BIOMÉRIEUX

DON'T MISS A **DIAGNOSIS.**

ANTIMICROBIAL STEWARDSHIP

Early pathogen identification in patients with respiratory infections can help minimize unnecessary antibiotics and downstream procedures.

When used together, BIOFIRE® FILMARRAY® Pneumonia *plus* (PN*plus*) Panel / BIOFIRE® Respiratory 2.1 *plus* (RP2.1*plus*) Panel with VIDAS® B•R•A•H•M•S PCT™ may help improve patient outcomes by:

Identifying the presence of **bacterial co-infections**[1-3]

17.9X increase in neuraminidase use in the ED[*4]

Reducing IV antibiotics use by **4.4 days**[4]

1.9X increase in stopping or de-escalating antibiotics[4]

BIOFIRE® PN*plus* PANEL   CE 2797

Identifies 34 targets including bacteria, viruses, and antimicrobial resistance genes, in about an hour.

Identifies many of the most common pathogens in community and hospital acquired pneumonia

Supports two sample types: BAL-like (including BAL and mini-BAL) and sputum-like (including ETA) samples

BAL-like 96.2% sensitivity, 98.4% specificity; Sputum-like 96.3% sensitivity, 97.3% specificity[5]

BIOFIRE® RP2.1*plus* PANEL   CE 2797

Targets 23 pathogens, including bacteria and viruses, in about 45 minutes.

Identifies a comprehensive grouping of relevant pathogens, including SARS-CoV-2

SARS-CoV-2 98.4% PPA and 98.9 NPA[6]

Overall 97.1% sensitivity and 99.3% specificity[7]

VIDAS® B•R•A•H•M•S PCT™

Detects procalcitonin, a specific marker of severe bacterial infection and sepsis, in only 20 minutes.

Aids in decision making on antibiotic therapy for patients with lower respiratory tract infections

Helps in assessing the severity and prognosis of an infection

89% sensitivity and 94% specificity for determining bacterial infection[8]

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*Patient population had a mean age of 81.2 years.

1. Kyriazopoulou et. al. BioFire FilmArray Pneumonia Panel for Severe Lower Respiratory Tract Infections: Subgroup Analysis of a Randomized Clinical Trial. Infect Dis Ther. 2021 10:1437-1449. 2. Poole S. et. al, Molecular point-of-care testing for lower respiratory tract pathogens improves safe antibiotic de-escalation in patients with pneumonia in the ICU: results of a randomised controlled trial. Journal of Infection (2022), doi: https://doi.org/10.1016/j.jinf.2022.09.003. 3. Moradi T, et.al. Use of Procalcitonin and a Respiratory Polymerase Chain Reaction Panel to Reduce Antibiotic Use via an Electronic Medical Record Alert. Clin Infect Dis. 2020 Oct 23;71(7):1684-1689. doi: 10.1093/cid/ciz1042. PMID: 31637442; PMCID: PMC7108168. 4. Lee C-C, et al. Combining Procalcitonin and Rapid Multiplex Respiratory Virus Testing for Antibiotic Stewardship in Older Patients With Severe Acute Respiratory Infection. JAMDA. Jan;21(1):62-67. 5. Overall performance based on prospective clinical study for the BIOFIRE® FILMARRAY® Pneumonia *plus* Panel, data on file, BioFire Diagnostics. 6. Overall performance based on prospective SARS-CoV-2 clinical study for the BIOFIRE® Respiratory 2.1 *plus* Panel in comparison to 3 EUA tests. Data on file, BioFire Diagnostics. 7. Based on the prospective portion of the clinical study for the BIOFIRE® Respiratory 2.1 *plus* Panel. Data on file, BioFire Diagnostics. 8. Meisner M. Procalcitonin-biochemistry and clinical diagnosis. Dresden (Germany): UNI-MED-Verlag; 2010.

Product availability varies by country. Consult your bioMérieux representative.

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PIONEERING DIAGNOSTICS