Epidemic progresses, commercial tests will become available.  
Other laboratory investigations are usually non-specific. The white cell count is usually normal or low. There may be lympjopenia; a lymphocytes count <1000 has been associated with severe disease. The platelet count is usually normal or mildly low. The CRP and ESR are generally elevated but procalcitonin levels are usually normal. A high procalcitonin level may indicate a bacterial co-infection. The ALT/AST, prothrombin timje, creatinine, D-dimer, CPK and LDH my be elevated and high levels are associated with severe disease.  
The chest X-ray (CXR) usually shows bilateral infiltrates but may be normal in early disease. The CT is more sensitive and specific. CT imaging generally shows infiltrates, ground glass opacities and sub segmental