**Supporting Information**

**Supplemental Table S1**

**Rapid, inexpensive, fingerstick, whole blood, sensitive, specific, point-of-care test for anti-*Toxoplasma* antibodies**

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Table S1. Serologic Results

 A. United States

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Year of POC Test** | **Result of POC Test a** | **Participant****Number** | **Year of Conventional Test b** | **Reciprocal IgG c** | **IgM d** | **IgA e** | **IgE** | **AC/HS** | **Avidity f** | **Other** |
| 2017 | Positive | 1 | 2015 | 96 | 0.03 |  |  |  |  |  |
| 2017 | Positive | 2 | 1977 | 4096 | IgM IFA: 320 | ND | ND | ND | ND | n/a |
| 2017 | Positive | 3 | 2017 | 4.10 \* | 0.08 |  |  |  |  |  |
| 2017 | Positive | 4 | 2015 | 32 | ELISA: Negative |  |  |  |  |  |
| 2017 | Positive | 5 | 1992 | 512 | ISAGA: 3 | 1.2 |  |  |  |  |
| 2017 | Positive | 6 | 1992 | 4096 | ELISA: 5.2 | 6.9 |  | 1600/3200 |  |  |
| 2017 | Positive | 7 | 1991 | 128 | ELISA: 0 |  |  |  |  |  |
| 2017 | Positive | 8 | 2000 | 32000 | ISAGA: Positive | 28 |  |  |  |  |
| 2017 | Positive | 9 | 2000 | 16000 | ELISA: 9.1 | 9.5 | Positive | 1600/3200 |  |  |
| 2017 | Positive | 10 | Newborn Screen, Umass | 0.651 \* | 0.338 |  |  |  |  |  |
| 2017 | Positive | 11 | 2009 | 97.9 IU/mL \* | <0.9 |  |  |  |  |  |
| 2017 | Positive | 12 | 1976 | 256 | < 1.6 IU/mL | ND | ND | ND | ND | n/a |
| 2017 | Positive | 13 | 2000 | 512 | ISAGA: 0 |  | Negative |  |  |  |
| 2017 | Positive | 14 | 2000 | 8000 | ELISA: 4.4 | 1.2 | Positive | 1600/1600 |  |  |
| 2017 | Positive | 15 | 1987 | 4096 | ELISA: 9.2 |  |  |  |  | Agglutination: 16000 |
| 2017 | Positive | 16 | 1987 | 2048 | ELISA: 3.5 |  |  |  |  | Agglutination: 20480 |
| 2017 | Positive | 17 | 2012 | 2048 | ELISA: 4.7 | 26 | Equivocal | 800/400 | Low |  |
| 2017 | Positive | 18 | 2017 | 10.70 \* | 0.70 |  |  |  |  |  |
| 2017 | Positive | 19 | 2017 | 52.70 \* | 0.53 |  |  |  |  |  |
| 2017 | Positive | 20 | 2014 | 4096 | ELISA: 7.1 |  |  | >1600/800 |  |  |
| 2017 | Positive | 21 | 1999 | 64000 | ISAGA: 12 | 28 |  |  |  |  |
| 2017 | Positive | 22 | 2000 | 8000 | ELISA: 2.3 | 9.1 | Equivocal | 1600/3200 |  |  |
| 2017 | Positive | 23 | 2007 | 8000 | ELISA: 5.5 | 7.2 |  | 1600/3200 |  |  |
| 2017 | Positive | 24 | 2007 | 8000 | ELISA: 3.4 | 0.4 | Positive | 50/3200 |  |  |
| 2017 | Positive | 25 | 2007 | 4096 | ELISA: 0.2 | 1 | Negative | 200/3200 |  |  |
| 2017 | Positive | 26 | 2008 | 512 | 0.1 |  |  | 100/<100, E | ND |  |
| 2017 | Positive | 27 | 2009 | 8000 | ELISA: 3 | 3.5 | Negative | 1600/3200 | Equivocal |  |
| 2017 | Positive | 28 | 2010 | 8000 | ISAGA: Positive | 11 |  |  |  |  |
| 2017 | Positive | 29 | 2010 | 8000 |  |  |  |  |  |  |
| 2017 | Positive | 30 | 2013 | 8000 | ISAGA: Positive | 2.1 |  |  |  |  |
