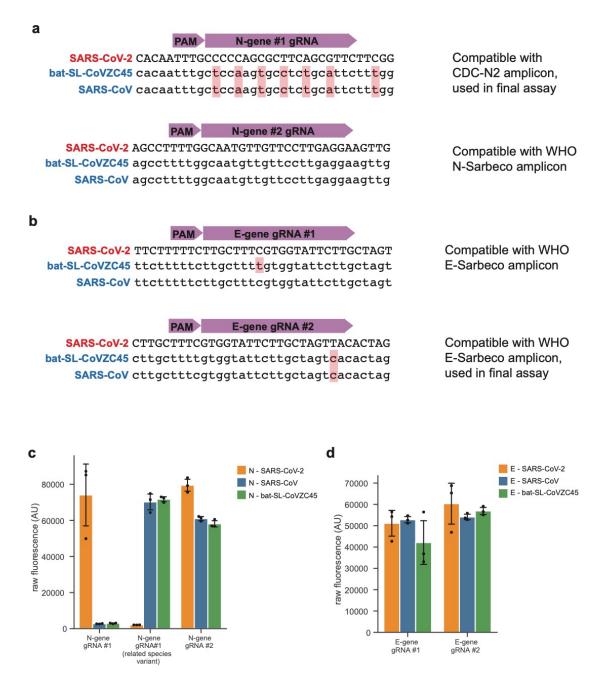
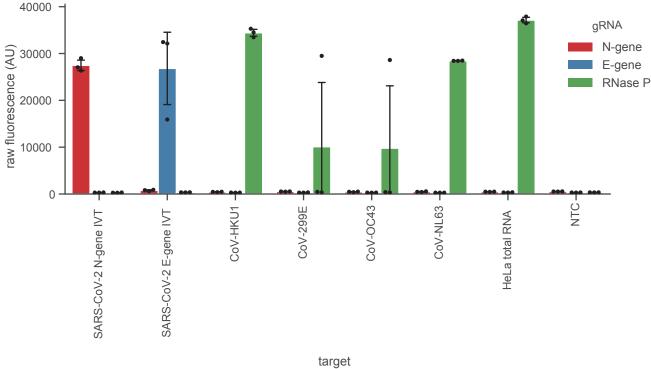
SUPPLEMENTARY FIGURES

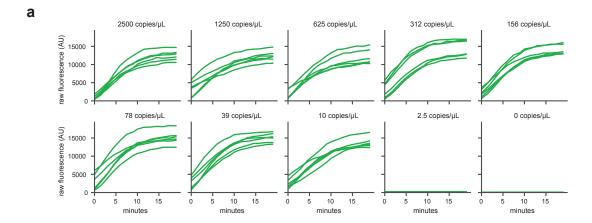


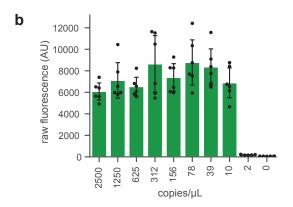
Supplementary Figure 1. Comparison of sequences between SARS-CoV-2, SARS-CoV, and bat-SL-CoVZC45 at the sites targeted by the gRNAs evaluated in this study. **(a)** The N gene gRNA #1 is compatible with the CDC-N2 amplicon, the N gene gRNA #2 is compatible with WHO N-Sarbeco amplicon and **(b)** the two E gene gRNAs tested are compatible with the WHO E-Sarbeco amplicon. **(c-d)** DETECTR fluorescence values using **(c)** N gene gRNAs and **(d)** E gene gRNAs. Error bars: mean ± SD.

SARS-CoV-2 DETECTR

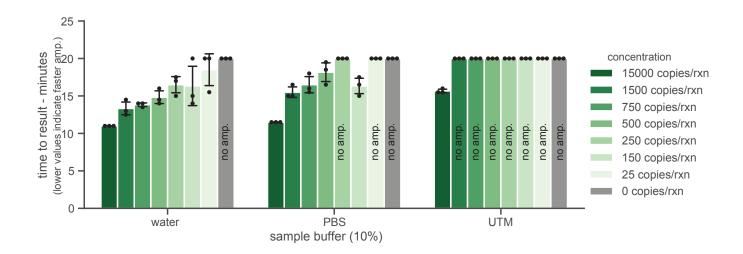


Supplementary Figure 2. Cross-reactivity of DETECTR to common human coronaviruses. SARS-CoV-2 DETECTR assay (RT-LAMP + Cas12a) was evaluated on IVT RNA products from SARS-CoV-2, SARS-CoV, bat-SL-CoVZC45, and clinical samples from common human coronaviruses. As expected, the N gene is only detected in SARS-CoV-2, whereas the E gene is detected only in SARS-CoV-2 and bat-SL-CoVZC45. SARS-CoV E gene was not detected as the RT-LAMP primer set is not capable of amplifying the SARS-CoV E gene, even though the E gene gRNA is capable of detecting the SARS-CoV E gene target site. RNase P is detected in common human coronaviruses because these samples are RNA extracted from clinical samples. Result shown at 15 min of LbCas12a detection assay signal on fluorescent plate reader. Error bars: mean ± SD.

