



# Predicted Impact of Variants on Abbott RealTime SARS-CoV-2, Alinity m SARS-CoV-2, and Alinity m Resp-4-Plex Diagnostic Tests

Technical Brief  
August 6, 2025

***Note: This technical brief includes updates on the predicted impact of variants on Abbott RealTime SARS-CoV-2, Alinity m SARS-CoV-2, and Alinity m Resp-4-Plex diagnostic tests. Abbott continues surveillance of SARS-CoV-2 viral variants and evaluation of their predicted impact on the performance all our SARS-CoV-2/COVID-19 diagnostic tests. For predicted impact of impact of variants on other Abbott SARS-CoV-2/COVID-19 assays, please contact the appropriate Abbott Divisional Medical/Scientific/Clinical team.***

**Purpose:** This Technical Brief is an up-to-date overview on the predicted impact, if any, to the performance of Abbott RealTime SARS-CoV-2, Alinity m SARS-CoV-2, and Alinity m Resp-4-Plex diagnostic tests in the detection of SARS-CoV-2 viral variants, as determined through ongoing analysis by the Abbott Pandemic Defense Coalition. This document is provided as assurance to customers that Abbott is conducting continuous and thorough analysis of emerging SARS-CoV-2 variants.

**Background:** Emerging variants of SARS-CoV-2 have been identified across the globe with concerning pathogenic properties.<sup>1,2</sup> Assessing the risk emerging variants may pose to public health relies on continued identification and characterization.<sup>3</sup> Concerns have been raised as some variants have been reported to have increased viral transmission and disease severity.<sup>4</sup> As these variants are identified, it is imperative that efforts are taken to monitor any potential impact the genomic mutations have on viral detection by Abbott's diagnostic tests.

**Abbott's Monitoring:** Abbott is continuously monitoring the global SARS-CoV-2 situation through complex processes overseen by the Abbott Pandemic Defense Coalition.<sup>5,6,7</sup> As emerging variants are identified, sequence and *in silico* analyses are conducted to evaluate potential impact of these mutations to our tests. This proactive monitoring scheme enables Abbott to communicate the most up to date information specific to our tests. While the detailed evidence is proprietary, Abbott recognizes the need to provide customer assurance on our test performance. In addition to this document, the Abbott Pandemic Defense Coalition has published a study evaluating

Abbott's molecular, antigen, and serologic assays with several SARS-CoV-2 viral variants and will continue to publish as evaluations of emerging variants continue to arise.<sup>6</sup>

### **Predicted Impact of Variants on Abbott RealTime SARS-CoV-2, Alinity m SARS-CoV-2, and Alinity m Resp-4-Plex Diagnostic Tests:**

The following table (Table 1) lists the Abbott's SARS-CoV-2/COVID-19 diagnostic tests, the target(s) detected, and any predicted impact on assay performance based on data analyses to date (see **Table 2, Summary of Variants Analyzed to Date**).

**Table 1: Predicted Impact of Variants on Abbott's SARS-CoV-2/COVID-19 Diagnostic Tests:**

<b>Abbott's SARS-CoV-2/COVID-19 Test</b>	<b>SARS-CoV-2 Detected Target(s)</b>	<b>Test Performance</b>
Alinity m SARS-CoV-2	N* and RdRp** genes	No Predicted Impact
Alinity m Resp-4-Plex	N and RdRp genes	No Predicted Impact
RealTime SARS-CoV-2	N and RdRp genes	No Predicted Impact

\*N – Nucleocapsid; \*\*RdRp – RNA dependent RNA polymerase

**Table 2: Summary of Variants Analyzed to Date (sorted by lineage in alphabetical order):**<sup>2-4, 6, 8, 9, 10,15</sup>

