ePlex®
Respiratory Pathogen Panel

Comprehensive Results to Improve Patient Outcomes and Reduce the Cost of Care

ePlex
Designed for the Patient,
Optimized for the Lab™

The clinical presentation of respiratory pathogens is very similar, complicating diagnosis and appropriate therapy selection. Traditional methods **can be slow** and **miss the cause of infection.**

Respiratory Tract Infections

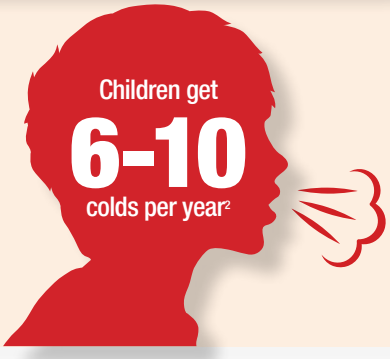
Cause more doctor visits and absences from school and work than any other illness.[1]

1 Billion

colds in the United States per year[2] and approximately

500 Million

non–influenza Infections[1,3,4]



High-Risk Groups

Are **more likely to die** from complications or be hospitalized with worsening conditions[5]

Children younger than 5

especially children less than 2 years old

Adults 65 years of age and older

Pregnant women

Critically ill patients

especially immunocompromised, e.g. cancer and transplant patients

Traditional Diagnostic Methods

Are **slow** and **do not offer** comprehensive pathogen detection.

Antigen detection, DFA, culture, and batch PCR delay treatment decisions

8 HOURS TO 72 HOURS

Batch PCR is typically run once per day often excluding weekends

What are you missing?

It's not just flu:

ONLY 16%

of positive results are influenza[6]

1 Upper Respiratory Infection (URI or Common Cold). Johns Hopkins Medicine. Retrieved from http://www.hopkinsmedicine.org/healthlibrary/conditions/pediatrics/upper_respiratory_infection_uri_or_common_cold_90,P02966/ (Date accessed: May 2017)
2 The Common Cold Fact Sheet. National Institute of Allergy and Infectious Diseases, National Institutes of Health. December 2004.
3 Seasonal Influenza, More Information. Centers for Disease Control and Prevention. https://www.cdc.gov/flu/about/qa/disease.htm (Date accessed: May 2017)
4 Seasonal Influenza. European Centre for Disease Prevention and Control.
5 Flu Symptoms & Complications. Centers for Disease Control and Prevention. https://www.cdc.gov/flu/about/disease/complications.htm (Date accessed: May 2017)
6 Schreckenberger, P. and McAdam, A. (2015). Point-Counterpoint: Large Multiplex PCR Panels Should Be First-Line Tests for Detection of Respiratory and Intestinal Pathogens. J Clin Microbiol. 53(10):3110-5. doi: 10.1128/JCM.00382-15

Sample-to-answer multiplex molecular respiratory tests provide rapid, accurate, and comprehensive results to **improve patient outcomes** and **reduce the cost-of-care.**

Antibiotic Stewardship

Rapid, actionable test results
support better antimicrobial stewardship

13%
REDUCTION
in antibiotic therapy duration[7]

FEWER DAYS

0.4
in antibiotic use duration in a children's hospital ED[8]

1.0
in median antimicrobial duration among adult influenza patients[9]

1.9
in mean antibiotic duration with rapid, sample-to-answer testing[7]

Bed Management

Multiplex respiratory panels can
improve bed management

Compared to batch PCR:
Reduced length of stay and time in isolation

7 hours[8]

4x
Increase in patients who had results reported
while they were still in the Emergency Department[8]

Patient Outcomes

Rapid tests results can
improve outcomes and **reduce mortality**

ICU patients had a
10%
increase in survival rate
compared to batch testing[7]

ICU patients experienced a
30.4 hour
reduction in mean time
from sample collection to result compared to batch testing[7]

DECREASED mortality when results returned in **<7 hours**

Cost-of-Care

Multiplex respiratory panels
reduce the overall cost-of-care

ICU stay reduced by
3 days
in a major IDN[7]

Average cost savings of
$230
per positive test result due to reduced hospital and antibiotic costs[8]

Overall cost-of-care reduced more than
$8,000
per patient relative to batch testing[7]

7 Martinez, R.M, et al. Implementation of Non-Batched Respiratory Virus Assay Significantly Impacts Patient Outcomes in the ICU. Clinical Virology Symposium 2016.
8 Rogers, B. et al. (2015). Impact of a Rapid Respiratory Panel Test on Patient Outcomes. Arch Pathol Lab Med. 139(5):636-41. doi: 10.5858/arpa.2014-0257-OA.
9 Rappo, R., et al. (2016). Impact of Early Detection of Respiratory Viruses by Multiplex PCR Assay on Clinical Outcomes in Adult Patients. J Clin Microbiol. 54(8):2096-2103.

Comprehensive Coverage of the Most Common Respiratory Pathogens

Viral Targets

Adenovirus
Coronavirus 229E
Coronavirus HKU1
Coronavirus NL63
Coronavirus OC43
SARS-COV-2
MERS-CoV
Human Bocavirus
Human Metapneumovirus
Human Rhinovirus/Enterovirus
Influenza A
Influenza A H1
Influenza A H1-2009
Influenza A H3
Influenza B
Parainfluenza 1
Parainfluenza 2
Parainfluenza 3
Parainfluenza 4
Respiratory Syncytial Virus A
Respiratory Syncytial Virus B

Bacterial Targets

Bordetella pertussis
Legionella pneumophila
Mycoplasma pneumoniae

For more information on ePlex® and the RP2 Panel, please visit www.genmarkdx.com

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