

February, 2019

Respiratory Pathogen Panel Updates

Effective February 13, 2019, a multiplex respiratory pathogen panel will be available in-house and will replace the reflex respiratory pathogen panel portion of the Pediatric Respiratory Panel previously sent to Children's Hospital laboratory.

Changes: The in-house RVP PCR panel includes the same respiratory viral and bacterial targets as the previous panel with the following exceptions:

- ***Bordetella* species:** The previous panel included *Bordetella pertussis*. The in-house panel includes *B. pertussis* and *B. parapertussis*.
- **Rhinovirus:** The previous panel demonstrated significant cross-reactivity of the rhinovirus target with enterovirus, and was reported as rhinovirus/enterovirus. The rhinovirus target on the new panel demonstrates less cross-reactivity with enteroviruses, and is reported as rhinovirus only.*
- ***Mycoplasma pneumoniae* and *Chlamydomphila pneumoniae*:** These organisms are not included on the new panel. If there is clinical suspicion for these organisms, testing may be ordered separately**.
- **Coronaviruses:** The previous panel included targets for coronavirus (agent of the common cold), whereas the in-house panel does not.

Order: The primary options available for respiratory testing at Methodist include:

- 1) The Adult Respiratory Panel which includes influenza A/B & RSV by PCR remains the recommended panel for adult patients with respiratory illness. Influenza A/B and RSV are available to be ordered separately.
- 2) The Pediatric Respiratory Panel is suggested for young children, immunocompromised patients, or if results for respiratory pathogens other than influenza or RSV will alter clinical management. It starts with influenza A/B & RSV PCR. If influenza A/B and RSV are all negative, the respiratory viral panel (RVP) by PCR will be performed. The RVP PCR is not available to be ordered separately (unchanged from previously).

Specimen Requirements: Nasopharyngeal swab in viral transport media (unchanged).

Test Performed: 24 hours a day/7 days a week

Please direct any questions to Dr. Tess Karre at (402)354-7842.

* Due to the genetic similarity of human rhinovirus and enterovirus, the rhinovirus target on the new panel may still demonstrate some cross reactivity with certain strains of enterovirus.

** The following tests are available if there is clinical suspicion (sent to reference laboratory with turnaround time of 2-3 days):

Mycoplasma pneumoniae PCR

Chlamydomphila pneumoniae PCR