Lineage	WHO Nomenclature	Lineage	WHO Nomenclature
A.23.1+E484K	Not designated	AY.74	Delta*
A.27	Not designated	AY.8	Delta*
AT.1	Not designated	AY.88	Delta*
AV.1	Not designated	AY.9	Delta*
AY.1	Delta*	AY.97	Delta*
AY.10	Delta*	B.1.1.318	Not designated
AY.107	Delta*	B.1.1.451	Not designated
AY.11	Delta*	B.1.1.519	Not designated
AY.12	Delta*	B.1.1.523	Not designated
AY.2	Delta*	B.1.1.529	Omicron <sup>^</sup>
AY.25	Delta*	B.1.1.7	Alpha <sup>#</sup>
AY.27	Delta*	B.1.1.7 with E484K	Not designated
AY.3	Delta*	B.1.214.2	Not designated
AY.3.1	Delta*	B.1.351	Beta
AY.30	Delta*	B.1.351.2	Beta
AY.31	Delta*	B.1.351.3	Beta
AY.4	Delta*	B.1.351.5	Beta
AY.4.2	Delta*	B.1.36.26	Not designated
AY.5	Delta*	B.1.427	Epsilon
AY.5.1	Delta*	B.1.429	Epsilon
AY.5.2	Delta*	B.1.429.1	Not designated
AY.6	Delta*	B.1.466.2	Not designated
AY.7	Delta*	B.1.525	Eta
AY.70	Delta*	B.1.526	Iota

Lineage	WHO Nomenclature
B.1.526.1	Not designated
B.1.526.2	Not designated
B.1.616	Not designated
B.1.617.1	Kappa
B.1.617.2	Delta*
B.1.617.3	Not designated
B.1.618	Not designated
B.1.619	Not designated
B.1.620	Not designated
B.1.621	Mu
B.1.621.1	Mu
B.1.628	Not designated
BA.1	Omicron^
BA.1.1	Omicron^
BA.1.15	Omicron^
BA.2	Omicron^
BA.2.10	Omicron^
BA.2.12	Omicron^
BA.2.12.1	Omicron^
BA.2.16	Omicron^
BA.2.2	Omicron^
BA.2.86	Omicron^
BA.2.86.1	Omicron^
BA.2.3	Omicron^
BA.2.3.20	Omicron^
BA.2.38	Omicron^
BA.2.38.1	Omicron^
BA.2.75	Omicron^
BA.2.75.2	Omicron^
BA.2.76	Omicron^
BA.2.86.1	Omicron^
BA.2.87.1	Omicron^
BA.2.9	Omicron^
BA.2.9.1	Omicron^
BA.3	Omicron^
BA.4	Omicron^
BA.4.1	Omicron^
BA.4.6	Omicron^
BA.4.7	Omicron^
BA.5	Omicron^
BA.5.1	Omicron^
BA.5.1.12	Omicron^
BA.5.1.25	Omicron^
BA.5.2	Omicron^
BA.5.2.1	Omicron^
BA.5.2.48	Not designated

Lineage	WHO Nomenclature
BA.5.3	Omicron^
BA.5.3.1	Omicron^
BA.5.3.5	Omicron^
BA.5.5	Omicron^
BA.5.6	Omicron^
BE.1	Omicron^
BE.1.1	Omicron^
BF.5	Omicron^
BF.7	Omicron^
BF.7.14	Not designated
BF.7.4	Omicron^
BN.1	Omicron^
BN.1.3	Not designated
BQ.1	Omicron^~
BQ.1.1	Omicron^~
BQ.1.1.13	Omicron^~
BQ.1.1.18	Omicron^~
BQ.1.1.20	Omicron^~
BQ.1.1.22	Omicron^~
BQ.1.8	Omicron^~
BR.2.1	Not designated
BW.1	Omicron^
C.1.2	Not designated
C.36.3	Not designated
C.36.3.1	Not designated
C.37	Lambda
CH.1.1	Omicron^
CH.1.1.1	Not designated
CH.1.1.3	Not designated
CK.2.1.1	Omicron^
DV.7.1	Omicron^
<b>EC.25.1</b>	<b>Omicron^</b>
EG.1	Omicron^~
EG.5	Omicron^
EG.5.1	Omicron^~
EG.5.1.1	Omicron^~
EG.5.1.3	Omicron^~
EG.5.1.6	Omicron^~
EG.5.1.8	Omicron^~
EG.5.2	Omicron^~
EU.1.1	Omicron^
FD.2	Omicron^~
FE.1	Omicron^~
FE.1.1	Omicron^
FE.1.2	Omicron^
FK.1	Omicron^

