



A New Service from Physicians Reference Laboratory...

The Rapid StrepB Test

**Rapid
Care** **StrepB**

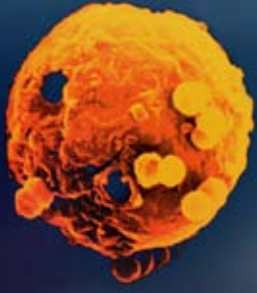
Group-B Strep • *Streptococcus agalactiae*

*Faster Results
for Better Patient Care...*

Rapid turnaround time
(3-12 hours after receiving specimens)

Rapid real time PCR test

PCR is significantly more sensitive than antenatal culture (94% vs. 54%*)



The Rapid StrepB Test

*Faster
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for
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Patient
Care.*

For additional information
about the Rapid Care StrepB test,
please do not hesitate to contact
Dr. Manna at 913-338-4070.



Physicians Reference
Laboratory

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Test Name

Rapid Care StrepB

CPT Code

87653

Method

Real Time PCR

Reporting Name

Rapid Care StrepB

Interpretation

Patients positive for *Streptococcus agalactiae* (StrepB) DNA may support the diagnosis of infection and/or colonization and can be managed with CDC-recommended guidelines.**

Specimen Collection, Storage and Transportation

Use a rayon-tipped plastic shaft swab in Liquid Stuart media to collect vaginal and rectal specimens.

Swab the lower vagina followed by rectum (*i.e. insert swab through the anal sphincter*) using the same swab or two different swabs.

Place both swabs in the same container if vaginal and rectal swabs are collected separately.

A second sample must be collected if susceptibility testing is ordered for penicillin-allergic women. Specimen label should specify that susceptibility testing for clindamycin and erythromycin should be performed if Group B Strep is positive by rapid PCR method.

Keep specimen refrigerated (2-5°C) and send it to the laboratory immediately.

Potential interfering substances that may inhibit PCR and give unresolved results include amniotic fluid, meconium, blood, feces, lubricant, urine, vaginal mucosa, and excessive vaginal secretions. Therefore, it is recommended that the vaginal area be wiped away prior to specimen collection.

* Davies, HD et al. Multicenter study of a rapid molecular based assay for the diagnosis of Group B Streptococcus colonization in pregnant women. Clin Infect Dis 2004;39:1129-35.

** Schrag, S et al. Prevention of perinatal group B streptococcal disease. Revised guidelines from CDC. MMWR Recomm Rep 2002;51(RR-11):1-22.