

QUICKVUE[®]

RSV TEST
Respiratory Syncytial Virus

Quick, easy, accurate!

Diagnosing and managing respiratory syncytial virus (RSV) is serious business. In the U.S., RSV is estimated to be responsible for 73,400 to 126,300 hospitalizations annually for bronchiolitis and pneumonia alone among children younger than one year.¹ In children hospitalized with an RSV infection, it is believed to be the most common viral cause of death in children younger than five years, particularly in children younger than one year.²



Due to potentially serious complications that may result from RSV, prompt detection and management are critical.

Accordingly, healthcare professionals including physicians, caregivers and laboratories recognize the benefits of utilizing rapid RSV tests to aid clinical diagnosis and patient care management.

The QuickVue RSV test is a simple and accurate test that can aid in diagnosing RSV quickly and confidently, giving the results you need. Right. Now.

Rapid Diagnosis and Treatment

- Results in 15 minutes or less.

Accurate Detection

- Accurate detection with choice of sample type:
 - 99% sensitivity with nasopharyngeal aspirate.
 - 92% sensitivity with nasopharyngeal swab.
 - 83% sensitivity with nasal/nasopharyngeal wash.

Easy to Use

- CLIA waived.
- Dipstick test format.
- 3-step procedure, approx. 30 seconds hands-on time.
- Only 1 reagent.
- Two-color endpoint for easy to read and interpret results.

Advantages of QuickVue RSV

- High sensitivity and specificity (see back for performance details).
- Each kit contains everything needed to perform the test, including nasopharyngeal swabs and Positive and Negative Controls.
- Room temperature storage with up to 24-month shelf life from date of manufacture.
- Cleared for use with children up to 18 years of age.
- When run in conjunction with a QuickVue Influenza test, a single specimen sample may be used for both tests, eliminating the need to collect multiple samples, causing less patient discomfort while saving valuable time.

¹Collins P, Chanock R., Murphy B. Fields Virology. Fourth Edition. Volume 1. Chapter 45 - Respiratory Syncytial Virus. Lippincot Williams and Wilkins. (2001).

²Thompson W. et al. Mortality Associated With Influenza and Respiratory Syncytial Virus in the United States. JAMA, January 8, 2003 - Vol 289, No. 2.

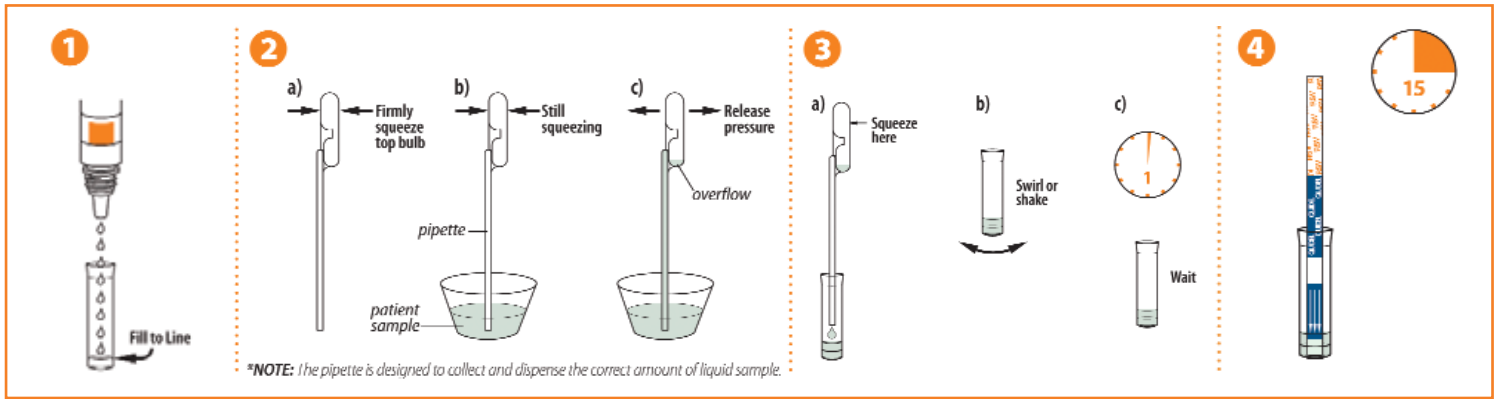


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Nasopharyngeal aspirate and Nasal/Nasopharyngeal wash procedure:



Nasopharyngeal Aspirate:

Sensitivity: 99%

Specificity: 92%

Accuracy: 94%

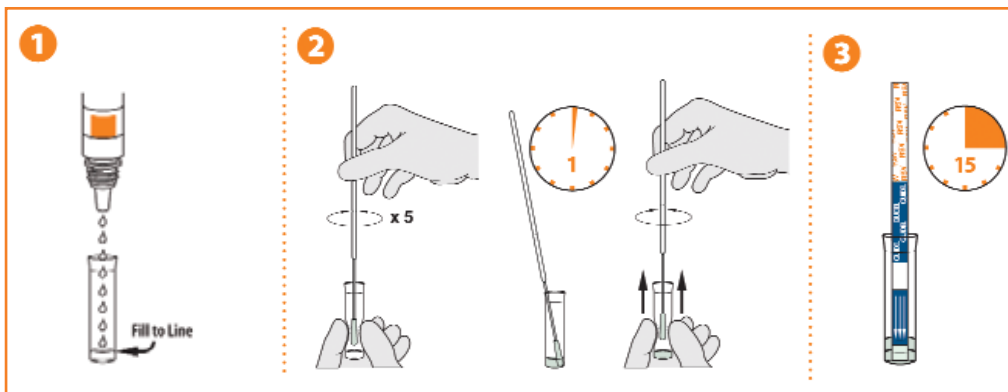
Nasal/Nasopharyngeal Wash:

Sensitivity: 83%

Specificity: 90%

Accuracy: 87%

Nasopharyngeal swab procedure:



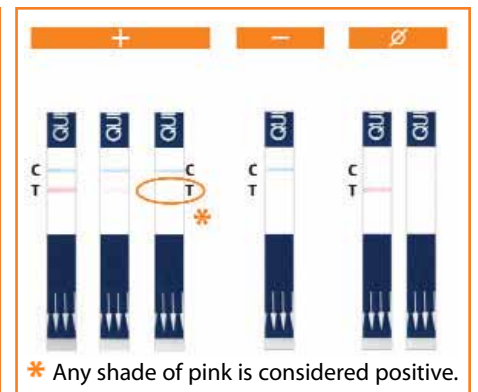
Nasopharyngeal Swab:

Sensitivity: 92%

Specificity: 92%

Accuracy: 92%

Results:



The performance of any rapid RSV test is dependent on sample collection and handling and the adherence to the Package Insert. Refer to our website at www.quidel.com for additional performance claims.



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