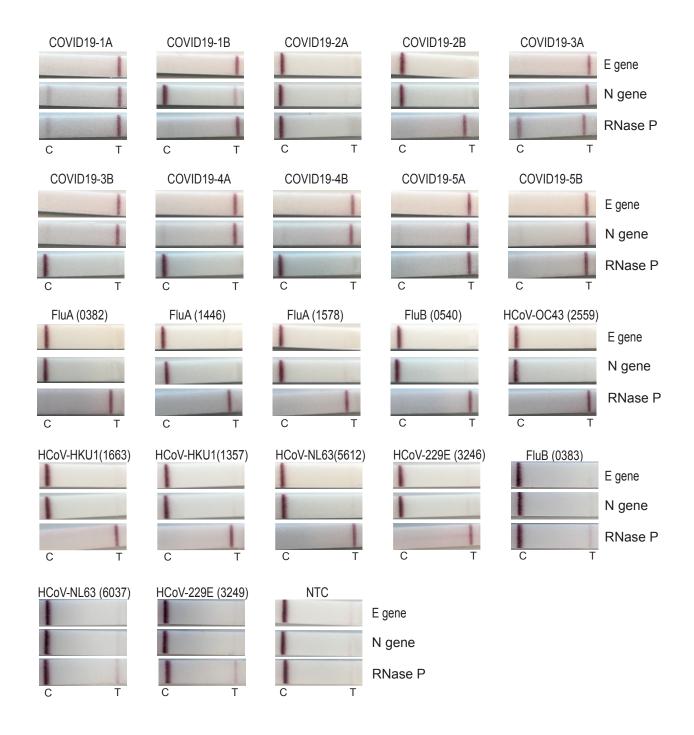




Supplementary Figure 3. DETECTR analysis of SARS-CoV-2 identifies down to 10 viral genomes in approximately 30 min (20 min amplification, 10 min DETECTR). Duplicate LAMP reactions were amplified for twenty min followed by LbCas12a DETECTR analysis. **(a)** Raw fluorescence curves generated by LbCas12a detection of SARS-CoV-2 N gene (n=6) show saturation in ~10 min. **(b)** Fluorescent signal at 5 minutes for LbCas12a reaction. Results indicate the limit of detection of the SARS-CoV-2 N gene to be 10 viral genomes per reaction (n=6). Error bars: mean ± SD.



Supplementary Figure 4. Impact of sample buffers on performance of RT-LAMP preamplification. Time to result for RT-LAMP amplification (lower value indicates faster amplification) is calculated as the time at which the fluorescent value is one third of the max for the experiment. Reactions that failed to amplify are reported with a value of 20 minutes and labeled as "no amp." RT-LAMP was performed with 10% universal transport medium (UTM), 10% PBS, or 10% water final volume for the SARS-CoV-2 N gene on a standard curve of the 2019-nCoV positive control plasmid (IDT) in 10% reaction volume. Results indicate that 10% PBS inhibits RT-LAMP less than 10% UTM. Error bars: mean ± SD.



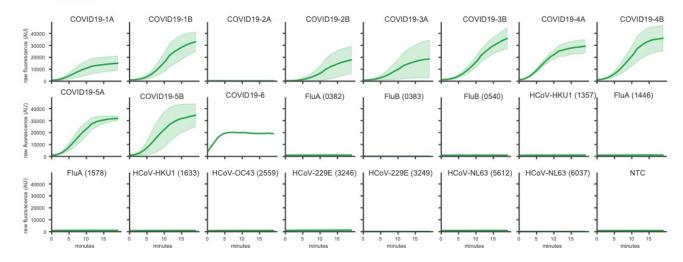
Supplementary Figure 5. Lateral flow DETECTR results on 10 COVID-19 infected patient samples and 12 patient samples for other viral respiratory infections. Ten samples from 6 patients (COVID19-1 to COVID19-5) with one nasopharyngeal swab (A) and one oropharyngeal swab (B) were tested for SARS-CoV-2 using two different genes, N2 and E as well as a sample input control, RNase P. Results were analyzed in accordance with the guidance provided in **Supplementary Fig. 6**.

Interpretation of SARS-CoV-2 DETECTR lateral flow results

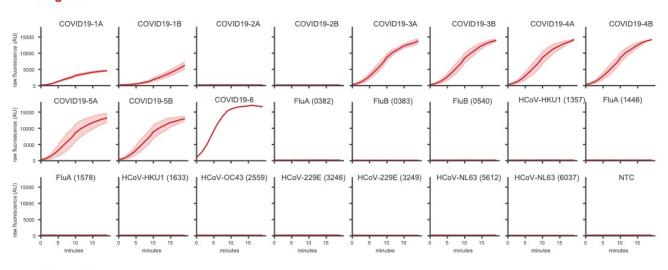
Schematic	Example	Description
C T negative	СТ	Negative strips have no signal at the test line. Negative strips that have been allowed to sit at room temperature for over 10 minutes may display a faint signal at the test line or at the tape seam, but this signal is much fainter than a true positive signal.
C T positive positive positive	СТ	For strips indicating a positive result, there will be an easy to see band at the test line. The control band may or may not be present. The control band is not present when there is complete digestion of the reporter molecule by Cas12. In some cases the test band will be weaker than the control band.

