

US Laboratory Response to COVID-19 Testing Demands: 2021

A primary research study with US hospital and non-hospital laboratories to determine the methods and systems being adopted for SARS-CoV-2 testing and the top-of-mind issues facing testing locations

Detailed Description: With the significant demand for testing at the height of the pandemic, EAC wanted to understand how sites were responding, the methods and systems being adopted, and the issues sites were facing. We surveyed managers overseeing COVID-19 testing in hospitals, including community and academic medical centers, and non-hospital locations, including urgent care and physician office labs.

2021 Study Highlights:

- 100% of hospitals surveyed perform SARS CoV-2 testing; 99% use molecular methods and 77% of these have multiple molecular methods
- 66% of non-hospital locations surveyed perform SARS-CoV-2 testing; 60% use an antigen method and 47% use a molecular method

The research report includes the following results:

	HOSPITAL	NON-HOSPITAL
Sample Size	70 institutions:	128 institutions:
	70% community, 21% academic, 4% hospital-	82% physician office, 8% urgent care, 6%
	based clinic, 4% other	FQHC, 2% community clinic
Demographic	Institution type	 Institution type
Statistics	Network affiliation	 Network affiliation
	• Title	• Title
	Chem/IA annual volumes	 Practice Size (Number of Clinicians)
	Community location	CLIA License
	Departments overseen	
COVID-19	 Methods (molecular, antigen, antibody) 	 Handling of COVID-19 testing (in-house
Testing	in use and location of testing	vs. send out)
	 Considered performing molecular at 	 Tests sent out, why and where
	POC	 Plans to bring testing in-house
	Systems used (all methods) and reasons	 Other rapid PCR/Molecular tests
	for using multiple methods	performed on-site
	 Impact of COVID-19 testing on lab 	 Methods performed on-site (molecular,
	instruments	antigen, antibody)
	 Issues impacting testing ability 	 Systems used (all methods) and reasons
	 Average weekly volumes 	for using multiple methods
	Cost per test	 Impact of COVID-19 testing on lab
	Future expectation for COVID-19 testing	instruments
	 Desired assistance from industry 	 Issues impacting testing ability
		 Average weekly volumes
		Cost per test
		• Future expectation for COVID-19 testing
		 Desired assistance from industry



Partial List of Included Charts and Graphs:

- Rapid Methods Used (Molecular, Antigen-Reader, Antigen-Visual)
- Molecular Instruments Used in Hospitals
- Reasons for Adopting Multiple Molecular Methods
- How Labs Adapted to COVID Testing
- Antigen Tests Used
- Cost per test By Method
- Weekly Volumes By Site Type
- Issues Around COVID Testing
- Future Plans for COVID Testing

Partial List of Brand Names Mentioned:

- Abbott Alinity
- Abbott ARCHITECT
- Abbott BinaxNOW
- Abbott ID NOW
- Abbott m2000
- BD MAX
- BD Veritor
- Beckman Coulter Access

- BioCheck
- BioFire FilmArray
- bioMerieux VIDAS
- Cepheid GeneXpert
- Cepheid GeneXpert Xpress
- DiaSorin Liaison
- Genmark ePlex
- Hologic Panther

- Luminex ARIES
- Ortho VITROS
- Quidel QuickVue
- Quidel Sofia
- Roche cobas Liat
- Roche cobas 6800/8800
 - Siemens ADVIA Centaur
 - Siemens Atellica

Sample Chart Formats:



COVID-19 TESTING METHODS

AVERAGE COST COMPARISON





Survey Question Subset:

Hospitals:

- 1. Where is each type of COVID-19 test (molecular/PCR, antigen, antibody) performed? For example: In the lab, non-lab location, sent to a reference lab, not ordered
- 2. Have you ever considered placing a molecular instrument at a point of care location (e.g., Emergency Department, Critical Care, etc.) for the purpose of performing COVID-19 testing?
- 3. Which system(s) are used for PCR/molecular testing?
 - If multiple molecular systems in use:
 - a. What was the primary reason for adopting multiple molecular methods?
 - b. Which product is your primary method that handles the majority of the workload?
- 4. Which product(s) are you using for antibody testing? If multiple antibody systems in use:
 - a. What was the primary reason for adopting multiple antibody methods?
- 5. Which product(s) are used for antigen testing?
- 6. How did the laboratory or institution adapt to accommodate COVID-19 testing? For example: added kits to existing system, acquired new instrument, moved testing from lab to POC, other)
- 7. Which of the following issues are currently impacting your testing ability? For example: accuracy, staffing, product availability, cost, service/support, other or none)
- 8. What are costs per test?
- 9. What are expectations for COVID testing in the next 12 months? For example: adding new instruments or capacity, changing methods, other, none)
- 10. What, if anything, can the diagnostics industry do to assist labs?

Non-Hospitals:

- How is COVID-19 testing managed? For example: test on-site, send out, do not order. If no on-site testing:
 - a. What are the reasons that COVID-19 tests are not ordered/performed?
 - If sending out tests:
 - a. Why is testing sent out??
 - b. Are there plans to bring COVID-19 testing in-house?
- 2. Other than COVID-19, are any rapid PCR/Molecular based tests performed on-site?
- 3. Which type(s) of SARS Cov-2 tests are performed and what test kits or instruments are used?
- 4. How did you adapt to accommodate COVID-19 testing on-site? For example: started performing on-site testing, added COVID-19 testing to an existing instrument, installed new instrument, other)
- 5. Which issues currently impact testing ability?
- 6. What are costs per test?
- 7. What are expectations for COVID testing in the next 12 months?
- 8. What, if anything, can the diagnostics industry do to assist non-hospital locations?



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About EAC

EAC provides strategic consulting and market research services to provide diagnostic companies the data and insights needed to fully understand a market opportunity, navigate resource decisions, and successfully commercialize new solutions.

To learn more, find us at <u>www.eacorp.com</u> or contact:

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