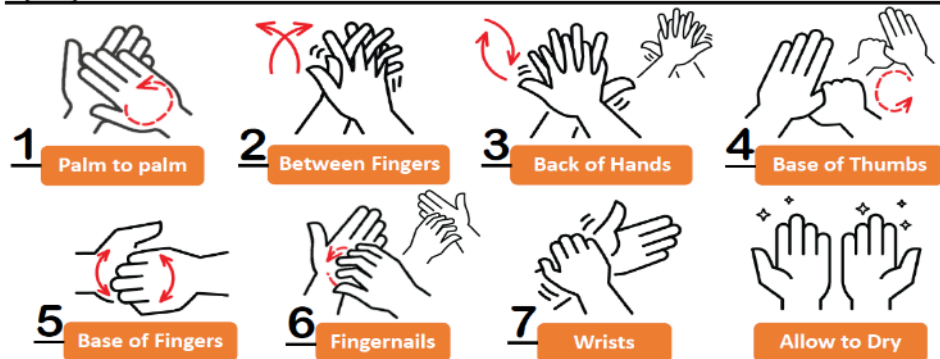
## Hand Hygiene



### 7-Step Guide to Clean Hands Alcohol-Based Hand Rub (ABHR)

Apply a palmful of hand sanitiser to ensure all surfaces are covered.

Perform hand hygiene with hand sanitiser for 20 – 30 seconds.



For use at Swab Operations sites only

- Wash your hands with soap and water (via the 7 simple steps)\*

OR

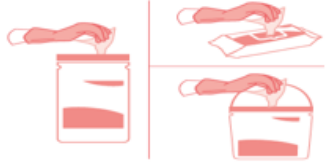
- Rub hands with hand sanitizer for at least 20 to 30 seconds

- Preferably to conduct self-swabs in an outdoor setting, or indoor with ample ventilation (open windows/doors and fans). It is not ideal to have air-conditioning at swab location and hence, air-conditioning to be switched off (where possible). (Note: for enclosed room with aircon, hepa filter/window exhaust must be installed with minimum of 6 air exchange per hour (ACH) in accordance with BCA NEA Guidelines.
- There should be minimal items at the swab stations.
- Test kits must be disposed of in closed bins, e.g. pedal bins) **and** waste must be then be double-bagged and sealed tightly before placing them at the disposal holding area (which must be located away from human traffic and public access to prevent unintended exposure and cross contamination)
- At the end of the day, environmental cleaning must be performed using NEA approved disinfectant
- Spills must be managed according to MOH guidelines. (Please check on MOH website for instruction that applies for your particular workplace setting)
- Staff must perform strict hand hygiene (before touching client, before procedure, after touching client, after touching any body fluids/blood, after touching the environment/surroundings)

\*<https://www.who.int/publications/i/item/9789240021280>

# IPC Guidelines: Cleaning & Disinfecting High Touch Surfaces

## Cleaning & Disinfecting Swab Area

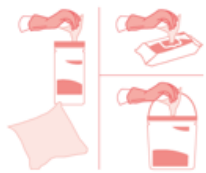


### STEP 1: PREPARATION

Take enough fresh wipes for cleaning swab station surfaces

### STEP 2: S-SHAPE TECHNIQUE

- Wipe the surface in an S-Shape moving from clean to dirty
- Use the wipe flat and not scrunched
- Do not go over the same area twice with the same wipe



### STEP 3: FRESH WIPES

Use a fresh wipe if your wipe becomes soiled or dry

### STEP 4: DISCARD

Discard used wipes in the waste bin (do not flush)



### STEP 5: LET DRY

Allow the surface to dry before use

Source: Medipal Alcohol Wipes Factsheet

- [Advisory on Surface Cleaning and Disinfection for COVID-19](#)
- [List of Household Products and Active Ingredients for Surface Disinfection of the COVID-19 Virus](#)

- Supervisors (or client) should wipe down the swab station after an individual has completed self-swab. The supervisor should also ensure that the wipe down of each station is done properly (“S-Shape Technique”).
- If company uses mirror (mounted or tabletop), it is not necessary to wipe down after every client if the worker does not touch the mirror.
- The swab area should be properly wiped down after each day’s testing operations. This includes furniture/queue poles/physical barriers/partitions.
- Supervisor to change gloves when it is dirty or torn and do hand-rub if supervisor touches the worker, their belongings, environment (e.g. tables/chairs etc), test consumables
- The flooring at swabbing zone should have a smooth surface, e.g. linoleum, vinyl finish, concrete, hard flooring) to facilitate ease of cleaning, such as mopping. The use of carpeted areas and fabric chairs are strongly discouraged as it is difficult to clean and would have to be wet-vacuumed/deep cleaned/removed and discarded after the end of the operations. If not possible, carpeted areas must be covered with a smooth finish surface (e.g. canvas plastic lining).

# IPC Guidelines for Donning and Doffing of PPE when required

If there is a need to use Full PPE for operations, the following are the step-by-step guide in the Donning and Doffing of the PPE.

## How to Put On PPE (ie. Donning of PPE)



Note: Hair Net is an optional item. It is recommended to be used when there is possibility that the hair might be affecting the effective operations by the staff.

## How to Take Off PPE (ie. Doffing of PPE)





# IPC – Cleaning and Disinfection

- Cleaning and disinfection should be performed using products listed in NEA's "List of Household Products and Active Ingredients for Surface Disinfection of the COVID-19 Virus" or 70% alcohol wipes ("recommended cleaning products").
- A "No Touch" process (ie. staff not in physical contact with any part or document that of the other staff has handled) should be observed as a primary mode of operations. If this is not possible, then proper hand sanitization and cleaning of area with the recommended cleaning products should be performed before attending to the next client.
- Items at the swabbing zone should be kept to a minimal to reduce the need for cleaning.
- To mitigate fomite transmission and reduce burden on cleaning team, objects within the test site should be minimized as much as possible.
- Chairs at waiting area is low touch area therefore cleaning can be done at end of ops or whenever it is dirty or soiled.
- At the end of ops, wipe down all the items (both used and not used) (e.g. equipment) before packing them into the storage boxes. After which, wipe down the storage boxes as well.
- The supervisor overseeing the site should also ensure that the cleaning of each station is done properly. The table top mirror need only be wiped down with alcohol wipe if the employees have touched it doing the testing.
- The Test Station must be sanitized by using the recommended cleaning product after use by each client. This include the equipment, table surface and chair (where applicable, depending on equipment design).
- Staff that is directly assisting the employees in the procedures must perform Hand Hygiene regime after attending to each and every employee and abide with the 5 Moments of hand hygiene.
- To remind employees to perform hand hygiene before leaving Test area
- Cleaning (tables, chairs, floor, equipment etc) shall be done at end of ops using NEA approved disinfectant products
- Deep cleaning\* (i.e. high touch areas, floor etc.), using NEA approved disinfectants should be carried out every fortnightly.
- The flooring at swabbing zone (e.g. open air canteens, outdoor tentages, carparks) should have a smooth surface (e.g. linoleum, vinyl finish, concrete, hard flooring) to facilitate ease of cleaning, such as mopping.
- All reusable items (e.g. face shields) shall be properly decontaminated, labelled before storing/reusing.

