



The  
*Pathway* to  
**DIAGNOSIS**  
starts **HERE.**



Acute respiratory infections (ARIs) are highly contagious and represent a major source of morbidity and mortality. The significant overlap in symptoms and signs makes it challenging for physicians to differentiate viral from bacterial infection and to identify which patients require antibiotic therapy. More than 50% of antibiotics prescribed for ARI are unnecessary, as the majority of infections are caused by viruses, and may lead to avoidable adverse reactions and antibiotic resistance.<sup>1</sup>

**FebriDx** is a rapid, in-office test that uses a fingerstick blood sample to help identify a clinically significant immune response to ARI and differentiate viral from bacterial infection. FebriDx detects elevated levels of Myxovirus resistance A (**MxA**) – an intracellular protein that becomes elevated in the presence of acute viral infection and C-reactive protein (**CRP**) – an acute-phase inflammatory protein that is elevated in the presence of bacterial infection.

Independently, neither MxA nor CRP is sensitive or specific enough to differentiate viral from bacterial infection. A study shows that CRP guidance alone – at the NICE\* Pneumonia Guidelines recommended cut-off value of 20 mg/L<sup>2</sup> – may lead to over treatment of more than 26% of patients with ARI.<sup>3</sup> FebriDx combines the interpretation of both MxA and semi-quantitative CRP levels into a pattern of results, providing an accurate way to identify patients suffering from a significant ARI from those patients with a microbiologically unconfirmed respiratory illness (**MURI**), which are less likely to benefit from antibiotic therapy.



FebriDx can be used **FIRST** to help triage patients suffering from ARI, providing clinicians a pathway to diagnosis and treatment, leading to more efficacious medical decisions.

To order, visit [FebriDx.com](http://FebriDx.com) or call +1.941.556.1850.

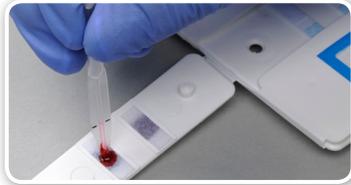
# VIRAL OR BACTERIAL?

TEST PROCEDURE

Collect  
fingerstick  
blood  
sample #1



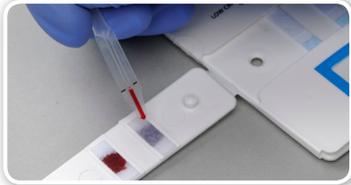
Transfer  
sample #1  
to test strip



Collect  
fingerstick  
blood  
sample #2



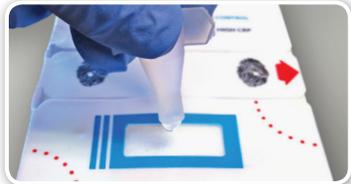
Transfer  
sample #2  
to test strip



Snap test  
card closed



Add buffer  
solution + wait  
15 minutes



## RIGHT DIAGNOSIS

- Identify and triage patients suffering from a clinically significant ARI
- Differentiate viral from bacterial infectious etiology
- Identify the need for pathogen-specific reflex testing
- Clinical performance:<sup>4</sup>

### Asymptomatic patients

- Negative Agreement = **99%** (161/163)

### Symptomatic patients

#### Viral

- Positive Agreement = **87%** (46/53)
- Negative Agreement = **83%** (126/152)

#### Bacterial

- Positive Agreement = **80%** (20/25)
- Negative Agreement = **94%** (169/180)

## RIGHT TREATMENT

- Empower physicians to make targeted immune response-directed therapeutic decisions at the point of care
- Reduce unnecessary antibiotic prescriptions and the possibility of antibiotic resistance, allergies and toxicities, and adverse events
- Improve patient satisfaction by reducing healthcare costs associated with misdiagnosis, repeat office visits, and mistreatment

## RIGHT NOW

- Results in as soon as **15 minutes**
- Single use, disposable test
- Provide optimal patient management during the initial office visit



\*National Institute for Health and Care Excellence (NICE)

**References** [1] Rattinger GB, Mullins CD, Zuckerman IH, et al. A sustainable strategy to prevent misuse of antibiotics for acute respiratory infections. PLoS One 2012;7(12):e51147. [2] National Institute for Health and Care Excellence (NICE) Pneumonia Guidelines: Diagnosis and management of community- and hospital-acquired pneumonia in adults. NICE clinical guideline 191; December 2014. [3] Sambursky R, Shapiro N. FebriDx: the ability of a 10-minute rapid point-of-care immunoassay to reduce antibiotic prescriptions for acute febrile respiratory infection. Poster presented at: European Congress of Clinical Microbiology and Infectious Diseases (ECCMID) 2015. Copenhagen, Denmark. [4] FebriDx Package Insert: SPEC-MKT-044.

FebriDx is CE marked and is available for sale in Europe. FebriDx has not received FDA clearance and is not commercially available in the United States.



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