Supplementary Figure 6. Instructions for the interpretation of SARS-CoV-2 DETECTR lateral flow results.

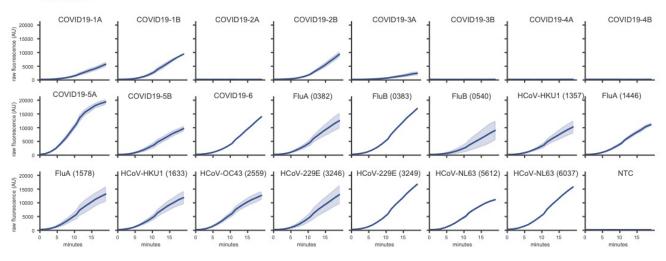
a E gene



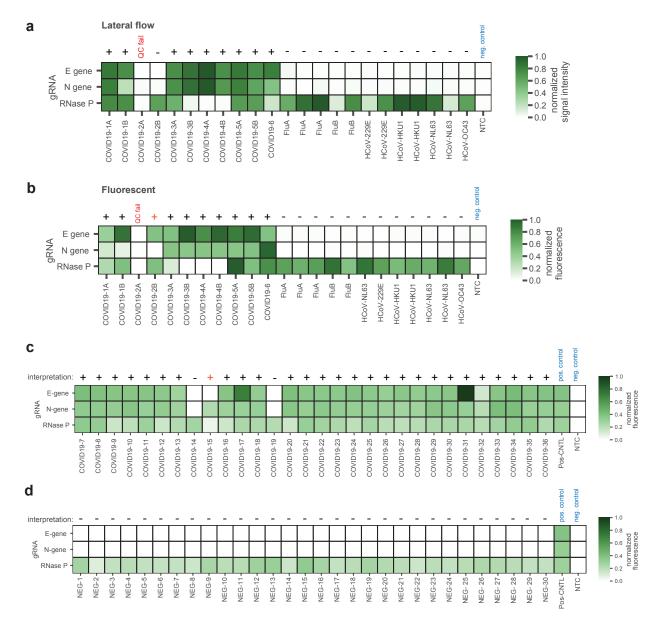
b N gene



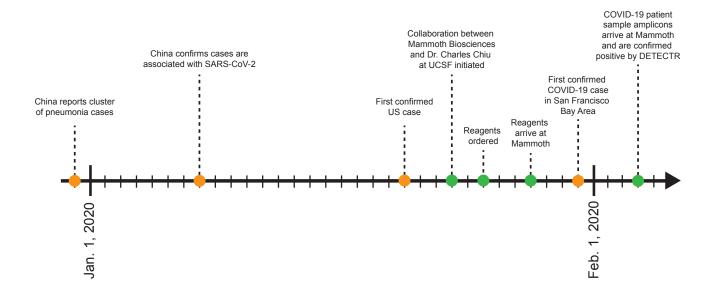
C RNase P



Supplementary Figure 7. Fluorescent DETECTR kinetic curves on 11 COVID-19 infected patient samples and 12 patient samples for other viral respiratory infections. Ten nasopharyngeal/oropharyngeal swab samples from 6 patients (COVID19-1 to COVID19-6) were tested for SARS-CoV-2 using two different genes, N2 and E as well as a sample input control, RNase P. (a) Using the standard amplification and detection conditions, 10 of the 12 COVID-19 positive patient samples resulted in robust fluorescence curves indicating presence of the SARS-CoV-2 E gene (20-minute amplification, signal within 10 min). No E gene signal was detected in the 12 other viral respiratory clinical samples. (b) The SARS-CoV-2 N gene required extended amplification time to produce strong fluorescence curves (30-minute amplification, signal within 10 min) for 10 of the 12 COVID-19 positive patient samples. No N gene signal was detected in the 12 other viral respiratory clinical samples. (c) As a sample input control, RNase P was positive for 20 of the 24 total samples tested (20-minute amplification, signal within 10 min).



Supplementary Figure 8. Heatmaps of SARS-CoV-2 DETECTR assay results for clinical samples with the test interpretation indicated. (a) Results of lateral flow SARS-CoV-2 DETECTR assay quantified by ImageJ Gel Analyzer tools for SARS-CoV-2 DETECTR on 23 clinical samples (11 COVID-19 positive) show 95.8% (23/24 assays) agreement with the results of the fluorescent version of the assay shown in (b). Both assays were run with 30-minute amplification, Cas12 reaction signal taken at 10 min. Presumptive positive indicated by (+) in orange. (c) Result of fluorescent SARS-CoV-2 DETECTR assay on an additional 30 COVID-19 positive clinical samples (27 positive, 1 presumptive positive, 2 negative). Presumptive positive indicated by (+) in orange. (d) Result of fluorescent SARS-CoV-2 DETECTR assay on an additional 30 COVID-19 negative clinical samples (0 positive, 30 negative).



Supplementary Figure 9. Timeline showing major events in the progression of COVID-19 detection (marked in orange) and assay development (marked in green).