# IPC – Waste Disposal

- If PPE and used kits are not visibly/ heavily soiled, they may be disposed as general waste;
- Items must be disposed of in closed bins (e.g. pedal bins);
- The waste must be then be double-bagged in black trash bags and cable-tied before placing them at the disposal holding area (which must be located away from human traffic and public access) to prevent any unintended exposure and cross contamination;
- Items visibly soiled (i.e. blood or vomitus) should be discarded as biohazardous waste. Upon confirming these are to be treated as Biohazard Waste, staff is to inform the necessary agency to arrange for collection and disposal of the Biohazard Waste.
- Biohazardous waste is to be collected by a licensed biohazardous waste disposal contractor, in accordance to the licensed biohazardous waste disposal contractor's Standard Operating Procedures.
- Waste bin should not touch the result table
- All wastes (e.g. PPE, tissues) generated on sites are to be treated as general waste. These are to be double bagged in BLACK TRASH BAGS and each bag to be cable tied. Venue POC will dispose them like any other general waste.
- Only PPE that are heavily soiled and badly contaminated are to be treated as biohazard waste and bagged in YELLOW Biohazard Bag and cable tied.
- For Biohazard (BH) Waste, supervisor to inform their company's Facility Manager or HR to arrange for collection and disposal of the Biohazard Waste.
- Supervisors managing the BH waste disposal must wear PPE comprising of N95 masks, gloves, standard gown and eye protection (face-shield/goggles). PPE gown to be disposed as non bio-hazard waste if there is no visible contamination with any person's bodily fluid.
- Treatment of waste must be treated seriously at all times.



## **9. Annex B**

# **ART Kits, Bulk Breaking and Self-Swab Process**

# Storage Guidelines for Kits



BD Veritor Plus System



SD Biosensor Standard Q



Abbott Panbio Covid-19 AG

*[Majority Stock for Workplace ART Operations]  
17 x 7.1 x 23.5 cm (~0.39kg)*

- Storage temperature requirements: 2-30 degree Celsius
- Indoor, within an air-conditioned room where available
- Pallet size 40 x 48 inch / 122 x 108 cm (height clearance – approx 1.8-2M)
- Per Pallet –
  - BD - 4,320 Tests
  - Bio Sensor – 9,000 Tests
  - Pan Bio - 9, 600 Tests
- Per box - 25 Tests for SD BioSensor & Abbott PanBio. 30 Tests for BD Veritor.

**Note: For BD Veritor, the Analyzer is not a mandatory requirement to interpret the result from the BD Test Device.**

# How to Break Bulk – For Employers

## Items to prepare

1. Face shield and surgical mask, disposable gloves
2. 70% alcohol wipes and handrub
3. Ziplock bags or packing containers for ART kit items (depending on company's preference)
4. SD Biosensor test kit: Test Cartridge, Sterile Swab Stick, Nozzle Cap, Extraction Buffer Tube
5. BD Veritor test kit: Test Cartridge, Sterile Swab Stick, Extraction Reagent Tube
6. Abbott Panbio test kit: Test Cartridge, Sterile Swab Stick, Extraction Tube with caps, Buffer Bottle (to be shared with the box of kits)

## Steps for packing

1. Clean packing surface with alcohol wipe, put new box of kits on table surface.
2. Packing staff to do hand hygiene and wear face shield, mask, gloves. No talking between staff and maintain safe distance of 1m if there is more than 1 staff packing.
3. Commence packing the 4 (SD Biosensor) or 5 (Abbott Panbio) items, and check expiry date of kits
4. Companies can decide if they want to break the bulk package either individually or based on the quantity required. For example, individually packed bags using ziplock bag or container, whichever is easier for distribution. Each person conducting self-swabbing will have 4 (SD Biosensor) or 5 (Abbott Panbio) items in total.
5. In between new box of kits, practice hand hygiene with gloves on.
6. **For Abbott Panbio test kits, please see the bulk breaking process for details.**

For info:









- (X) Other items in the bulk package which is not required, for e.g. buffer rack, plastic label, can be discarded.
- Any loose items (that will be used in future) should be kept in a clean (wiped down) storage box/ziplock bag.

# SD Biosensor



## Items inside SD Biosensor Box

## SD BIOSENSOR KITS

Items in one box	SD Biosensor Standard Q	Qty	Needed for Individual Testing?
Test Cartridge (wrapped individually in foil pouch with desiccant)		25	Yes - to break bulk
Sterile Swab Stick		25	Yes - to break bulk
Nozzle Cap		25	Yes – to break bulk
Extraction buffer tube		25	Yes – to break bulk
Buffer Tray		2 trays	No – not essential to individual testing, not required to break bulk (This is to hold the extract buffer tubes in a mass swab setting.)
Plastic Film		1	No – not essential to individual testing, not required to break bulk (This is to cover the test device to prevent contamination by dust in a mass swab setting. If the individual's swab setting is generally dusty, the test device may be protected by using a sterile clear plastic bag.)
Standard COVID-19 Ag+ Positive Control Swab		1	No – not essential to individual testing, not required to break bulk (This is a control swab manufactured to verify the user's ability to properly perform the test and interpret the results.) <u>Not to be discarded</u>
Standard Respiratory Negative Control Swab		1	Good practice: Employers should use the QC control swabs to determine the fidelity of the test kits in each box. If the QC controls do not match and display the right results, the company should escalate to Sector Lead/HPB.



