

Table S1: Assays used in the study of **Persistent SARS-CoV-2 antibodies in ongoing exposure surveys of workers in New York's largest healthcare system**

Assay	Method	Antigen Target	Sensitivity/Specificity	Participants in follow-up study n=955
Abbott Architect SARS-CoV-2 IgG	CMIA	Nucleocapsid (N)	8-13 days: 91.18% (31/34) >14 days: 100% (73/73) 99.63% (1066/1070)	39%
Roche Elecsys Anti-SARS-CoV-2	ECLIA	Nucleocapsid (N)	7-13 days: 88.10% (52/59) >14 days: 100% (29/29) 99.3% (5262/5272)	44%
Ortho Clinical Diagnostics VITROS Anti-SARSCoV-2 IgG	Immunometric	Spike	87.5% (42/48) 100% (407/407)	3%
Ortho Clinical Diagnostics VITROS Immunodiagnostic Products Anti-SARS-CoV-2 Total Reagent Pack and Calibrator	Immunometric	Spike	83.3% (30/36) 100% (400/400)	2%
DiaSorin LIAISON SARS-CoV-2 S1/S2 IgG	CLIA	Spike	S1 and S2 6-14 days: 89.80% (44/49) >15 days: 97.56% (40/41) 99.3% (1082/1090)	12%

In the September 2020 follow-up study, all assays used were United States FDA/EUA approved and employed at Northwell Health CLIA-certified Core Laboratory, a centralized laboratory opened in 2019 to serve all 23 facilities, urgent care centers, drive-through testing facilities, and outpatient practices.

Days refers to the number of days after symptom onset

n=number of participants

%=percent

N=nucleocapsid protein (vs spike protein S)

S1= subunit of the spike protein (binding), S2= subunit of the spike protein (mediating), S1/S2= spike protein cleavage site

SARS-CoV-2 = severe acute respiratory syndrome coronavirus 2

IgG = immunoglobulin G

CMIA = chemiluminescent magnetic microparticle immunoassay

ECLIA = electrochemiluminescence immunoassay analyzer

CLIA = Clinical Laboratory Improvement Amendments

FDA = Food and Drug Administration

EUA = Emergency Use Authorization

Table S2: Characteristics of those eligible previously seropositive healthcare workers without serology results

		Respondents to the survey questionnaire only*		Non-respondents to the survey**	
CATEGORY		N=676		N=2359	
		n	%	n	%
Shift	Day	175	25.9	772	32.7
	Other	462	68.3	1497	63.5
	Missing	39	5.8	90	3.8
PCR	Negative	46	6.8	170	7.2
	Positive	281	41.6	1034	43.8
	Equivocal	7	1.0	17	0.7
	No PCR test	342	50.6	1138	48.2
Primary work location	ED	153	9.4	252	10.7
	Hospital units (non-ICU)	466	28.6	846	35.9
	ICU	88	5.4	164	7.0
	Other	909	55.7	1069	45.3
	Missing	15	0.9	28	1.2
Race/Ethnicity	Asian/Pacific Islander	237	14.5	297	12.6
	Black	221	13.5	723	30.7
	Hispanic	282	17.2	486	20.6
	Two or more races	17	1.0	33	1.4
	White	803	49.2	722	30.6
	American Indian	10	0.6	8	0.3
	Non-specified or Missing	61	3.7	90	3.8
Gender	Female	1262	77.4	1558	66.0
	Male	310	19.0	715	30.3
	Missing	59	3.6	86	3.7
Re-infected/ill^{aa}	No	1501	92.0		
	Yes	129	7.9		
	Missing	1	0.1		
Recent travel^b	No	1510	92.6		
	Yes	117	7.2		
	Missing	4	0.3		
Public transport^c	No	1440	88.3		
	Yes	184	11.3		
	Missing	7	0.4		
		Median (IQR)	Mean (SD)	Median (IQR)	Mean (SD)
Age	Years	38.0 (21)	40.5 (12.2)	38.0 (22)	40.5 (12.8)
Likely re-exposed^a	1 (low/no) to 9 (high)	3 (4)	3.6 (2.8)		

*Responded to the survey but did not go for a blood draw to receive serology testing within the 4-month study period

** Those who did not respond to the invitation to participate in the follow-up

PCR = reverse transcription polymerase chain reaction; ED = Emergency Department; ICU = Intensive Care Unit; SD = standard deviation; N = sample count; n = sub-sample count; % = column percent for that group; IQR = Interquartile range

^a “Do you believe you may have been exposed again to COVID-19?” (1-9; 1=no; 9=yes definitely; 7-9=high suspicion of re-exposure); ^{aa} “If so, did you feel ill?” (Yes/No); ^b “In the past month, have you traveled outside of the NY metropolitan region and northeast?” (Yes/No); ^c “Do you usually take public transportation to work?” (Yes/No)