RPP

Respiratory Pathogen Panel

Results within 24 Hours

MEDICAL LABS UNLIMITED

Pinpoint the Influenza virus and other respiratory virus reduce severity and illness timeframe. Respiratory Pathogen Panel (RPP) is multiplex assay test differentiating 19 strains of respiratory viruses and 3 bacterial species responsible for atypical, community acquires pneumonia's and also Leginonaires Disease.

Typical symptoms: dry or productive cough, runny nose, lethargy, abnormal sputum, fever, body aches.

Viral Targets

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

Viral Targets

- Chlamydophila pneumoniae
- Mycoplasma pneumoniae

Respiratory Pathogen Diagnostic Testing

The RPP Test can pinpoint the Influenza virus and a number of other respiratory viruses and/or Pneumonia bacteria enabling you to treat respiratory ailments swiftly and accurately; therefore it could reduce severity and illness timeframe.

- Employs PCR or (Polymerase Chain Reaction) to amplify specific nucleic acid sequences with the pathogens genetic make-up.
- Treatment protocols for bacterial respiratory pathogens are vastly different than those for viral pathogens. Knowing the pathogen is key to proper and effective treatment.
- Molecular testing is far superior to the screen testing traditionally used in physicians' offices.
    - Screens don't differentiate which species of the flu the patient has - this test does.
    - Screen testing requires a large input of virus/bacteria to work effectively, and even at that it is highly dependent on proper specimen collection and preparation.
    - Screen tests are most effective when the patient has a high viral infection, accurate 89 to 100% of the time. But when the patients viral infection is low, or below the established sensitivity of the screen they fail 40-69% of the time. Even with good sampling, screen tests are fraught with false positives and false negatives.

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