**Test cartridge**



**Nozzle cap**



**Extraction  
buffer tube**



**Sterile  
swab stick**

The following **4 items** should be prepared/pre-packed by the supervisor prior to self-swabbing:

1. Test cartridge
2. Extraction buffer tube
3. Nozzle cap
4. Sterile swab stick

# Overview on how self-swabbing is conducted using SD Biosensor test kits

## SD BIOSENSOR KITS

- 1** Please clean and dry your hands before starting the test.



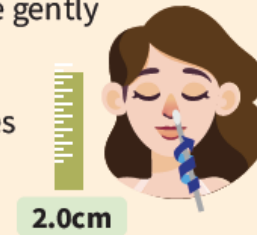
- 2** Before starting the test, please take out one swab stick, one test cartridge, one sealed extraction buffer tube and one nozzle cap. Take out the test cartridge from its packaging.



- 3** Remove swab stick from package.



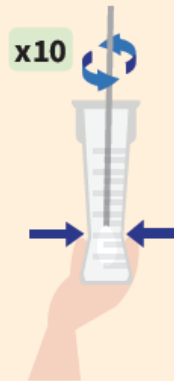
- 4** Insert the swab stick into the nostril (~2cm) while gently rotating. Twirl the stick 10 times while in the nostril.



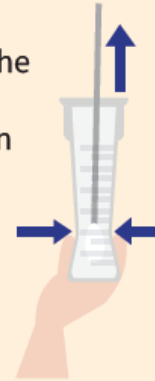
- 5** Repeat for the other nostril with the same swab.



- 6** Remove the seal from the extraction buffer tube and insert the swab into the extraction buffer tube to mix. While squeezing the buffer tube, stir the swab for 10 times.



- 7** Squeeze the extraction buffer tube when extracting the swab.



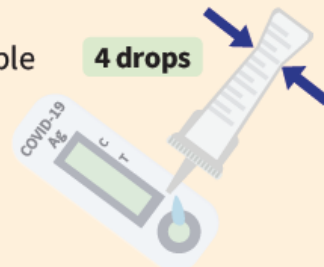
- 8** Press the nozzle cap tightly onto the tube.



- 9** Use your finger to gently tap the side of the tube a few times. This helps to mix the solution.



- 10** Place 4 drops onto the sample well of the test cartridge.



- 11** Wait for 15mins before checking the results on the test cartridge. Please keep the cartridge on a flat surface during this time.



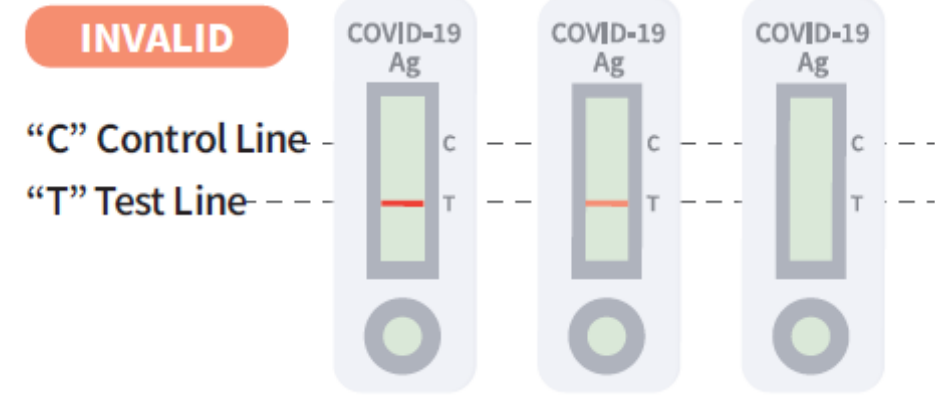
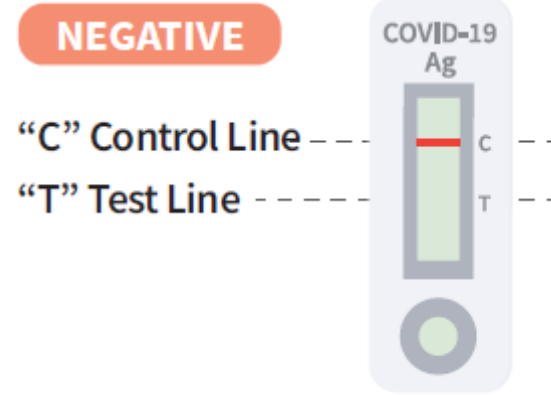
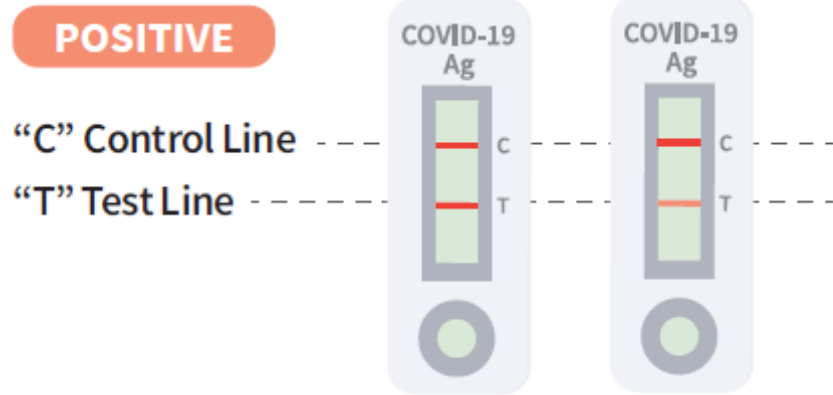
**15 MINS**

# Results Interpretation Using SD Biosensor Test Kits

Read the results on the test cartridge.  
If you see a line appearing at both the “C” and the “T” position, this indicates a positive test. Please seek medical attention for further evaluation and confirmatory testing.

If you see a line appearing at only the “C” position, this indicates a negative test.

If you see a line appearing at only the “T” position, the test is invalid. Please repeat the test with a new test kit.



