**Key Message**
- Effective June 1, 2021, variant of concern testing will recommence for all COVID-19 positive samples.

**Background**
- Since May 1, testing for COVID-19 variants of concern (i.e. B.1.1.7, B.1.351, P.1, and B.1.617) was being performed on specific subsets of COVID-19 positive samples.
- Now that COVID-19 test volumes have decreased, the limits placed on variant of concern testing will be lifted so that all COVID-19 positive samples will be tested for variants of concern.
- B.1.1.7 has become the predominant lineage in Alberta but the other variants of concern have not yet become as widespread and still require close monitoring. Testing for these emerging variants supports Public Health and Infection Prevention and Control (IPC) efforts in containing their spread.
- Testing for variants of concern is primarily for surveillance purposes and not for clinical management of patients. It often requires multiple nucleic acid tests to be run with complex interpretations and, therefore, does not have a rapid turnaround time.
- While testing all COVID-19 positive samples for variants of concern is not required for accurate surveillance, it is operationally simpler for the laboratory to do so as the number of positive cases declines.
- The surveillance of SARS-CoV-2 strains consists of complementary screening for variants of concern and sequencing to ensure a robust system to monitor for known variants of concern, variants of interest, and new potential variants of concern.

**Actions required**
- No actions are required – continue to fill out the correct patient and sample information when ordering COVID-19 testing on requisitions or in the clinical information system (CIS) as is current practice.
- Do not request variant of concern testing when providing information on requisitions or in the CIS.
- Samples will be identified by the laboratory as being COVID-19 positive and will be referred automatically to the APL – Public Health Laboratory for variant of concern testing.
- Samples positive for a variant of concern will continue to be reported directly to healthcare providers, Public Health, and IPC, and reports will continue to be available in Netcare and the CIS.

**Inquiries and feedback may be directed to**
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