When a patient presents for an acute visit with influenza-like symptoms, timing for diagnosis is critical. But distinguishing between different types of infection—and making a differential diagnosis—can be challenging. Influenza, respiratory syncytial virus (RSV), other viruses, and some types of bacterial infection can all share similar symptoms.

For seasonal acute respiratory tract infections, timely clinical decision-making is crucial. Quest’s expanded panels provide accurate, rapid results for diagnosis. Quest Diagnostics offers molecular respiratory virus and pathogen panels that can help clinicians with the following:

- Differentiate bacterial from viral infections
- Reduce unnecessary antibiotic prescribing that can lead to rising rates of antimicrobial resistance
- Diagnose some infections that have been commonly missed
- Get results faster than with traditional methods

Quest’s new Respiratory Pathogen Panel expands our testing options to include bacterial pathogens in addition to viral, for the most accurate diagnosis.

### Influenza*
- 959,000 hospitalizations
- 79,400 deaths

### RSV*
- 234,527 hospitalizations
- 14,000 deaths

*In the US, during 2017–2018 (influenza) and 2016–2017 (RSV)
Know you’re using the preferred testing method

Evidence is increasing that molecular viral panel tests are preferable to traditional virus detection methods (eg, culture, rapid antigen detection test [RADT], direct fluorescent antibody) due to:

- Enhanced sensitivity and specificity
- Rapid turnaround time (eg, 24–48 hours)
- A broader range of virus detection
- High positive predictive values, even during times of low viral prevalence

“RADTs should be replaced by more sensitive (molecular tests) whenever practical.” —Journal of Clinical Microbiology (2011)

Quest’s panels can help address the overuse of antibiotics

Quest’s panels help clinicians rapidly identify the pathogen causing a patient’s illness, allowing therapy to be tailored; this includes adding or discontinuing antibiotic therapy as indicated. Inappropriate antibiotic therapy can contribute to antimicrobial resistance, one of the biggest public health challenges of our time.

30% of all antibiotics prescribed in outpatient clinics are unnecessary.

### Test Name | Test Code | CPT Code*
--- | --- | ---
Respiratory Virus Panel | 95512 | 87633
Includes Adenovirus, Human Metapneumovirus, Human Parainfluenza Virus 1, Human Parainfluenza Virus 2, Human Parainfluenza Virus 3, Human RSV A, Human RSV B, Influenza A, Influenza A Subtype H1, Influenza A Subtype H3, Influenza B, Rhinovirus

[NEW] Respiratory Pathogen Panel | 37444 | 87633
37446 (C. pneumoniae) | 87581 (M. pneumoniae)
Includes Adenovirus, Human Metapneumovirus, Rhinovirus/Enterovirus, Influenza A, Influenza A Subtype H1, Influenza A Subtype H3, Influenza B, Parainfluenza virus (1,2,3,4), RSV-A, RSV-B, Bocavirus, Coronavirus 229E, Coronavirus OC43, Coronavirus NL63, Coronavirus HKU1, Chlamydia pneumoniae, Mycoplasma pneumoniae

*The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.

Accurate, rapid results allow for faster treatment decisions. Contact your sales representative or visit KnowingInfluenza.com to learn more.

References