Please note that the lines on the test cassette will appear in 15 minutes after you have added the specimen buffer in the test well. **Do not read results after 30 minutes.**

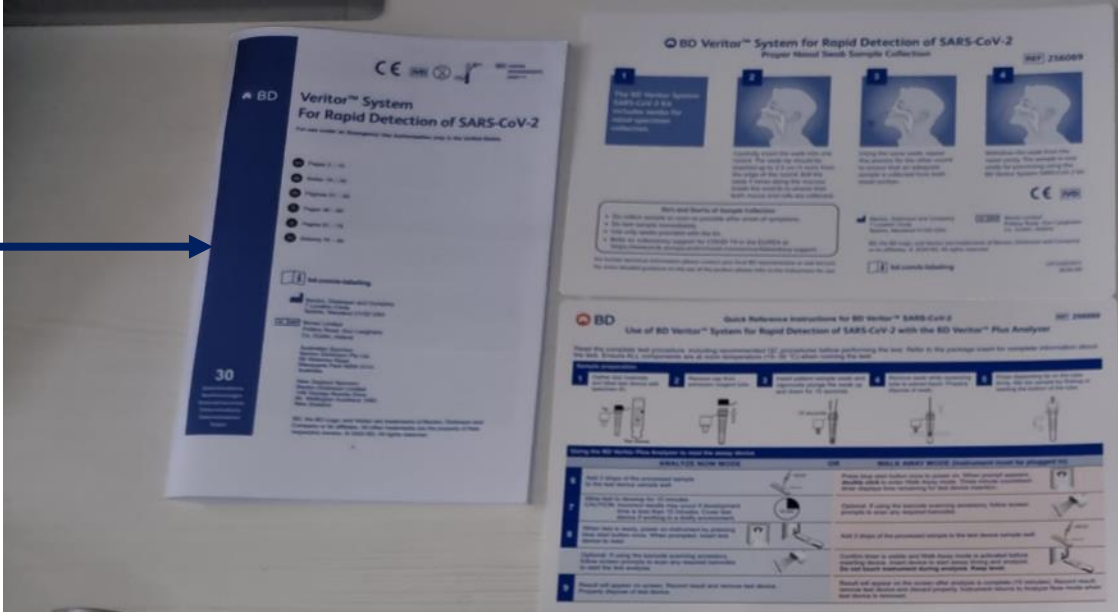


# BD Veritor



# Box Contents

Instruction sheets



BD Veritor System Test Device





Extraction Reagent (10 in each aluminium pouch)



Specimen sampling swab



# Components required per individual kit

Component		Quantity in Box	Quantity to use or pack per test
BD Veritor System Test Devices		30 individually packed single-use test devices	1
Extraction Reagent Tube		30 single-use reagent tubes, packed in 10s per aluminium pouch	1
Specimen sampling swabs		30 sterile single use swabs	1
SARS-CoV-2 (+) Control Swab and SARS-CoV-2 (-) Control Swab		1 each	<u>Not</u> required.

**Note: The Analyzer is not a mandatory requirement to interpret the result from the BD Test Device.**

# STEPS FOR REPACKING ART KITS (IF REQUIRED)

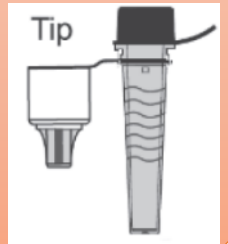
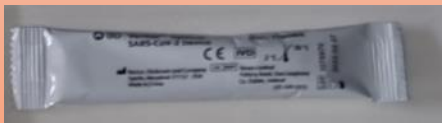
## Preparation

1. Clean packing surface with alcohol wipe.
2. Put new box of kits on table surface.
3. Disinfect hands.
4. Wear face shield, face mask, and gloves. **Minimise talking from this point onwards.**
5. Maintain safe distance of 1m between packers.

## Packing

1. Ensure each Ziploc bag has **1x Test Device**, **1x Specimen Sampling Swab** and **1x Extraction Reagent**.
2. When done with 1 box, disinfect hands with gloves on, using 70% alcohol hand rub.

Pack  
Into  
Ziploc  
Bag



Not  
required



Discard



## The Other Items

- Discard the buffer rack.
- Both the **Standard COVID-19 Ag+ Positive Control Swab** and the **Standard Respiratory Negative Control Swab** are not required.

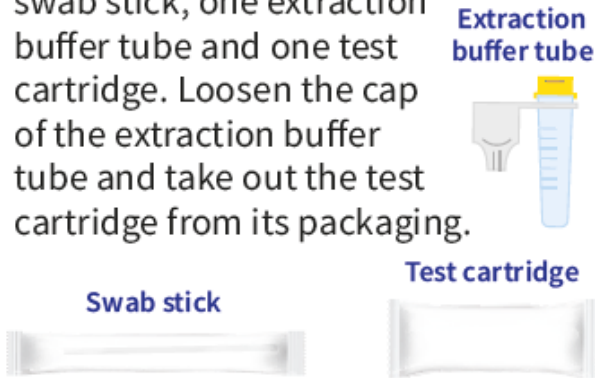
# SWABBING PROCEDURE

BD Veritor KITS

**1** Please clean your hands before starting the test.



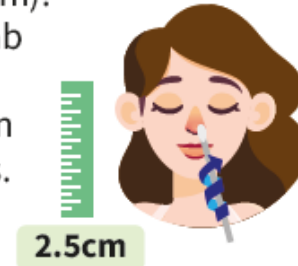
**2** Before starting the test, please take out one swab stick, one extraction buffer tube and one test cartridge. Loosen the cap of the extraction buffer tube and take out the test cartridge from its packaging.



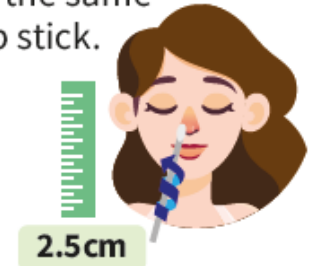
**3** Remove swab stick from package.



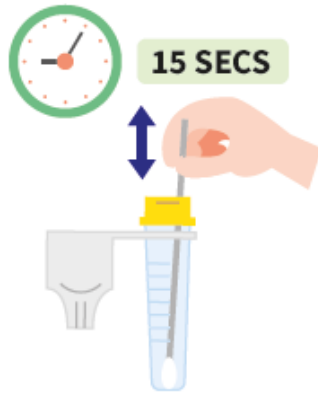
**4** Insert the swab stick into the nostril (~2.5cm). Twirl the swab stick 5 times and leave it in for 5 seconds.



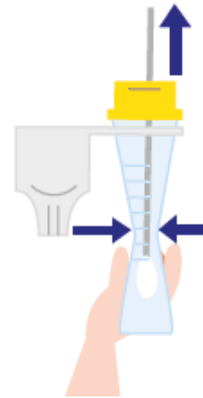
**5** Repeat for the other nostril with the same swab stick.