| 2017 | Positive | 31 | 2013 | 8000 | ELISA: 5 |  |  |  |  |  |
| 2017 | Positive | 32 | 2016 | 8000 | ISAGA: Positive | 1.3 |  |  |  |  |
| 2017 | Positive | 33 | 2016 | 2048 | ELISA: 2.6 | Neg | Neg | >1600/>3200 | Equivocal |  |
| 2017 | Positive | 34 | 2012 | 10.5 IU/mL \* |  |  |  |  |  |  |
| 2017 | Positive | 35 | 1998 | 128 | ELISA: 0 | 0.5 | Negative | 50/400 |  |  |
| 2017 | Positive | 36 | 1998 | 256 | ELISA: 0 | 1 | Negative | 50/400 |  |  |
| 2017 | Positive | 37 | 2013 | 15.0 IU/mL \* |  |  |  |  |  |  |
| 2017 | Positive | 38 | 2008 | 32000 | ELISA: 6.5 | 11.2 | Positive | 1600/3200 |  |  |
| 2017 | Positive | 39 | 2017 | 2048 | ELISA: 11 | 6 | Positive | 400/400 |  |  |
| 2017 | Positive | 40 | 2017 | 2048 |  |  |  |  |  |  |
| 2017 | Positive | 41 | 1996 | 4096 |  |  |  |  |  |  |
| 2017 | Positive | 42 | 2014 | 8000 | ISAGA: Positive | 10.8 |  |  |  |  |
| 2017 | Positive | 43 | 1998 | 2048 | ELISA: 1.6 | 0.2 | 1.6 | 50/3200 |  | IgI: 0 |
| 2017 | Positive | 44 | 2017 | 27.10 \* | 3.69 |  |  |  |  |  |
| 2017 | Positive | 45 | 1986 | 2048 | ELISA: 0 |  |  |  |  |  |
| 2017 | Positive | 46 | 1986 | 8000 | ELiSA: 4.5 |  |  |  |  | Agglutination: 80000 |
| 2017 | Positive | 47 | 2009 | >2500 IU/mL\* | 0.15 |  |  |  |  |  |
| 2017 | Positive | 48 | 2017 | 4.10 \* | 0.08 |  |  |  |  |  |
| 2017 | Positive | 49 | 2017 | 4.50 \* | 0.05 |  |  |  |  |  |
| 2017 | Positive | 50 | 2017 | 26.20 \* | 0.40 |  |  |  |  |  |
| 2017 | Positive | 51 | 2017 | 23.50 \* | 0.09 |  |  |  |  |  |
| 2017 | Positive | 52 | 2011 | 8000 | ELISA: 4 | 6.3 | Positive | 1600/3200 |  |  |
| 2017 | Positive | 53 | 2011 | 32000 | ISAGA: Positive | > 11.0 |  |  |  |  |
| 2017 | Positive | 54 | 2017 | 4.70 \* | 0.06 |  |  |  |  |  |
| 2017 | Positive | 55 | 2001 | 80 IU/mL \* | 12 |  |  | HS 16 |  | In Paris |
| 2017 | Positive | 56 | 2001 | 80 IU/mL \* | ISAGA: 12 | 8 |  |  |  | In Paris |
| 2018 | Positive | 57 | 2017 | 2048 | ISAGA: Positive | 0 |  |  |  |  |
| 2018 | Positive | 58 | 2017 | 2048 | ELISA: 2 | 0.3 | Positive | 800/1600 |  |  |
| 2018 | Positive | 59 | 2018 | 2048 | ISAGA: Negative | 0.2 |  |  |  |  |
| 2018 | Positive | 60 | 2018 | 0.175 \* | ELISA: 2.3 | 0.7 | Negative | 200/400 |  |  |
| 2018 | Positive | 61 | 2018 | 19.00 \* | 0.15 |  |  |  |  |  |
| 2018 | Positive | 62 | 2017 | 512 | ISAGA: Negative | 0 |  |  |  |  |
| 2018 | Positive | 63 | 2017 | 8000 | ELISA: 0.8 |  |  | >1600/>3200 | Equivocal |  |
| 2018 | Positive | 64 | 2012 | 8000 | 0 |  |  |  |  |  |
| 2018 | Positive | 65 | 2012 | 2048 | 1.6 |  |  |  | High |  |
| 2018 | Positive | 66 | 1991 | 16 | ELISA: 0 | 0.01 | Negative | <50/800 |  |  |
| 2018 | Positive | 67 | 1997 | 12000 |  |  |  |  |  |  |
| 2017-2018 | Negative | 68-168 | 2017-2018 | < 1.6 IU/mL | < 0.5 IU/mL | ND | ND | ND | ND | N/A |

