

10X Essentials

Infectious Disease Diagnostics in the Geisinger Health System

SUMMARY

GASPCR

New Strep test being offered, DC use of GRAS test

First in the U.S.! ABRP (Flu/RSV)

Choose for outpatients. Do not order ABRP for admissions/inpatients.

USE RVPCR (full respiratory panel) for inpatients or immune-compromised and other at risk outpatients.

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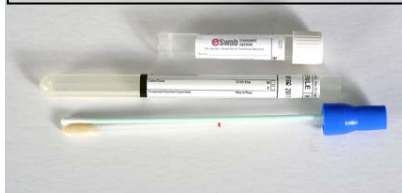
10X Essentials

NEW Test: GASPCR, Group A Strep PCR

As of Dec 2, 2014 GMC Microbiology launches an improved testing platform for Group A streptococcus testing. **GASPCR testing provides improved sensitivity with similar turnaround time, identifying over 10% more Group A streptococci than our previous method.** (Former GRAS test is being discontinued Dec 2 to 5, 2014). Over 30% more accurate than rapid antigen tests. <http://www.geisingermedicallabs.org/catalog/details.cfm?tid=1887>



Group A Strep combo swab



Clinical Use: GASPCR is used in conjunction with Rapid Group A strep antigen testing that many clinics perform on site (GPRAS). Laboratory regulations require that negative Group A Streptococcus Direct Antigen Detection results be reflexed to a more sensitive method for confirmation. GASPCR is the GML confirmatory test.

Specimen: Group A Strep Combo Swabs.

Collection: Collect both throat swabs and place the dry swab (without the red stripe) into the blue top transport sleeve for use when testing Group A rapid antigen testing (GPRAS). Place the flocked swab (with the red stripe) into the Eswab medium for transport to GMC for GASPCR. If no rapid strep testing is being performed, discard the blue top swab.

Specimen Stability: ESwab – 72 hours at room temperature or 2-8°C.

Microbiology delivers faster turnaround time for outpatient Flu and RSV testing

Method change: New test code ABRP replaces FluA/B RSV Direct Assay (test code PCRABR).

Clinical Use: No change from previous method; Used for outpatient testing of nasopharyngeal, nose, nares, nasal, and throat swabs for patients suspected of FLU A, B and RSV.

<http://www.geisingermedicallabs.org/10xEssentials/RespFlowDiagram.pdf>

FDA-approved specimen types in Universal transport medium: Nasopharyngeal (NP) swab (preferred) nasal swab, nares swab, and nose swab. Additional validated specimen type: Throat swab

Performance: > 98% sensitive and 100% specific.

<http://www.geisingermedicallabs.org/catalog/details.cfm?tid=1881>

Transport: 2-8° C

Microbiology Rolls Out Improvements for GWV Blood Cultures

Beginning Dec 3, 2014, GWV Blood Cultures will have a new look and improved speed and accuracy (The BLCEI Blood Culture will replace BLC). BACTEC Blood culture bottles will be rolled out for ICU, ED, and then all other patient units during the month of December. Phlebotomy will automatically collect BACTEC bottles and BLCEI will be automatically ordered. BLC will be discontinued by mid-December.