**6** Insert swab stick into the extraction buffer tube to mix. Plunge the swab stick up and down for 15 seconds.



**7** Squeeze the extraction buffer tube while extracting the swab stick.



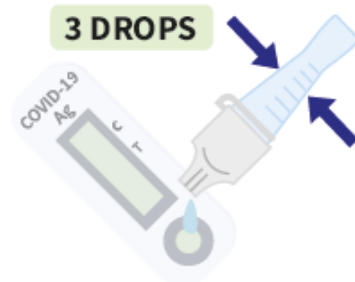
**8** Close the cap of the extraction buffer tube firmly. You should hear a "click" sound.



**9** Use your finger to gently tap the side of the tube a few times. This helps to mix the solution.



**10** Place 3 drops onto the sample well of the test cartridge.



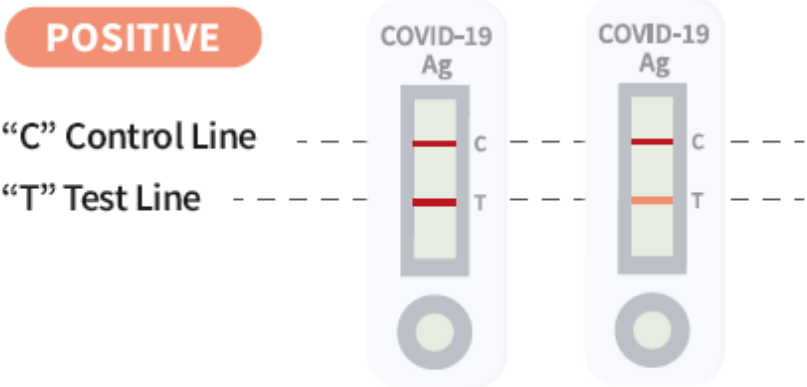
**11** Wait for 15mins before checking the results on the test cartridge. Please keep the cartridge on a flat surface during this time.



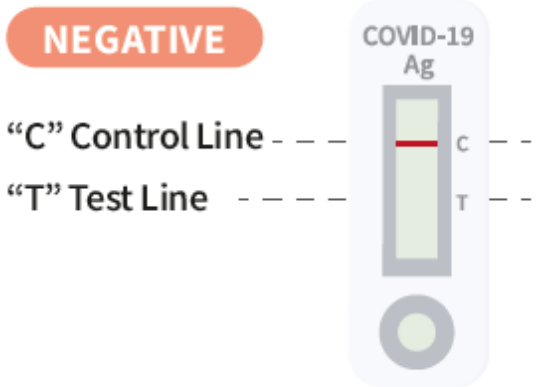
**15 MINS**



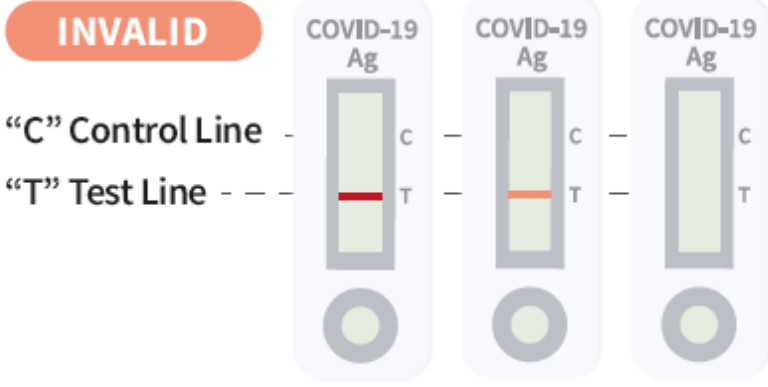
**12** Read the results on the test cartridge.  
If you see a line appearing at both the “C” and the “T” position, this indicates a positive test. Please see your doctor.



If you see a line appearing at only the “C” position, this indicates a negative test.



If you see a line appearing only at the “T” position or no lines appear at all, the test is invalid. Please repeat the test with a new test kit.



**13** Dispose all used items in the test kit into one plastic bag and tie it up with a rubber band or cable tie. Place the tied bag into another plastic bag and tie the second plastic bag with a rubber band or cable tie. Throw it into the rubbish chute immediately.



**14** Clean your hands after the test.



You may also refer to this QR code for video instructions



<https://go.gov.sg/ert-instructions>









# Abbott Panbio



**(Only break bulk if intention is for employees to bring home and use within 48 hours)**

## Items inside Abbott Panbio Box

## ABBOTT PANBIO KITS

Items in one box	Picture	Quantity	Needed for Individual Testing?
Test Cartridge (wrapped individually in foil pouch with desiccant)		25	Yes – to break bulk
Sterile Swab Stick		25	Yes - to break bulk
Extraction tube		25	Yes – to break bulk
Caps (blue cap & white bottom cap)		25	Yes - to break bulk
Buffer bottle with solution		1	Yes – Each Buffer Bottle is to support up to 25 Extraction Tubes in the same box.
Tube rack		1 tray	No – not essential to individual testing, not required to break bulk (This is to hold the extract buffer tubes in a mass swab setting.)
Abbott Panbio Positive Control Swab		1	No – not essential to individual testing, not required to break bulk (This is a control swab manufactured to verify the user’s ability to properly perform the test and interpret the results.)
Abbott Panbio Negative Control Swab		1	<u>Not to be discarded</u> Good practice: Employers should use the QC control swabs to determine the fidelity of the test kits in each box. If the QC controls do not match and display the right results, the company should escalate to Sector Lead/HPB.





Test cartridge



Buffer bottle  
(able to fill up to  
25 extraction tubes)



