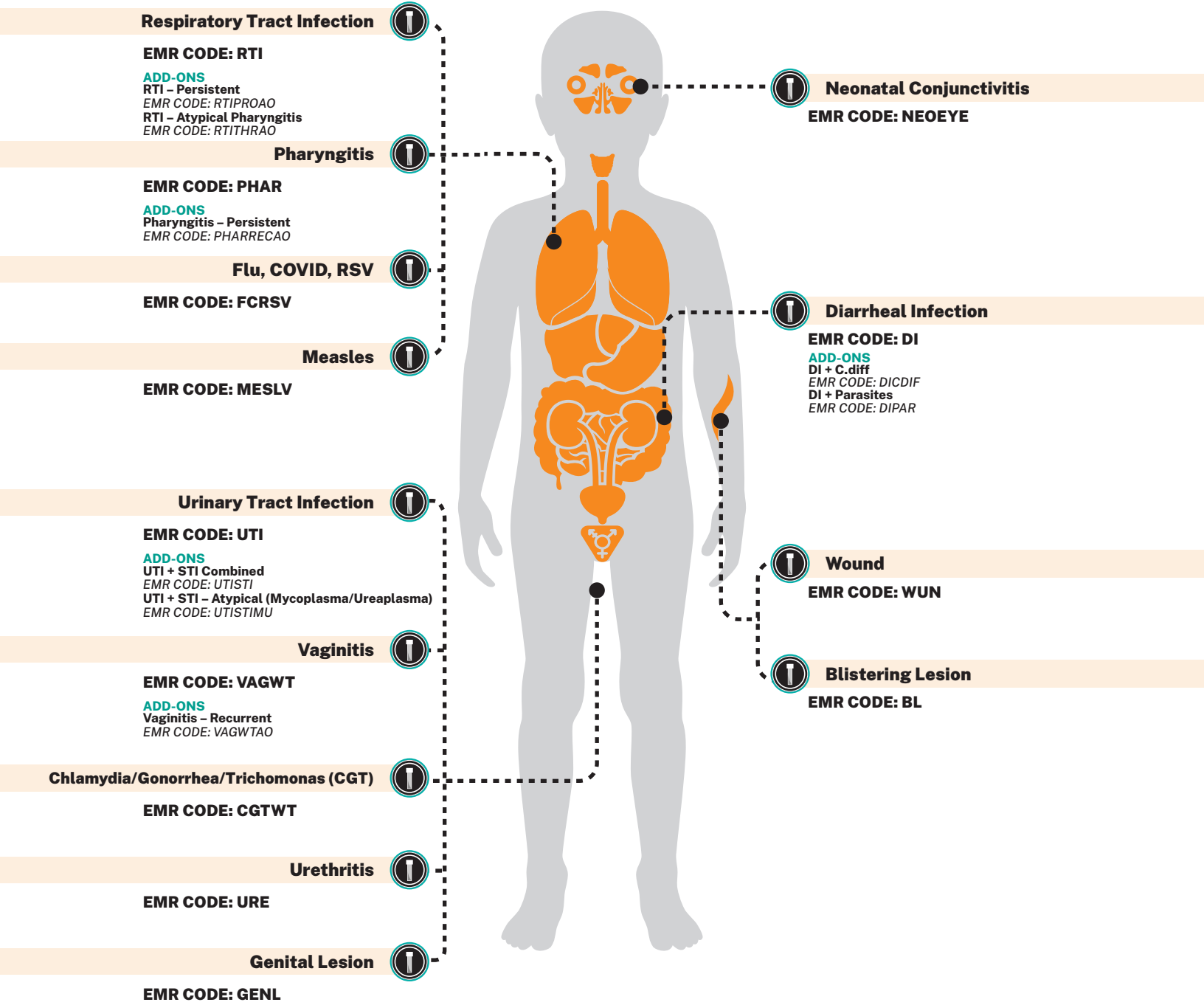


PEDIATRICS

May 2026




**Respiratory,
 Genitourinary,
 and Specialty**
 WHITE



HEALTH  TRACK

Introduction Letter

Pediatrics

HealthTrack is proud to offer a Pediatric testing portfolio designed to support timely, clinically relevant care. As the nation's premier molecular diagnostics laboratory purpose-built for next-morning results, HealthTrack enables providers to move quickly from assessment to action with confidence.

Our Pediatric solutions are aligned with outpatient clinical guidelines, streamlining ordering while supporting targeted, evidence-based treatment decisions. Test today and get answers tomorrow, helping reduce unnecessary antibiotic use, improve patient outcomes, and minimize return visits.

From respiratory to diarrheal to wound test offerings, HealthTrack offers molecular-based infectious disease testing designed with Pediatric providers and their patients in mind.

*Whether you are a current, new, or prospective client, we welcome you to join us on our mission of **Getting People Healthier Faster.***

IDENTIFYING INFECTIONS

Syndromic Menu Ordering Reference Guide

Pediatrics



WHITE

Respiratory

Respiratory Tract Infection **RTI**

SPECIMEN TYPES: Nasopharyngeal/Nares, Oropharynx/Throat/Oral, Cough Sputum

COMMON SIGNS & SYMPTOMS: Upper or lower respiratory tract Infection, high-grade fever, acute cough, runny nose, pain in throat, wheezing, or nasal congestion.

