UNIVERSITY OF LOUISVILLE.

Respiratory Viral Panel (RVP)*

The Respiratory Viral Panel is an automated multiplexed real-time reverse transcriptase polymerase chain reaction (RT- PCR) test intended for the simultaneous, qualitative detection and differentiation of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), influenza A, influenza B, and/or respiratory syncytial virus (RSV) nucleic acid in nasopharyngeal swab (**NPS**) and anterior nasal swab (**ANS**) specimens from individuals with signs and symptoms of respiratory tract infection.

Positive results do not rule out co-infection with other organisms. The agent(s) detected by the Respiratory Viral Panel may not be the definitive cause of disease.

Negative results do not preclude SARS-CoV-2, influenza A, influenza B, and/or RSV infection.

The results of this test should not be used as the sole basis for diagnosis, treatment, or other patient management decisions.

Targets SARS-CoV-2, Influenza A, Influenza B, RSV

Accepted Specimens Nasopharyngeal swab (NPS) or Anterior nasal swab (ANS),

collect using a Dacron-tipped, plastic-shafted swab (Copan Flocked swab, if available) and place in UTM media. Maintain at

4ºC.

Specimens Receipt Specimens accepted Monday through Friday.

Assay Schedule The **RVP** assay is set up Monday through Friday, with final

results usually available by 2:00 pm on the day of receipt.

Normal Range Not detected

CPT Codes RVP: 87637

*This test was developed, and its performance characteristics determined by the Infectious Diseases Laboratory using Analyte Specific Reagents. It has not been cleared or approved by the FDA. The performance of this test was established based on the evaluation of a limited number of clinical specimens. Clinical performance has not been established with all circulating variants but is anticipated to be reflective of the prevalent variants in circulation at the time and location of the clinical evaluation. Performance at the time of testing may vary depending on the variants circulating, including newly emerging strains of SARS-CoV-2 and their prevalence, which change over time. This test is used for clinical purposes and should not be regarded as investigational or for research. This laboratory is regulated under the CLIA Amendments of 1988, 42 U.S.C. \$263a as qualified to perform high-complexity clinical testing of this nature.