Innovative Health Diagnostics
1565 McGaw Ave. Suite A
Irvine, CA 92614-5670
Phone Number: (949) 491-8080
CLIA: 05D2040304

Patient:	REPORT SAMPLE	Specimen:	**Swab**	Specimen ID:	**2238223**
Patient ID:	**MDT-007**	Collected:	**12/28/23 10:00 AM PST**	Provider:	**Provider Test**
Patient DOB:	**11/17/1998**	Received:	**12/28/23 8:49 AM PST**	Account:	**6518**
Patient Age:	**25**	Reported:	**12/28/23 8:51 AM PST**	Facility:	**Innovative Health Diagnos**
Patient Sex:	**Female**				

Molecular Report

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POSITIVE SUMMARY

Pathogens **Adenovirus, Haemophilus influenzae**

LEGEND

SANFORD GUIDE 熱病

The data provided are intended to serve as a general guide to antibacterial usefulness based on package insert, treatment guidelines, published reports, in vitro activity, predominant patterns of susceptibility or resistance and/or demonstrated clinical effectiveness. Variability in resistance patterns due to local or regional differences or as a consequence of clinical setting, e.g., community onset vs. ICU-acquired infection, should be taken into account when using this information because the activity of antimicrobial agents can differ significantly and hence is beyond the scope of this general summary. Susceptibility testing results and your local antibiogram should be consulted in every case.

- **[1] Preferred:** Agent is a first line therapy: reliably active in vitro, clinically effective, guideline recommended, recommended as a first-line agent or acceptable alternative agent in the Sanford Guide.
- **[2] Alternative:** Agent is a potential alternative agent (active in vitro, possesses class activity comparable to known effective agents or a therapeutically interchangeable agents and hence likely to be clinically effective, but second line due to overly broad spectrum, toxicity, limited clinical experience, or paucity of direct evidence of effectiveness).
- **[3] Limited Utility:** Limited utility such that the agent, although clinically effective in some settings or types of infections is not reliably effective in others, or should be used in combination with another agent, and/or its efficacy is limited by resistance which has been associated with treatment failure.

Pathogens	Amox-Clav	Levofloxacin	Moxifloxacin	Cidofovir	Ciprofloxacin	Delafloxacin	Ofloxacin	Prulifloxacin	Gemifloxacin	Gatifloxacin	Cefprozil	Cefurox-Axe	Cefixime	Ceftibuten	Cefpodoxime	Cefdinir	Cefditoren	Azithromycin	Clarithromycin	Telithromycin	Doxycycline	Minocycline	Omadacycline	Tetracycline	Lefamulin
Adenovirus				2																					
H. influenzae	1	1	1		2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2

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Respiratory Pathogen Panel (RPP), Comprehensive

Test	Result	Range
Bacteria		
Bordetella pertussis	**Not Detected**	Not Detected
Bordetella spp	**Not Detected**	Not Detected
Chlamydophila pneumoniae	**Not Detected**	Not Detected
Haemophilus influenzae	✔ **Detected**	Not Detected
Klebsiella pneumoniae	**Not Detected**	Not Detected
Legionella pneumophila	**Not Detected**	Not Detected
Mycoplasma pneumoniae	**Not Detected**	Not Detected
Staphylococcus aureus	**Not Detected**	Not Detected
Streptococcus pneumoniae	**Not Detected**	Not Detected
Virus		
Adenovirus	✔ **Detected**	Not Detected
HHV4 (Epstein-Barr Virus)	**Not Detected**	Not Detected
HHV5 (Cytomegalovirus)	**Not Detected**	Not Detected
HHV6 (Human Herpesvirus 6)	**Not Detected**	Not Detected
Human Coronavirus 229E	**Not Detected**	Not Detected
Human Coronavirus HKU1	**Not Detected**	Not Detected
Human Coronavirus NL63	**Not Detected**	Not Detected
Human Coronavirus OC43	**Not Detected**	Not Detected
Human Enterovirus (pan assay)	**Not Detected**	Not Detected
Human Enterovirus D68	**Not Detected**	Not Detected
Human Metapneumovirus (hMPV)	**Not Detected**	Not Detected
Human Parainfluenza Virus 1	**Not Detected**	Not Detected
Human Parainfluenza Virus 2	**Not Detected**	Not Detected
Human Parainfluenza Virus 3	**Not Detected**	Not Detected
Human Parainfluenza Virus 4	**Not Detected**	Not Detected
Influenza A (Pan)	**Not Detected**	Not Detected
Influenza A/H1-2009	**Not Detected**	Not Detected
Influenza A/H3	**Not Detected**	Not Detected
Influenza B	**Not Detected**	Not Detected
Respiratory Syncytial Virus A (RSV A)	**Not Detected**	Not Detected
Respiratory Syncytial Virus B (RSV B)	**Not Detected**	Not Detected
Rhinovirus	**Not Detected**	Not Detected

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Virus		
SARS-CoV-2	**Not Detected**	Not Detected

These tests are Lab Developed Tests and were developed, and its performance characteristics determined by Innovative Health Diagnostics.The U.S. Food and Drug Administration has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used solely for clinical diagnosis or patient management decisions.

Comments:
No comments.

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Detected Pathogen - Adenovirus

Clinical Setting

- Cause of respiratory tract infections, including fatal pneumonia, in children and young adults.
  - Adenovirus 14 associated with severe pneumonia in otherwise healthy young adults (MMWR 56(45):1181, 2007).
  - High mortality (60%) in transplant patients (Clin Infect Dis 43:331, 2006).
    - Frequent cause of hemorrhagic cystitis
    - Clinical syndromes include: fever, elevated liver enzymes, leukopenia, thrombocytopenia, diarrhea, pneumonia, hemorrhagic cystitis, and rarely, meningoencephalitis.
- Monitor for viremia (1 - 2 times / week) in those with Allo-HSCT with haploidentical donor or unrelated cord blood graft; Severe GVHD; Severe lymphopenia; and / or therapy with alemtuzaumab (Campath). Monitoring should continue until immune reconstitution. Those with at least 1 risk factor and viremia should be treated with Cidofovir.
- Outbreaks in institutional settings have been reported (Am J Infect Control 35:S65, 2007). CDC/HICPAC guidelines recommend contact and droplet precautions during hospitalization for the duration of illness to prevent nosocomial transmission; extended duration of precautions may be required for immunocompromised patients owing to prolonged shedding.

Prevention

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VIEW FULL PATHOGEN ARTICLE HERE
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Detected Pathogen - Haemophilus influenzae

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Clinical Setting

- Isolation of *Haemophilus influenzae* in culture of CSF, blood, sputum, respiratory tract secretions or tissue.
  - Encapsulated type B strains (HiB), as well as other typable strains A, C, E, F, typically cause more invasive disease, but HiB preventable by vaccination.
  - Nontypeable strains cause most disease in adults and vaccinated children.

- Frequent colonizer.
- Choice of regimen depends on disease or severity of illness.
- For specific therapy in the following settings, see:
  - Meningitis, H. influenzae
  - Empyema, Infants/Young Children
  - Empyema, Older Child/Adult
  - Sepsis, Child
  - Epiglottitis, Supraglottis
  - Bronchiectasis
  - Bronchitis, Infants/Children (Age < 5 years)
  - Bacteremia, Post-splenectomy
  - Acute otitis media

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