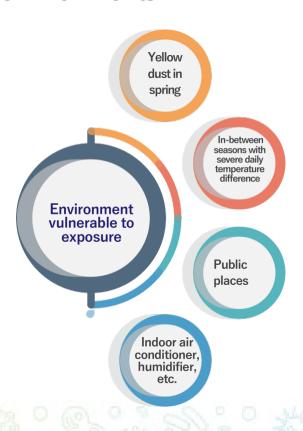
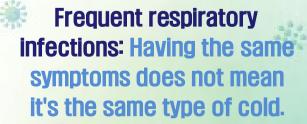
Route of infection

Exposure to respiratory viruses occurs in diverse environments.









Test information

Test Name

Respiratory Pathogen Panel (Bacteria/Virus) causing neumonia

Specimen

- Nasopharyngeal aspirate
- Nasopharyngeal swab
- Bronchoalveolar lavage fluid
- Sputum

Professionally tailored care for respiratory disorders

Respiratory Pathogen Panel (Bacteria/Virus) causing pneumonia





Consult your healthcare provider for any questions and interpretation of your test results.



What is a respiratory disorder?

Acute respiratory infection is the most common disease in all age groups. About 4 million children die from acute respiratory infections every year.¹

However, most cases have similar signs and symptoms, so it is difficult to provide accurate treatment relying solely on an empirical diagnosis based on clinically observed symptoms.²

- 1. Lee et al., Pediatric infections: Vol 10-1 2003
- 2. Heungsup Sung, et al(2008) Korean J. Lab. Med.28(2):109-117

Respiratory disorders: Require proper treatment depending on the cause!

Viral infections are symptomatically treated, while bacterial infections are treated with antibiotics. Accurately identifying the cause and providing appropriate treatment shortens the duration of illness, effectively promotes healing and prevents complications.

Therefore, identifying the exact causative pathogen is crucial to provide proper treatment.

There is an array of viruses and bacteria that induce respiratory disorders.

Mycoplasma pneumonia

Legionella

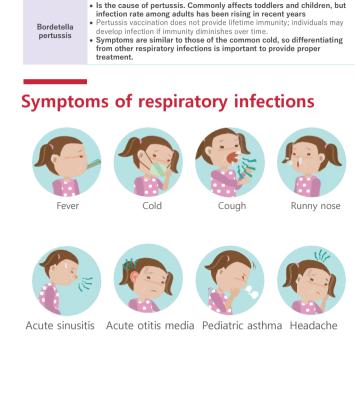
pneumophila

Chlamydophila

pneumoniae

	Causative
	Pharyngitis is the most common symptom
Adenovirus	It is the cause of 7–9% of child/infant cases of pneumonia.
	May cause pneumonia in immunocompromised individuals
RSV	Clinically most important virus in children
	Mild in healthy children, but is fatal in children with weak lungs and heart
	Induces cold symptoms in adults and pneumonia symptoms in older adults
	 → Highly likely to progress to asthma after treatment • Major cause of bronchiolitis (45~75%) and pneumonia (15~25%)
Rhinovirus	
	Major cause of upper respiratory infections such as rhinitis and pharyngitis Cough is great in 20,40% of cause and partitle for great the 2 years in 25% of
	 Cough is present in 30–40% of cases, and persists for more than 2 weeks in 35% of children
	Second-leading cause of bronchiolitis and pneumonia (following RSV)
	Recently emerged as the major cause of acute/severe lower respiratory infections
	and asthma exacerbation
Parainfluenza virus	Types 1–4; type 4 causes severe disease
	Type 1 is the major cause of croup
	Types 2 and 3 cause bronchitis
	• Commonly associated with croup (15%), pneumonia (15%), and bronchiolitis (50%) in
	hospitalized children
	Fever persistent for 5 days or more may cause secondary bacterial infections such
Boca virus	as otitis media and pneumonia Recently emerged as a major cause of lower respiratory infections
	One of the causes of bronchiolitis and pneumonia
	40% concurrent infection rate with other respiratory viruses
	High risk of asthma
Coronavirus	Linked to SARS
	High risk of progressing to severe infection
	In adults, it is a major cause of the common cold (with cough)
	Recently emerged as a major cause of lower respiratory infections
	Inherent risk of asthma attack; sometimes may cause chronic bronchitis
	and asthma exacerbation
Influenza virus	Generally causes upper respiratory infection (flu)
	 Asypmtomatic or high fever, chills, headache, cough Type A: Antigen mutation occurs every year, and high fatality rate in pneumonia or
	high-risk groups
	Type B: Antigen mutation rarely occurs, and may sometimes cause
	rhinitis, pharyngitis, and pneumonia
	Generally transmitted through droplets *Incubation period is 1–3 days
Novel influenza virus	• Sudden onset of systemic symptoms such as fever (≥38°C), headache,
	muscle pain, and fatigue, as well as respiratory symptoms such as sore
	throat, cough, and sputum.
	Complications include pneumonia, acute respiratory failure, and myocarditis
Enterovirus	Common in summer and fall
	Infects people of all ages High fever, vomiting
	Causes various diseases, such as aseptic meningitis, hand-foot-and-mouth
	syndrome, and myocarditis
	May cause diarrhea if the virus spreads to the intestines
	From mild upper respiratory infection to severe lower respiratory
Metapneu- movirus	infections, such as bronchiolitis (59~68%), croup (18%), and pneumonia
	(8~17%)
	The main symptoms among hospitalized children are fever (86%), cough
	(90%), and dyspnea (80%)
	Symptoms are similar to those of RSV infection, and concurrent

infection may lead to serious outcomes



Causative bacteria

Characteristically show symptoms similar to those of the flu.

May show symptoms other than pneumonia, such as high fever, sore throat,

Sudden onset of high fever, dry cough, headache, muscle pain, general

• Incidence rate is about 0.5–5% but fatality rate is about 15–30% if left

Need to differentiate from mycoplasma pneumonia and symptoms

 In addition to pneumonia, it may exacerbate acute upper respiratory infection, acute sinusitis, acute bronchitis, and chronic obstructive

May cause complications such as pulmonary abscess, respiratory failure.

Typical bacteria that cause atypical pneumonia

ioint pain, hepatitis

and hypotension

untreated

lethargy, intermittent chills

No specific clinical findings

caused by a respiratory virus

nulmonary disorder (COPD)