A, B, or RSV?
Know with accuracy.
Molecular Flu A/B + RSV
Molecular Flu A/B + RSV
Gets it right, even at low concentration levels.

Differentially diagnose influenza A/B and RSV with accurate, reliable precision—to make treatment decisions with greater confidence.

Influenza A/B and respiratory syncytial virus (RSV): the clinical dilemma

For patients, respiratory illness can be challenging because they want immediate relief and a quick return to daily activities. For physicians, accurate diagnosis of influenza (Flu) or RSV can be challenging because:

- Flu and RSV seasons overlap (Flu: October–May; RSV: November–April)
- Their symptoms can be similar or identical
- Not all assays perform equally at low viral concentrations*

*Limitations of rapid influenza diagnostic tests (RIDTs) include:
- Detection varies by virus type and subtype at lower concentrations¹
- Sensitivities are approximately 50–70%¹
- Some can identify Flu A and B viruses but cannot distinguish between them²
- Accuracy can vary based on type of specimen collected²

Molecular Flu A/B + RSV: fast and accurate

A qualitative real-time RT-PCR assay that delivers accurate results with rapid turnaround time:
- Sensitivities for Flu A/B are 100%²
- Specificities for Flu A/B are 99.3–100%³
- Detects and discriminates between Flu A, Flu B and RSV³
- Multiplex molecular assay⁴,⁵
  - Detects clinically important viral infections in a single genomic test
  - May be useful in detecting causative agents for respiratory tract disorders

50–70%
Flu RIDT sensitivity²
100%
RT-PCR Flu A/B sensitivity²
RSV: infant to adult, a potentially serious infection

Most patients with RSV infection recover within 1–2 weeks. However:
- Infections can be severe in certain infants, young children, older adults and others and may require hospitalization.
- RSV is the most common cause of bronchiolitis and pneumonia in children under 1 year of age in the U.S.
- Increasingly recognized as an important cause of respiratory illness in older adults.

Molecular Flu A/B + RSV discriminates RSV from influenza

Illness caused by Flu and illness caused by RSV can be easily confused. Correct diagnosis may involve a highly sensitive assay such as real-time RT-PCR.

According to the CDC:
- The sensitivity of qualitative real-time RT-PCR assays often exceeds that of antigen detection or cell culture.
- Real-time RT-PCR assays should be considered, particularly when testing older children and adults, due to low viral loads.
Quest Diagnostics offers complete solutions to help you diagnose and manage your patients

<table>
<thead>
<tr>
<th>Test Name</th>
<th>Test Code</th>
<th>CPT Code*</th>
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<tbody>
<tr>
<td>Molecular Flu A/B + RSV</td>
<td>91989(X)</td>
<td>87631 (Respiratory Virus, 3–5 targets)</td>
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Specimen requirements: nasopharyngeal swabs (NPS) in sterile viral transport media containing protein stabilizer, antibiotics to inhibit bacterial and fungal growth, and buffer solution.

*The CPT code provided is based on AMA guidelines and is for informational purposes only. CPT coding is the sole responsibility of the billing party.

For more information, contact your Quest Diagnostics sales representative, call 1-866-MY-QUEST (1-866-697-8378) or visit QuestDiagnostics.com.

References:

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