Antibody Testing

Did you receive an antibody test? *

☐ Yes, I was tested at least once for antibodies
☐ No, I was NOT tested at all for antibodies

How many times were you tested for antibodies? *
What was your antibody test result? *

- I tested positive for both (IgG and IgM) antibodies
- I only tested positive for IgM antibodies
- I only tested positive for IgG antibodies
- I don't know the antibodies type but I tested positive.
- I tested negative for antibodies

If you tested positive and your test included a titer value, what was the value for IgM?


If you tested positive and your test included a titer value, what was the value for IgG?


What type of test was it? *

- Blood Draw
- Blood Finger Prick

Enter the date of the antibody test (if you don't remember the exact date, enter an estimate). *
Was this an estimated date?

☐ This was an estimated date

Who was the manufacturer of the test? (Please only select the specific manufacturer if you are certain. Otherwise select "I don’t know.") *

☐ Abbott
☐ Roche
☐ Mt. Sinai
☐ EuroImmun
☐ Ortho-Clinical Diagnostics Vitros
☐ DiaSorin
☐ I don't know

Do you have another antibody test to report? *

☐ Yes
☐ No

What was your antibody test result? *

☐ I tested positive for both (IgG and IgM) antibodies
☐ I only tested positive for IgM antibodies
☐ I only tested positive for IgG antibodies
☐ I don't know the antibodies type but I tested positive.
☐ I tested negative for antibodies
If you tested positive and your test included a titer value, what was the value (in mg/dL) for IgM? *

If you tested positive and your test included a titer value, what was the value (in mg/dL) for IgG? *

What type of test was it? *

- Blood Draw
- Blood Finger Prick

Enter the date of the antibody test (if you don't remember the exact date, enter an estimate). *

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Was this an estimated date?  
☐ This was an estimated date
Who was the manufacturer of the test? (Please only select specific manufacturer if you are certain. Otherwise select "I don’t know.") *

- Abbott
- Roche
- Mt. Sinai
- EuroImmun
- Ortho-Clinical Diagnostics Vitros
- DiaSorin
- I don't know

Do you have another antibody test to report? *

- Yes
- No

What was your antibody test result? *

- I tested positive for both (IgG and IgM) antibodies
- I only tested positive for IgM antibodies
- I only tested positive for IgG antibodies
- I don't know the antibodies type but I tested positive.
- I tested negative for antibodies

If you tested positive and your test included a titer value, what was the value for IgM? *

[ ]
If you tested positive and your test included a titer value, what was the value for IgG? *

What type of test was it? *

- Blood Draw
- Blood Finger Prick

Enter the date of the antibody test (if you don't remember the exact date, enter an estimate). *

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Who was the manufacturer of the test? (Please only select specific manufacturer if you are certain. Otherwise select "I don’t know.") *

- Abbott
- Roche
- Ortho-Clinical Diagnostics Vitros
- DiaSorin
○ Mt. Sinai
○ Eurolmmun
○ I don't know