Lineage	WHO Nomenclature
FK.1.1	Omicron <sup>^</sup>
FL.1.5.1	Omicron <sup>^</sup>
FL.2	Omicron <sup>^</sup>
FL.4	Omicron <sup>^</sup>
FL.15.1.1	Omicron <sup>^</sup>
FU.1	Omicron <sup>^</sup>
FU.2	Omicron <sup>^</sup>
FY.4	Omicron <sup>^</sup>
GK.1	Omicron <sup>^</sup>
GK.1.1	Omicron <sup>^</sup>
GN.1.1	Omicron <sup>^~</sup>
GS.4.1	Omicron <sup>^</sup>
HK.1	Omicron <sup>^</sup>
HK.3	Omicron <sup>^</sup>
HK.3.2	Omicron <sup>^</sup>
HV.1	Omicron <sup>^</sup>
JD.1.1	Omicron <sup>^~</sup>
JE.1.1	Omicron <sup>^~</sup>
JG.3	Omicron <sup>^~</sup>
JN.1	Omicron <sup>^</sup>
JN.1.1	Omicron <sup>^</sup>
JN.1.4	Omicron <sup>^</sup>
JN.1.4.5	Omicron <sup>^</sup>
JN.1.5	Omicron <sup>^</sup>
JN.1.7	Omicron <sup>^</sup>
JN.1.7.2	Omicron <sup>^</sup>
JN.1.9	Omicron <sup>^</sup>
JN.1.11	Omicron <sup>^</sup>
<b>JN.1.11.1</b>	<b>Omicron<sup>^</sup></b>
JN.1.13	Omicron <sup>^</sup>
JN.1.13.1	Omicron <sup>^</sup>
JN.1.15	Omicron <sup>^</sup>
JN.1.16	Omicron <sup>^</sup>
JN.1.16.1	Omicron <sup>^</sup>
JN.1.18	Omicron <sup>^</sup>
JN.1.20	Omicron <sup>^</sup>
JN.1.21	Omicron <sup>^</sup>
JN.1.32	Omicron <sup>^</sup>
JN.1.42	Omicron <sup>^</sup>
JN.1.48	Omicron <sup>^</sup>
JN.1.48.3	Omicron <sup>^</sup>
JN.2.5	Omicron <sup>^</sup>
KP.1.1	Omicron <sup>^</sup>
KP.1.1.1	Omicron <sup>^</sup>
KP.2	Omicron <sup>^</sup>
KP.2.3	Omicron <sup>^</sup>

Lineage	WHO Nomenclature
KP.3	Omicron <sup>^</sup>
KP.3.1	Omicron <sup>^</sup>
KP.3.1.1	Omicron <sup>^</sup>
KP.3.2	Omicron <sup>^</sup>
KP.3.3	Omicron <sup>^</sup>
KP.3.3.3	Omicron <sup>^</sup>
KS.1.1	Omicron <sup>^</sup>
KW.1	Omicron <sup>^</sup>
KW.1.1	Omicron <sup>^</sup>
LB.1	Omicron <sup>^</sup>
<b>LF.7</b>	<b>Omicron<sup>^</sup></b>
<b>LF.7.2.1</b>	<b>Omicron<sup>^</sup></b>
<b>LF.7.7.2</b>	<b>Omicron<sup>^</sup></b>
LP.1	Omicron <sup>^</sup>
<b>LP.8.1</b>	<b>Omicron<sup>^</sup></b>
<b>LP.8.1.1</b>	<b>Omicron<sup>^</sup></b>
LS.1	Omicron <sup>^</sup>
MA.1	Omicron <sup>^</sup>
MB.1.1	Omicron <sup>^</sup>
MC.1	Omicron <sup>^</sup>
<b>MC.10</b>	<b>Omicron<sup>^</sup></b>
MJ.1	Omicron <sup>^</sup>
<b>MV.1</b>	<b>Omicron<sup>^</sup></b>
<b>NB.1.8.1</b>	<b>Omicron<sup>^</sup></b>
P.1	Gamma
P.1.1	Gamma
P.1.2	Gamma
P.2	Zeta
P.3	Theta
P.4	Not designated
<b>PC.2</b>	<b>Omicron<sup>^</sup></b>
Q.5	Alpha <sup>#</sup>
Q.6	Alpha <sup>#</sup>
Q.7	Alpha <sup>#</sup>
R.1	Not designated
XBB	Omicron <sup>^~</sup>
XBB.1	Omicron <sup>^~</sup>
XBB.1.5	Omicron <sup>^~</sup>
XBB.1.5.1	Omicron <sup>^~</sup>
XBB.1.5.13	Omicron <sup>^~</sup>
XBB.1.5.55	Omicron <sup>^~</sup>
XBB.1.9	Omicron <sup>^~</sup>
XBB.1.9.1	Omicron <sup>^~</sup>
XBB.1.9.2	Omicron <sup>^~</sup>
XBB.1.16	Omicron <sup>^~</sup>
XBB.1.16.1	Omicron <sup>^~</sup>

