

**Gruppo A)**

- La gestione delle schede di sicurezza dei prodotti e certificati di analisi utilizzati all'interno di un laboratorio biologico.
- La gestione delle apparecchiature all'interno di un laboratorio accreditato secondo la norma UNI CEI EN ISO/IEC 17025.
- La gestione e i controlli ambientali in un laboratorio biologico accreditato secondo la norma UNI CEI EN ISO/IEC 17025.

**Gruppo B)**

- I controlli necessari e loro significato, all'interno di una analisi di tipo PCR.
- Impostazione di un saggio di analisi quantitativa con apparecchiatura Real-time PCR.
- Wastewater Base Epidemiology: possibili applicazioni di tecniche di biologia molecolare.

**Gruppo C)**

- Che cos'è la carta dei servizi e delle attività di Arpa Piemonte.
- Il modello organizzativo di ARPA Piemonte prevede una articolazione gerarchica e in Strutture organizzative secondo criteri geografici e di prodotto. Il candidato illustri gli elementi principali su cui si basa tale organizzazione.
- Quali sono i compiti istituzionali di ARPA Piemonte secondo quanto prevede la L.R. 18/2016

#### **AII.4 - ACCERTAMENTO CONOSCENZA INFORMATICA**

##### **DOMANDA 1**

Che cos'è e a che cosa serve la PEC?

##### **DOMANDA 2**

In Excel qual è la sintassi corretta per le operazioni di somma, sottrazione, moltiplicazione e divisione?

##### **DOMANDA 3**

Che cos'è un back-up dei dati

AMERICAN  
SOCIETY FOR  
MICROBIOLOGYMicrobiology  
**Spectrum**

Environmental Microbiology | Research Article

# Analytical validation of a semi-automated methodology for quantitative measurement of SARS-CoV-2 RNA in wastewater collected in northern New England

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**ABSTRACT** Wastewater-based epidemiology (WBE) can be used to monitor the community presence of infectious disease pathogens of public health concern such as the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). Viral nucleic acid has been detected in the stool of SARS-CoV-2-infected individuals. Asymptomatic SARS-CoV-2 infections make community monitoring difficult without extensive and continuous population screening. In this study, we validated a procedure that includes manual pre-processing, automated SARS-CoV-2 RNA extraction and detection workflows using both reverse-transcriptase quantitative polymerase chain reaction (RT-qPCR) and reverse transcriptase droplet digital PCR (RT-ddPCR). Genomic RNA and calibration materials were used to create known concentrations of viral material to determine the linearity, accuracy, and precision of the wastewater extraction and SARS-CoV-2 RNA detection. Both RT-qPCR and RT-ddPCR perform similarly in all the validation experiments, with a limit of detection of 50 copies/mL. A wastewater sample from a care facility with a known outbreak was assessed for viral content in replicate, and we showed consistent results across both assays. Finally, in a 2-week survey of two New Hampshire cities, we assessed the suitability of our methods for daily surveillance. This paper describes the technical validation of a molecular assay that can be used for long-term monitoring of SARS-CoV-2 in wastewater as a potential tool for community surveillance to assist with public health efforts.

**IMPORTANCE** This paper describes the technical validation of a molecular assay that can be used for the long-term monitoring of SARS-CoV-2 in wastewater as a potential tool for community surveillance to assist with public health efforts.

**KEYWORDS** COVID-19, sewage, wastewater, RT-ddPCR, RT-qPCR, accuracy, precision

**W**astewater-based epidemiology (WBE) monitors real-time data about the content of certain biomarkers or chemicals of public health importance in wastewater. Wastewater monitoring has been established in many regions as a tool to detect pathogens and/or community-wide use of chemicals (1–3). A particularly important use of WBE can be found in the detection of poliovirus from asymptomatic community members, enabling targeting of vaccination efforts (4, 5).

The coronavirus disease 2019 (COVID-19) pandemic presents the possibility of using WBE as a lead indicator of community spread of the SARS-CoV-2 virus (6). Nucleic acids of SARS-CoV-2 have been detected in the stool of 40%–60% of patients with an active infection (7). As individuals infected with SARS-CoV-2 do not always present with symptoms, actual community prevalence is difficult to determine without extensive and continuous population screening. WBE has the potential to capture the collective

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