B. Morocco

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Year of POC Test** | **Result of POC Test a** | **Participant****Number** | **Date of Conventional Test b** | **Reciprocal IgG c** | **IgM d** | **IgA e** | **IgE** | **ACHS** | **Avidity f** | **Other** |
| 2017 | Positive | 1 | 11/7/2017 | 148 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 2 | 11/7/2017 | 240 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 3 | 11/8/2017 | 52 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 4 | 11/8/2017 | 110 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 5 | 11/8/2017 | 130 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 6 | 11/9/2017 | 100 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 7 | 11/16/2017 | 30 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 8 | 11/17/2017 | 240 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 9 | 11/23/2017 | 54 \* | Positif | ND | ND | ND | ND | N/A |
| 2017 | Positive | 10 | 11/23/2017 | 120 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 11 | 11/28/2017 | 142 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 12 | 12/4/2017 | 100 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 13 | 12/4/2017 | 80 \* | NEG | ND | ND | ND | ND | N/A |
| 2017 | Positive | 14 | 12/14/2017 | 100 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 15 | 2/5/2018 | 240 \* | Positif | ND | ND | ND | ND | N/A |
| 2018 | Positive | 16 | 2/27/2018 | 60 \* | NG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 17 | 2/27/2018 | 8 \* | Positif | ND | ND | ND | ND | N/A |
| 2018 | Positive | 18 | 2/27/2018 | 44 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 19 | 2/27/2018 | 22 \* | NG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 20 | 2/27/2018 | 54 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 21 | 2/27/2018 | 48 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 22 | 2/27/2018 | 28 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 23 | 2/27/2018 | 50 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 24 | 2/27/2018 | 108 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 25 | 2/27/2018 | 220 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 26 | 2/27/2018 | 32 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 27 | 2/27/2018 | 88 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 28 | 2/28/2018 | 60 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 29 | 2/28/2018 | 10 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 30 | 2/28/2018 | 36 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 31 | 2/28/2018 | 66 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 32 | 2/28/2018 | 210 \* | NEG | ND | ND | ND | ND | N/A |
| 2018 | Positive | 33 | 3/2/2018 | 50 \* | NEG | ND | ND | ND | ND | N/A |
| 2017-2018 | Negative | 34-39 | 10/26/2017-2/27/2018 | < 0.6 IU/mL | < 0.80 IU/mL | ND | ND | ND | ND | N/A |

**a**This new variant has a black indicator, enhancing contrast when tested using whole blood, a previous issue with the pink indicator of the serum-variant test. **b** “Year of conventional test” refers to year conventional testing was performed in a reference laboratory in the U.S., France, or Morocco. When an individual has *T. gondii* infection, antibody to the parasite persists. Thus, if a person had anti-*Toxoplasma* antibodies in the past, they retain antibody across time. Therefore, previous testing from the NCCCTS cohort (almost always performed by the Palo Alto reference laboratory) that is positive indicates that the individual Is infected/seropositive. Concurrent, standard laboratory testing was with ARCHITECT system in Lyon, France for U.S. samples and PlateliaTM system in Rabat, Morocco. **c** An IgG dye test is considered negative for values <1:16 and positive for values ≥1:16 [1]. **d** An IgM ELISA performed with serum is considered negative for values 0.0-1.6, equivocal for values 1.7-1.9, and positive for values ≥2.0 in serum [2]. An IgM ISAGA is positive for values ≥3 [3]. **e** An IgA ELISA for patients >6 months of age is considered negative for values 0.0-1.4, equivocal for values 1.5-2.0, and positive for values ≥2.1, and an IgA ELISA for patients <6 months of age is considered negative for values 0.0-0.9 and positive for values ≥1.0 [4]. **f**High avidity signifies that infection occurred more than 4 months ago [5].**\*** Serology not performed at Palo Alto Medical Foundation *Toxoplasma* Serology Laboratory. These were performed at the reference laboratory in Lyon, France using the ARCHITECT system (for United States samples) or in the Moroccan reference laboratory in Rabat using the PlateliaTM system. References for test performance are available in the literature [6,7].

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