Lineage	WHO Nomenclature
XBB.1.16.6	Omicron <sup>^~</sup>
XBB.1.41.1	Omicron <sup>^~</sup>
XBB.2	Omicron <sup>^~</sup>
XBB.2.3	Omicron <sup>^~</sup>
XBB.2.3.11	Omicron <sup>^~</sup>
XBC.1	Omicron <sup>^~</sup>
XBC.1.3	Omicron <sup>^~</sup>
XBC.1.6	Omicron <sup>^~</sup>
XBF	Not designated

Lineage	WHO Nomenclature
XD <sup>@</sup>	Delta <sup>*</sup> /Omicron <sup>^&amp;</sup>
XDR	Omicron <sup>^</sup>
XDV.1	Omicron <sup>^</sup>
XE	Omicron <sup>^%</sup>
XEC	Omicron <sup>^</sup>
XEC.1	Omicron <sup>^</sup>
XF	Delta <sup>*</sup> /Omicron <sup>^&amp;</sup>
<b>XFC</b>	<b>Omicron<sup>^</sup></b>
<b>XFG</b>	<b>Omicron<sup>^</sup></b>

# Includes all Q lineages, which as noted by the WHO, is an alias for B.1.1.7 in Pango nomenclature.<sup>9,10</sup>

\* Includes all AY lineages, which as noted by the WHO, is an alias for B.1.617.2 in Pango nomenclature.

^ Includes all BA and BE lineages, which is an alias for B.1.1.529 in Pango nomenclature.<sup>11,13</sup>

& XD and XF are recombinant variants of Delta and Omicron BA.1.<sup>12</sup>

% XE is a recombinant variant of Omicron BA.1 and BA.2.<sup>12</sup>

@ *In silico* analysis of the XD variant identified the presence of a mutation in one of the Abbott test targets. This mutation is found in the N gene of the Delta variant and was shown to have no impact.<sup>8</sup>

~WHO's Technical Advisory group on SARS-CoV-2 Virus Evolution (TAG-VE) has decided that sublineages XBB and BQ.1 remain a part of the Omicron variant.<sup>14</sup>

**Newly added variants are in bold.**

## Technical Support:

If you have any questions on the provided information or are able to provide access to emerging variant samples, please contact Technical Support.

## Alinity m SARS-CoV-2, Alinity m Resp-4-Plex, Abbott RealTime SARS-CoV-2:

Global: <https://www.molecular.abbott/int/en/contact-technical-support>

US: <https://www.molecular.abbott/us/en/knowledge-center/support>

<sup>1</sup> CDC. COVID-19: CDC's Role in Tracking Variants. Updated July 1, 2024. Accessed Aug. 4, 2025.

<https://www.cdc.gov/covid/php/variants/index.html>

<sup>2</sup> UK Health Security Agency. Research and analysis. Variants: distribution of cases data, 20 May 2021. Updated June 24, 2022.

Accessed Aug. 4, 2025. <https://www.gov.uk/government/publications/covid-19-variants-genomically-confirmed-case-numbers/variants-distribution-of-cases-data>

<sup>3</sup> CDC. COVID-19: Surveillance and Data Analytics. Updated July 9, 2024. Accessed Aug. 4, 2025.

<https://www.cdc.gov/covid/php/surveillance/index.html>

<sup>4</sup> ECDC. SARS-CoV-2 variants of concern as of 27 June 2025. Updated June 30, 2025. Accessed Aug. 4, 2025.

