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**Report Adverse events,**



## *plus*

### **What does it mean if the specimen tests positive for influenza A, influenza B, and/or RSV?**

A positive test result for influenza A virus, influenza B virus and/or respiratory syncytial virus (RSV) indicates that RNA from one or more of these viruses was detected, the patient is infected with the virus(es) and is presumed to be contagious. Laboratory test results should always be considered in the context of clinical findings and observations and epidemiological data in making a final diagnosis. Patient management decisions should be made by a healthcare provider and follow current CDC guidelines. Results (positive and negative) for influenza and/or RSV should be interpreted with caution. If a result is inconsistent with clinical presentation and/or other clinical and epidemiological information, FDA-cleared influenza and/or RSV NAATs are available for confirmation if clinically indicated.

The Xpert Xpress CoV-2/Flu/RSV *plus* test has been designed to minimize the likelihood of false-positive test results. However, in the event of a false-positive result, risks to individuals could include the following: a recommendation for isolation of the patient, monitoring of household or other close contacts for symptoms, patient isolation that might limit contact with family or friends, limits in the ability to work, delayed diagnosis and treatment for the true infection causing the symptoms, unnecessary prescription of an antiviral medication or other therapy, or other unintended adverse effects.

### **What does it mean if the specimen tests negative for influenza A, influenza B and/or RSV?**

A negative test result for influenza viruses and/or RSV means that influenza A, B and/or RSV RNA was not present in the specimen above the limit of detection. However, a negative result does not rule out influenza A, influenza B, and/or RSV infection and should not be used as the sole basis for treatment or patient management decisions.

When diagnostic testing results are negative, the possibility of a false-negative result should be considered in the context of a patient's recent exposures and the presence of clinical signs and symptoms consistent with influenza. The possibility of a false-negative result should especially be considered if the

patient's recent exposures or clinical presentation indicate that influenza A, influenza B and/or RSV is likely, and diagnostic test results for other causes of illness (e.g., other respiratory illness) are negative. If influenza A, influenza B and/or RSV is still suspected based on exposure history and clinical findings, re-testing should be considered by healthcare providers in consultation with public health authorities.

Laboratory test results should always be considered in the context of clinical findings and observations and/or epidemiological data in making a final diagnosis. Patient management decisions should be made by a healthcare provider and follow current CDC guidelines. Results (positive and negative) for influenza or RSV should be interpreted with caution. If an influenza or RSV result is inconsistent with clinical presentation and/or other clinical or epidemiological information, FDA-cleared influenza and RSV NAATs are available for confirmation if clinically indicated.

Risks to an individual from a false-negative Xpert Xpress CoV-2/Flu/RSV *plus* test result for influenza A, influenza B and/or RSV include: delayed or lack of supportive treatment; lack of monitoring of infected patients and their household or other close contacts for symptoms, resulting in increased risk of spread of influenza A, influenza B and/or RSV within the community; or other unintended adverse events.

### **What does it mean if the specimen tests positive for SARS-CoV-2, influenza A, influenza B and/or RSV viruses? Is co-infection possible?**

Yes, it is possible for an individual to be infected with more than one virus simultaneously. A positive test result for the viruses that cause COVID-19, influenza A, influenza B and/or RSV indicates that RNA from these viruses was detected, the patient may be co-infected, and is presumed to be contagious. Laboratory test results should always be considered in the context of clinical findings and observations and epidemiological data in making a final diagnosis. Patient management decisions should be made with a healthcare provider and follow current CDC guidelines.

**Report Adverse events**, including problems with test performance or results, to MedWatch by submitting the online FDA Form 3500 (<https://www.accessdata.fda.gov/scripts/medwatch/index.cfm?action=reporting.home>) or by calling **1-800-FDA-1088**



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### **What is an EUA?**

The United States FDA has made this test available under an emergency access mechanism called an Emergency Use Authorization (EUA). The EUA is supported by the Secretary of Health and Human Service's (HHS's) declaration that circumstances exist to justify the emergency use of in vitro diagnostics (IVDs) for the detection and/or diagnosis of the virus that causes COVID-19.

An IVD made available under an EUA has not undergone the same type of review as an FDA-approved or cleared IVD. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, available alternatives, and based on the totality of scientific evidence available, it is reasonable to believe that this IVD may be effective in diagnosing COVID-19.

The EUA for this test is in effect for the duration of the COVID-19 declaration justifying emergency use of IVDs, unless terminated or revoked (after which the test may no longer be used).

### **What are the approved available alternatives?**

FDA has approved/cleared certain influenza and RSV tests. Any tests that have received full marketing status (e.g., cleared, approved), as opposed to an EUA, by FDA can be found by searching the medical device databases here: <https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/medical-device-databases>. A cleared or approved test should be used instead of a test made available under an EUA, when appropriate and available. FDA has issued EUAs for other tests that can be found at:

<https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy/FDA-and-RSV>

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