Extraction tube  
and blue cap

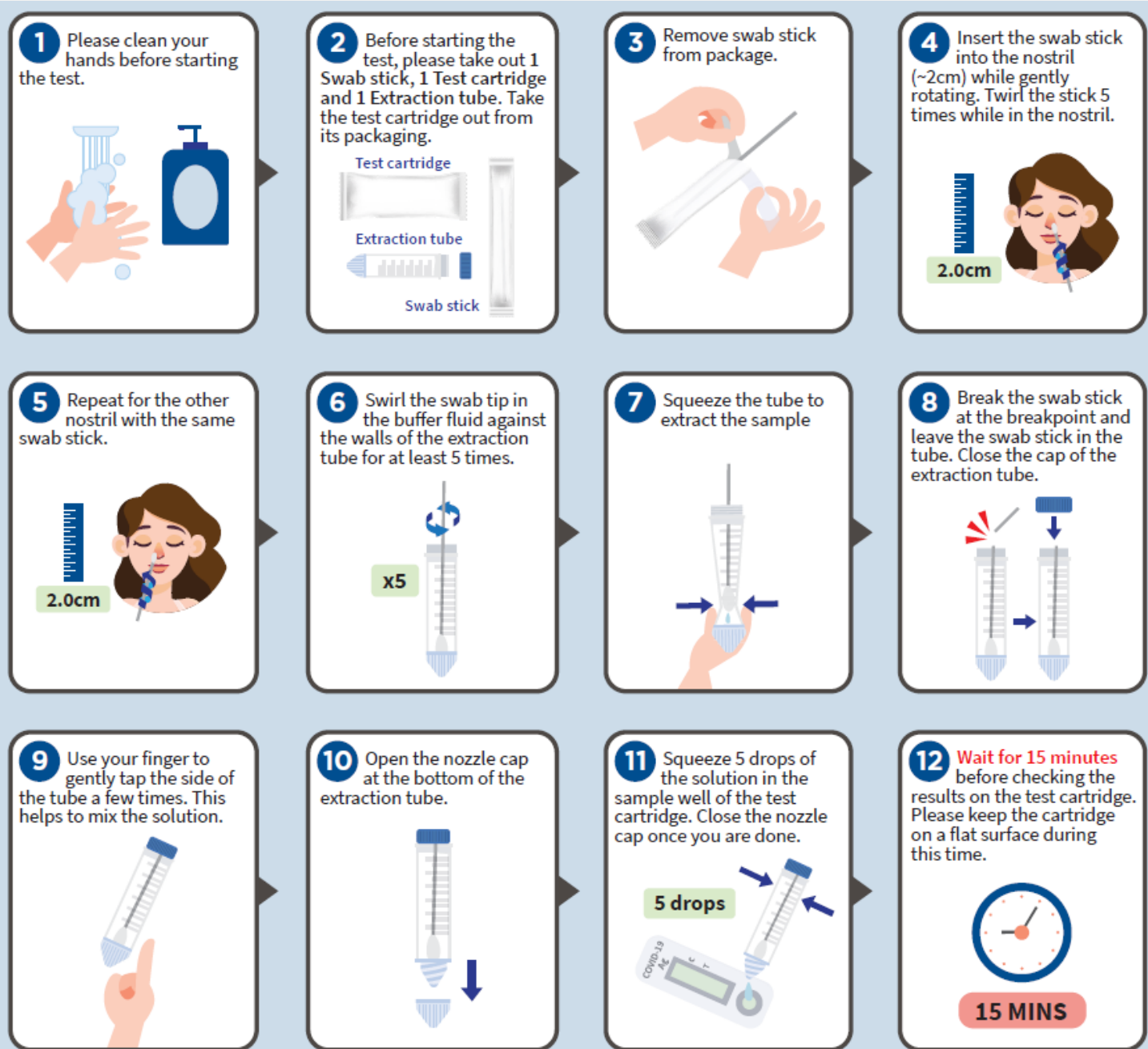


Sterile  
swab stick

The following 5 items should be prepared/pre-packed by the supervisor prior to self-swabbing:

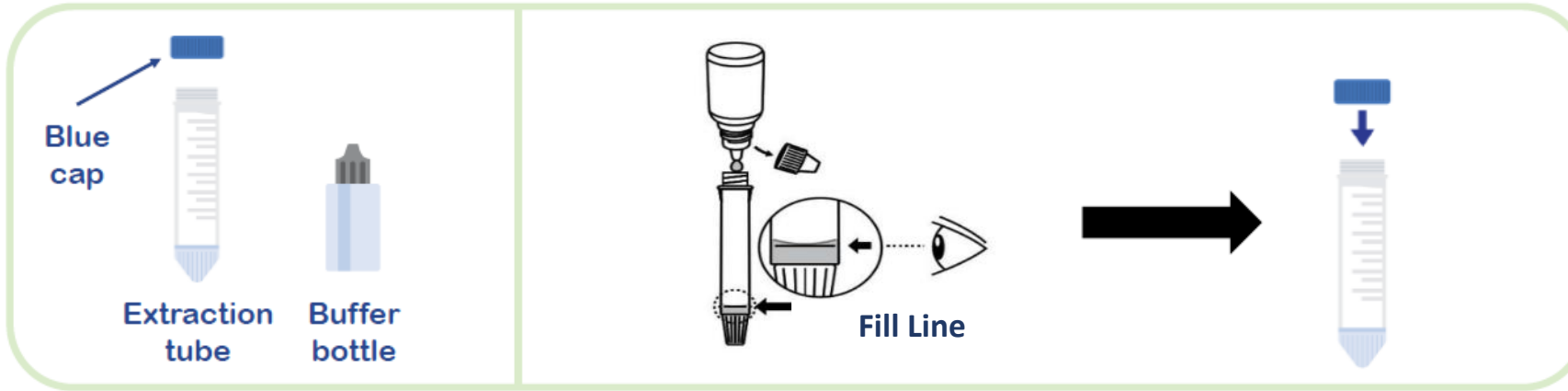
1. Test cartridge
2. Extraction tube
3. Blue cap
4. Buffer bottle
5. Sterile swab stick

**Note: The Buffer fluid in the Buffer Bottle can be reused till the expiry date of the same batch of kits**



### Key differences between SD Biosensor & Abbott Panbio (bold and underlined)

- Step 2: Preparation items
- Steps 4-5: Twirling 5x in each nostril
- Step 6: Swirling swab stick 5x in tube
- Step 8: Swab stick needs to be broken at the breakpoint
- Step 10: Open cap at the bottom of extraction tube
- Step: 12: 5 drops placed in test cartridge



1. Tilt the **buffer bottle**
2. Fill the extraction tube with buffer fluid until it reaches the **fill-line** of the extraction tube
3. Close the nozzle (**blue cap**)

**Test cartridge, swab stick, and extraction tube with buffer solution to be provided to the employee to conduct self-swabbing.**