<https://www.ecdc.europa.eu/en/covid-19/variants-concern>

<sup>5</sup> Abbott Newsroom. How We're Tracking COVID-19 Variants. Updated Feb. 23, 2021. Accessed Aug. 4, 2025.

<https://www.abbott.com/corpnnewsroom/products-and-innovation/how-we-track-covid-19-variants.html>

<sup>6</sup> Rodgers MA, Olivo A, Harris BJ, *et al.* Detection of SARS-CoV-2 variants by Abbott molecular, antigen, and serological tests. *J Clin Virol.* 2022;147:105080. <https://doi.org/10.1016/j.jcv.2022.105080>

<sup>7</sup> Averhoff F, Berg M, Rodgers M, *et al.* The Abbott Pandemic Defense Coalition: a unique multisector approach adds to global pandemic preparedness efforts [published online ahead of print, 2022 Feb 5]. *Int J Infect Dis.* 2022;117:356-360. doi:

<https://doi.org/10.1016/j.ijid.2022.02.001>

<sup>8</sup> Abbott data on file.

<sup>9</sup> WHO. Coronavirus disease (COVID-19) Epidemiological Update and Monthly Operational Update. Accessed Aug. 4, 2025.

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

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- <sup>10</sup> WHO. Tracking SARS-CoV-2 Variants. Updated June 25, 2025. Accessed Aug. 4, 2025. <https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/>
- <sup>11</sup> WHO. Statement on Omicron sublineage BA.2. Updated Feb. 22, 2022. Accessed Aug. 4, 2025. <https://www.who.int/news/item/22-02-2022-statement-on-omicron-sublineage-ba.2>
- <sup>12</sup> UK Security Agency. SARS-CoV-2 variants of concern and variants under investigation in England. Technical briefing 39. Mar. 25, 2022. Accessed Aug. 4, 2024. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1063424/Tech-Briefing-39-25March2022\\_FINAL.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1063424/Tech-Briefing-39-25March2022_FINAL.pdf)
- <sup>13</sup> Cov-Lineages. Lineage List. Accessed Aug. 4, 2025. [https://cov-lineages.org/lineage\\_list.html](https://cov-lineages.org/lineage_list.html)
- <sup>14</sup> CDC. TAG-VE statement on Omicron sublineages BQ.1 and XBB. Oct. 27, 2022. Accessed Aug. 4, 2024. <https://www.who.int/news/item/27-10-2022-tag-ve-statement-on-omicron-sublineages-bq.1-and-xbb>
- <sup>15</sup> WHO. Statement on the update of WHO's working definitions and tracking system for SARS-CoV-2 variants of concern and variants of interest. Updated Mar. 16, 2023. Accessed Aug. 4, 2025. <https://www.who.int/news/item/16-03-2023-statement-on-the-update-of-who-s-working-definitions-and-tracking-system-for-sars-cov-2-variants-of-concern-and-variants-of-interest>

#### FOR EXTERNAL USE

Products not available in all countries. Available to consumers in select markets.

<sup>^</sup> Emergency Use Authorization (EUA) Conditions for Realtime SARS-CoV-2 assay:

- Realtime SARS-CoV-2 assays have not been FDA cleared or approved, but have been authorized for emergency use by FDA under an EUA for use by authorized laboratories;
- Alinity m SARS-CoV-2 and Alinity m Resp-4-Plex assays have been cleared by the FDA for use by laboratories certified under CLIA, to perform moderate or high complexity tests;
- Alinity m SARS-CoV-2 assay and RealTime SARS-CoV-2 assay have been authorized only for the detection of nucleic acid from SARS-CoV-2, not for any other viruses or pathogens;
- Alinity m Resp-4-Plex has been authorized only for the detection and differentiation of nucleic acid from SARS-CoV-2, influenza A, influenza B, and/or Respiratory Syncytial Virus, not for any other viruses or pathogens;
- The emergency use of the products are only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of *in vitro* diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Federal Food, Drug and Cosmetic Act, 21 U.S.C. § 360bbb-3(b)(1), unless the declaration is terminated or authorization is revoked sooner.

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