**CITY AND COUNTY OF SAN FRANCISCO**
**PUBLIC HEALTH LABORATORY**
101 Grove Street, Room 419
San Francisco, CA 94102
Tel: (415) 554-2800 Fax: (415) 431-0651
Godfred Masinde, PhD., Lab Director
CLIA ID # 05D0643643

# Test Order

## *Respiratory Panel Assay*

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|---|---|
| Synonym(s) | Biofire Respiratory Panel:<br>• Adenovirus<br>• Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-COV-2)<br>• Human Metapneumovirus<br>• Influenza B<br>• Respiratory Syncytial Virus<br>• *Bordetella pertussis*<br>• *Mycoplasma pneumoniae*<br>• Coronavirus 229E/HKU1/NL63/OC43<br>• Human Metapneumovirus<br>• Influenza A (Subtype H1, H3, H1-2009)<br>• *Parainfluenza virus* 1, 2 , 3, 4<br>• *Bordetella parapertussis*<br>• *Chlamydia pneumoniae* |
| Methodology | Multiplexed nucleic acid test |
| Acceptable Specimen Type(s) for Testing | Nasopharyngeal Swab (NPS) collected according to standard technique and immediately placed in up to 3 mL of transport media |
| Transport / Collection Medium | VTM or UTM |
| Storage and Preservation of Specimen | • Specimen should be processed and tested with the BioFire RP2.1 as soon as possible.<br>• Freeze specimens at -15°C or below if testing will be delayed. Swabs in viral transport media are stable for 30 days at -15°C or below. Swabs in viral transport media are also stable for 4 hours at room temperature and 3 days refrigerated (2º to 8º C). |
| Minimum Volume Required | 0.3 mL (300 µL) |
| Additional Collection Instructions | N/A |
| Additional Required Information | N/A |
| Send Out? | N/A |
| Turnaround Time | 1 - 2 business days from receipt |
| Testing Restrictions | N/A |
| Requisition Form(s) | https://www.sfcdcp.org/wp-content/uploads/2023/04/Lab-Requisition-Form-Updated-3.17.2023-1.pdf |
| Limitations / Notes / Disclaimers | The performance of this test has not been established for patients without signs and symptoms of respiratory infection. Results from this test must be correlated with the clinical history, epidemiological data, and other data available to the clinician evaluating the patient. Viral and bacterial nucleic acids may persist in vivo independent of organism viability. Detection of organism target(s) does not imply that the corresponding organisms are infectious or are the causative agents for clinical symptoms. The detection of viral and bacterial nucleic acid is dependent upon proper specimen collection, handling, transportation, storage, and preparation. Failure to observe proper procedures in any one of these steps can lead to incorrect results. There is a risk of false positive or false negative values resulting from improperly collected, transported, or handled specimens |

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