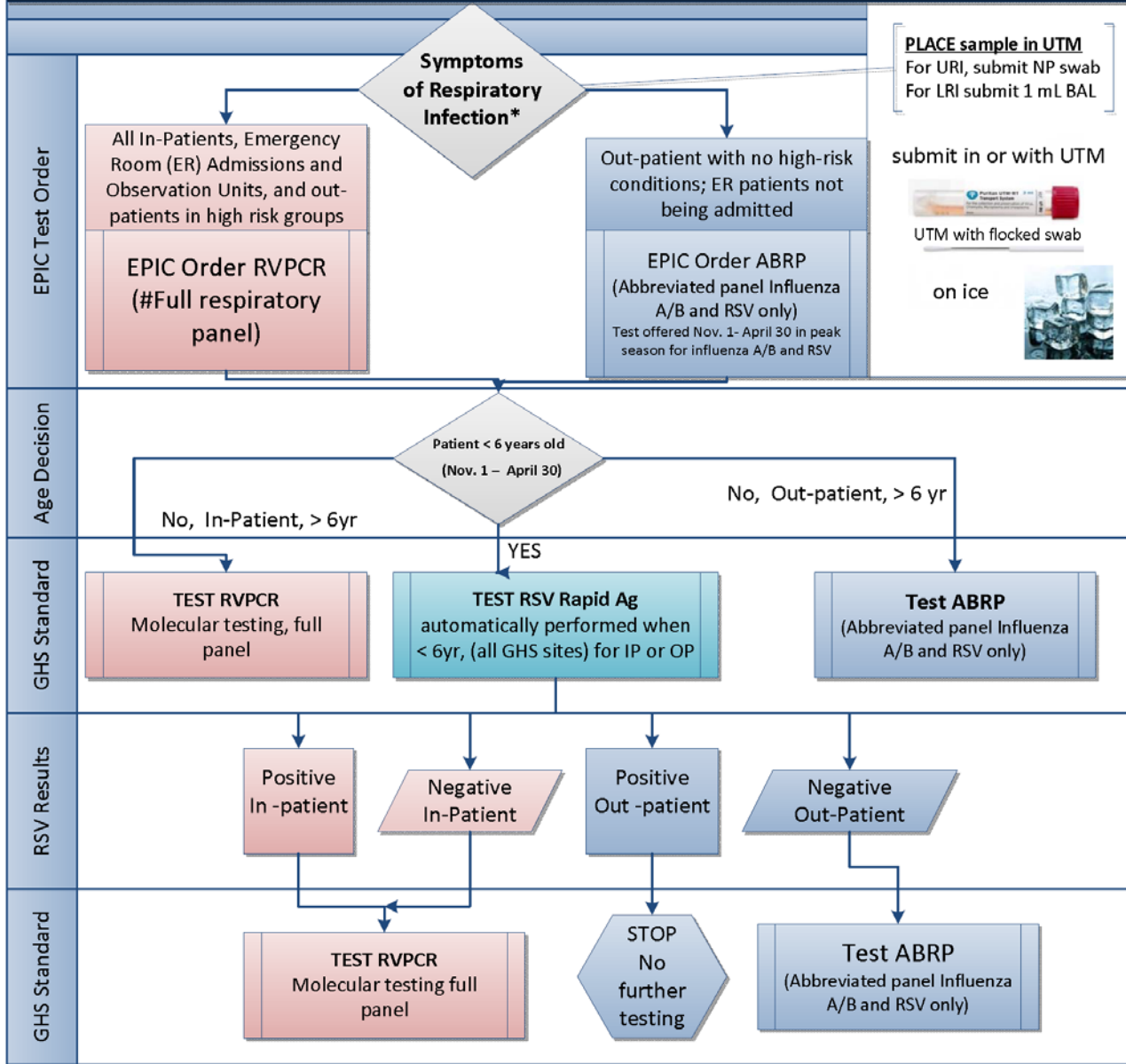


Questions please contact
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“Make it the best.” - A. Geisinger

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2014-2015 Approved Respiratory Pathogen Testing Algorithm
Geisinger Medical Laboratories, Danville, PA



TEST = RVPCR

Molecular testing full panel: adenovirus; coronaviruses 229E, HKU1, NL63, and OC43; rhinovirus; human metapneumovirus; influenza A (subtypes H1, 2009 H1, and H3); influenza B; parainfluenza virus types 1-4; RSV; Bordetella pertussis; Chlamydia pneumoniae; and Mycoplasma pneumoniae.
Performing laboratories: GMC, GWV, GCMC, and GBH. GSACH sent to GMC.

TEST = ABRP

Molecular testing abbreviated panel: influenza A influenza B, RSV (performed at GMC for all sites)

Abbreviations

URI = upper respiratory infection
LRI = lower respiratory tract infection
UTM = universal transport media w/ flocked swab
NP = nasopharyngeal
BAL= bronchoalveolar lavage
RSV = respiratory syncytial virus
ED = Emergency Department

For questions about respiratory pathogen testing, please contact Microbiology Technical Specialists: Lisa Scicchitano, B.S., MT(ASCP) at 570-214-4294, or Francis Tomaszewski, B.S., MT(ASCP) at 570-271-6185 of Doctoral directors: Dr. Donna Wolk, MHA, Ph.D, D(ABMM) at 570-271-7467 or Dr. Raquel Martinez, Ph.D, D(ABMM) at 570-271-6338.

*Note: Exceptions to algorithm can occur with laboratory waiver, e.g., patients in high risk groups
*May 1- Oct 31: rare chance of detecting influenza/ RSV; for diagnostic purposes, the full molecular panel is standard.
Resp Flow diag Nov thru Apr.vsd

dmwolk, rmmartinez: 12/30/2013, rev 2/5/14,
rev 11/07/14