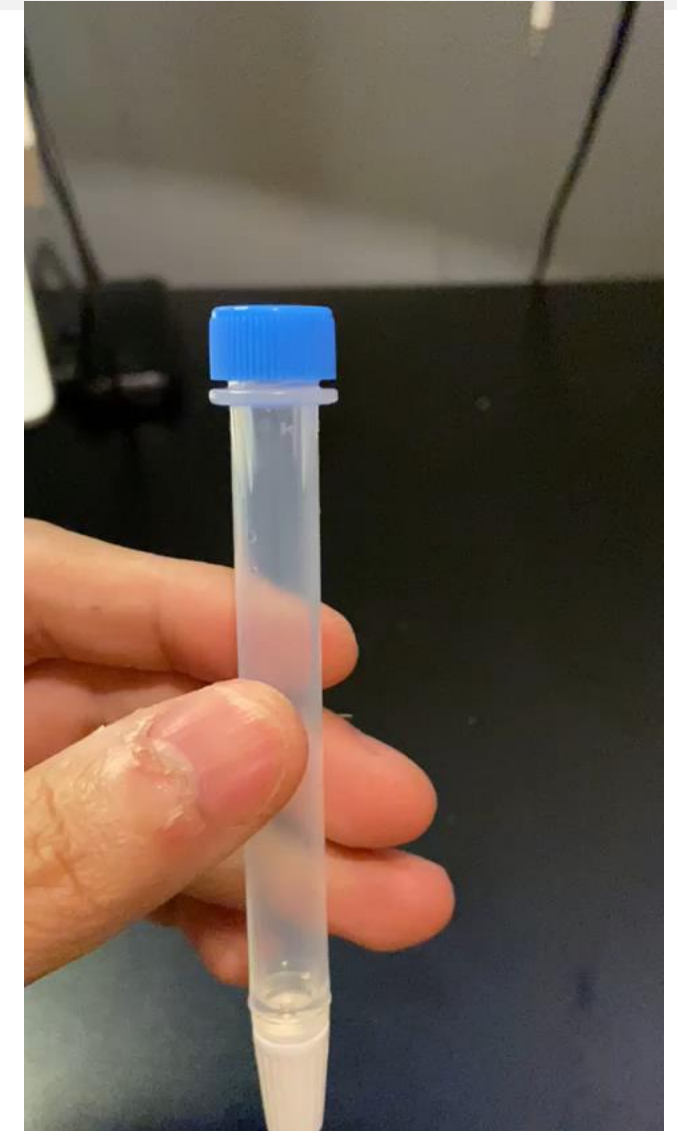
**Note: once the buffer has been dispensed into the extraction tube, it has to be used within 48 hours.**



Click the play button to watch video instructions

# Employee needs to break swab stick at the break point after swabbing

1. After swirling the swab stick 5x, employee conducting the self-swab should squeeze the extraction tube to extract swab specimen.
2. Next, look for the line around the middle of the swab stick and then break the stick at that point.
3. Tighten the blue cap after breaking the stick.



# Result Interpretation (Panbio)

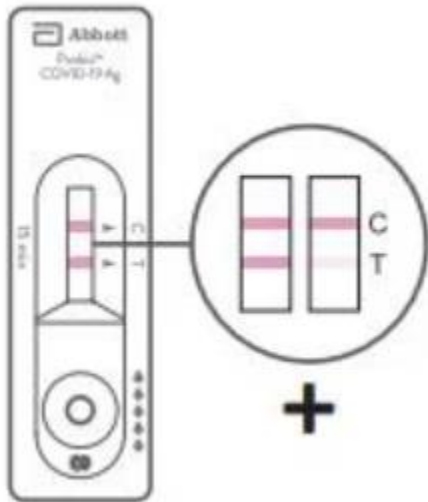
ABBOTT PANBIO KITS

C = Control Line

T = Test Line

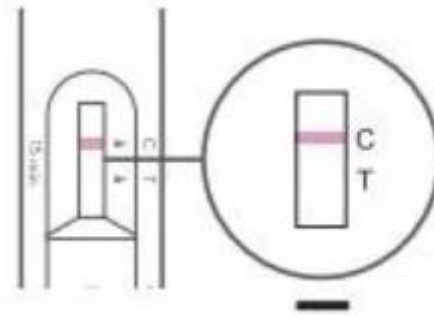
Positive

Both C + T Lines



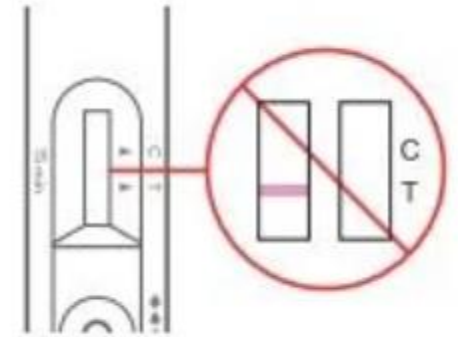
Negative

C Line Only



Invalid

No C Line



Look closely! The presence of any Test (T) line, no matter how faint is a positive result.

## Key Considerations in the Bulk Breaking and Preparation

1. The Supervisor must ensure all the personnel handling the dispensing of the buffer fluid into the extraction tubes are familiar with the process. This include personnel preparation the test kits for their own use.
2. If the preparation are centrally conducted (ie. Doing as a bulk to be given to the masses), the Supervisors must ensure that all the personnel conducting the preparation are in the proper PPE and practiced proper hand hygiene. This is to prevent any potential IPC issues when handing out the extraction tubes to the rest of the people.
3. The preparation area should not be subjected to heavy dust or impurities.

## Logistic Items needed for central preparation for mass uses

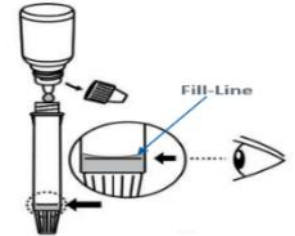
1. The minimum PPE required are Face shield, Surgical Mask, Disposable Gloves.
2. 70% alcohol wipes and hand rub.
3. Disposable containers to pack ART kit items (if applicable).



