





Ranked by priority

- PERSON CHOSEN FOR MASS TESTING**
- Person is NHS worker
 - Person is key worker
 - Person is identified through contact tracing
 - Person has symptoms
 - Person is randomly selected (e.g. 7% of population every 2 weeks)

If those going for testing do both tests, we will:

1. Identify those who have had the disease but are still carriers
2. Those who have had the disease and are now immune

It will also make contact tracing more complete and effective

This will be the majority of people – their risk of infection will be lowered through contact tracing and self-isolation of carriers. They can continue life outside of lockdown.

Increased as testing capacity grows

Nucleic acid test administered: Does the patient have COVID-19?

Antibody test administered: Has the patient had COVID-19 and is now immune?

New infection

Positive

No and NOT Immune

Contact Self-Isolate for 14 Days

Patient is free to continue with normal life

Objective will be to increase the number of COVID-19 positive people going into this box through healthcare capacity and therapeutics

Antibody tests likely to become more widely available. Their use won't be restricted by antigen availability and patients may receive these more often.

Immunity certificate is issued, patient free to work, travel and excluded from test

Contacts traced

Contact tracing of those who have and have had the disease, and subsequent testing/isolation will reduce R0 rate

Contacts traced

Dies

Recovers

If symptoms come back, patient should re-enter testing cycle