GENETIC ASSAYS
A Molecular Diagnostics Laboratory

RVBP Respiratory Virus & Bacteria Panel

GA Test Code **2001**

Method ***FDA-cleared*** FilmArray® Respiratory Panel by multiplex RT-PCR

Virus	Sensitivity	Specificity
Adenovirus	88.9%	98.3%
Coronavirus HKU1	95.8%	99.8%
Coronavirus NL63	95.8%	100%
Coronavirus 229E	100%	99.8%
Coronavirus OC43	100%	99.6%
Influenza A	90.0%	99.8%
Influenza A H1	100%	100%
Influenza A H1 2009	100%	99.6%
Influenza A H3	100%	100%
Influenza B	100%	100%
Metapneumovirus	94.6%	99.2%
Parainfluenza 1	97.1%	99.9%
Parainfluenza 2	100%	99.8%
Parainfluenza 3	95.8%	98.8%
Parainfluenza 4	100%	99.9%
Respiratory Syncytial Virus	100%	89.1%
Rhinovirus/Enterovirus	92.7%	94.6%
Bacteria		
Bordetella pertussis	94.6%	99.9%
Chlamydophila pneumoniae	100%	100%
Mycoplasma pneumoniae	84.4%	100%

Specimens

Upper Respiratory Swab (e.g. nasopharyngeal): Collect only on a swab with a synthetic tip (such as polyester or Dacron®) and an aluminum or plastic shaft. Do not use a calcium alginate or wood-shafted swab. Place the swab in 1-2 ml sterile saline or universal transport medium in a sterile leak-proof container. Specimen can be held up to 4 days at room temperature or 30 days frozen.

Bronchoalveolar Lavages, Respiratory Washes: 3.0 mL (1.0 mL), sterile leak-proof container. Ship ambient within 96 hours of collection.

Other Samples: Please contact GA for questions about other specimens.

Causes for Rejection Calcium alginate or wood-shafted swab; time and/or temperature instructions not followed as specified; quantity not sufficient (QNS) for analysis.

Reference Range Not Detected

Turnaround Time 1-6 hours from receipt of sample

CPT Codes 87633, 87798, 87486, 87581

Description

The ***FDA-cleared*** FilmArray Respiratory Panel tests for a comprehensive panel of 20 respiratory viruses and bacteria which cause upper respiratory tract infections.

Clinical Utility

A positive PCR result for any 1 of the specific targets indicates the presence of the respective organism in the specimen. A negative result indicates the absence of detectable DNA in the specimen, but does not rule out infection with these or other enteric pathogens. False-negative results may occur due to inhibition of PCR (known inhibition rate of <1%).

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