# What You Need to Prepare Before using Abbott Panbio ART kits (ESSS)

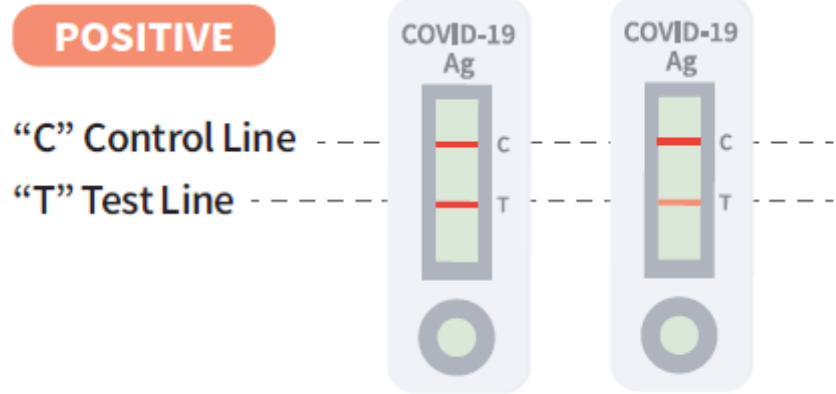
## Important To Note

1. Always ensure all the kits are within the expiry periods.
2. **The Buffer fluid in the Buffer Bottle can be reused till the expiry date of the same batch of kits if it is not pre-dispensed into extraction tubes**
3. Do not mix Buffer fluid from different batches into the same Extraction Tube.
4. The Extraction Tubes stored under refrigeration must be allowed to stabilise at normal room temperature before use. Abbott recommends to use the Extraction Tubes 30 minutes after it has been taken out from the refrigerator.
5. Ensure the amount of Buffer fluid in all the Extraction Tubes are exactly at the “Fill-Line”
6. The Extraction Tube filled with Buffer fluid must be used within 48 hours.
7. The unused Extraction Tube with the Buffer fluid must be stored upright to avoid leakage, and between the temperature of 2 to 30 degree Celsius.

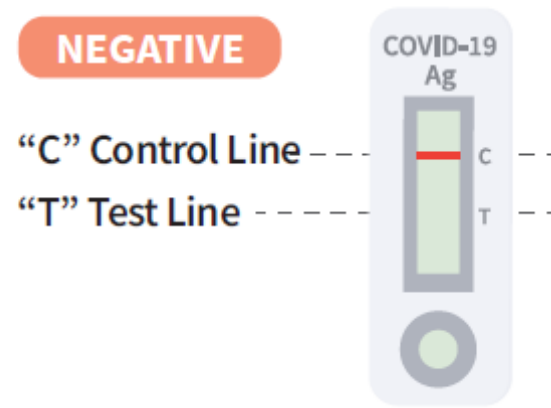


# Results Interpretation Using SD Biosensor & Abbott Panbio Test Kits

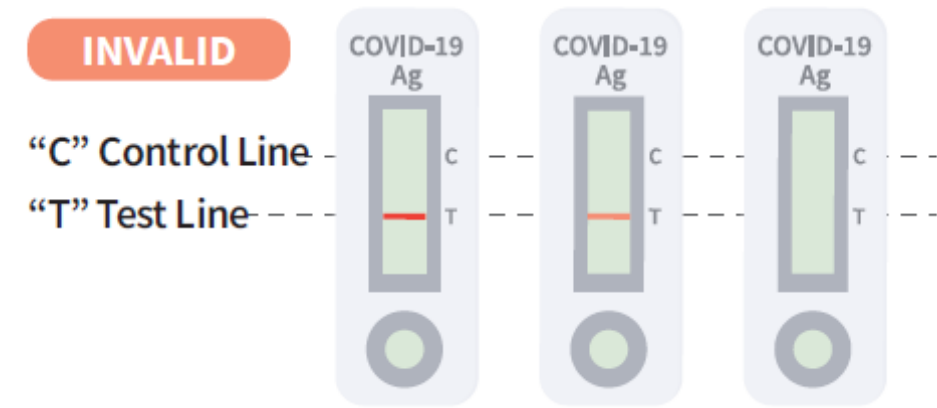
Read the results on the test cartridge.  
If you see a line appearing at both the “C” and the “T” position, this indicates a positive test. Please seek medical attention for further evaluation and confirmatory testing.



If you see a line appearing at only the “C” position, this indicates a negative test.



If you see a line appearing at only the “T” position, the test is invalid. Please repeat the test with a new test kit.



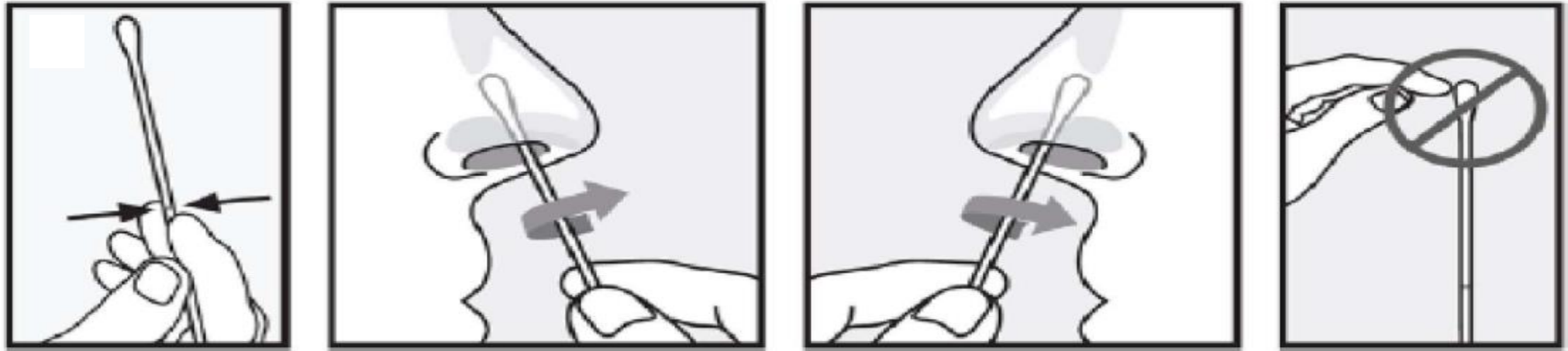
Please note that the lines on the test cassette will appear in 15 minutes after you have added the specimen buffer in the test well. **Do not read results after 30 minutes.**



# **10. Annex C**

## **Anterior Nares Swab**

# Anterior Nares (Nasal) specimen collection



- Insert the swab into one nostril. The swab tip should be inserted about **2 cm** from the entrance of the nostril.
- “Rotate” the swab stick between index finger and thumb for 5 times each side
- Repeat the same process for the other nostril using the same swab.
- Do not touch the swab tip with your hand to prevent any possible contamination.

## **Other useful info:**

For cases where employee feedbacks that he/ she has a blocked nasal passage due to past injury or operation or facial deformity e.g. cleft lip/ palate, advise employee to swab one nostril. Employee can swab 20x in the unblocked nostril to ensure enough sample for the ART test.

End of Guidebook