Bacterial

Bordetella pertussis, paraptussis, bronchiseptica
Chlamydia pneumoniae
Mycoplasma pneumoniae

Viral

Adenovirus
Coronaviruses (229E, NL63, HKU1, OC43)
COVID-19 Coronavirus (SARS-CoV-2)
Enterovirus D68

Human metapneumovirus

Influenza virus A, B
Parainfluenza virus (types 1, 2, 3, 4)
Respiratory syncytial virus
Rhinovirus/Enterovirus

ADD-ONS: Panel codes include pathogens above and additional pathogens listed below. Order using only the code below; it includes the base panel and the additional pathogens listed.

RTIPROAO RTI – Persistent Haemophilus influenzae, Moraxella catarrhalis, Streptococcus pneumoniae

RTITHRAO RTI – Atypical Pharyngitis Epstein-Barr Virus (Human Herpesvirus 4), Fusobacterium nucleatum ; necrophorum, Streptococcus dysgalactiae (Group C/G Strep)

Pharyngitis **PHAR**

SPECIMEN TYPES: Oropharynx/Throat/Oral

COMMON SIGNS & SYMPTOMS: Pain in throat, fever, pharyngeal edema, patchy tonsillar exudates, and tender/swollen anterior cervical lymph nodes.

Bacterial

Chlamydia pneumoniae
Mycoplasma pneumoniae
Streptococcus pyogenes (Group A Strep)

Viral

Adenovirus
Coronaviruses (229E, NL63, HKU1, OC43)
COVID-19 Coronavirus (SARS-CoV-2)
Enterovirus D68
Human metapneumovirus

Influenza virus A, B

Parainfluenza virus (types 1, 2, 3, 4)
Respiratory syncytial virus
Rhinovirus/Enterovirus

ADD-ONS: Panel codes include pathogens above and additional pathogens listed below. Order using only the code below; it includes the base panel and the additional pathogens listed.

PHARRECAO Pharyngitis – Persistent Epstein-Barr Virus (Human Herpesvirus 4), Fusobacterium nucleatum ; necrophorum, Streptococcus dysgalactiae (Group C/G Strep)

Flu, COVID, RSV **FCSRV**

SPECIMEN TYPES: Nasopharyngeal/Nares

COMMON SIGNS & SYMPTOMS: Acute upper respiratory tract Infection, high-grade fever, cough, runny nose, pain in throat, wheezing, nasal congestion, shortness of breath, malaise.

Viral

COVID-19 Coronavirus (SARS-CoV-2)
Influenza virus A, B
Respiratory syncytial virus

Measles **MESLV**

SPECIMEN TYPES: Nasopharyngeal/Nares, Oropharynx/Throat/Oral

COMMON SIGNS & SYMPTOMS: Concern of measles with symptoms consistent with an upper respiratory infection, including high fever, cough, runny nose, red watery eyes, and evidence of maculopapular rash and/or Koplik spots.

Viral

Measles

IDENTIFYING INFECTIONS

Syndromic Menu Ordering Reference Guide

Pediatrics



WHITE

Gentourinary

Urinary Tract Infection **UTI**

SPECIMEN TYPES: Urine (voided), Urine (catheter)

COMMON SIGNS & SYMPTOMS: Dysuria, hematuria, urgency of urination, frequency of micturition, or pain of micturition.

Bacterial

Acinetobacter baumannii
Citrobacter freundii
Enterobacter cloacae complex, Klebsiella
(Enterobacter) aerogenes
Enterococcus faecalis, faecium
Escherichia coli
Klebsiella pneumoniae, oxytoca
Morganella morganii
Proteus mirabilis, vulgaris
Pseudomonas aeruginosa
Serratia marcescens

Staphylococcus aureus
Staphylococcus epidermidis, haemolyticus,
luggdunensis
Staphylococcus saprophyticus
Streptococcus agalactiae (Group B Strep)

Fungal

Candida albicans, parapsilosis, tropicalis
Candida glabrata (Nakaseomyces glabratus)
Candida krusei (Pichia kudriavzevii)

Resistance

ACT, MIR, FOX, ACC Groups
CTX-M Groups
dfr (A¹, A⁵), sul (1, 2)
ermA, B, C; mefA
IMP, NDM, VIM Groups
mecA (Methicillin Resistance)
OXA Groups
qnrA, qnrB
SHV, KPC Groups
tet B, tet M
VanA, VanB

ADD-ONS: Panel codes include pathogens above and additional pathogens listed below. Order using only the code below; it includes the base panel and the additional pathogens listed.

UTISTI **UTI + STI Combined** Chlamydia trachomatis, Mycoplasma genitalium, Neisseria gonorrhoeae, Trichomonas vaginalis

Vaginitis **VAGWT**

SPECIMEN TYPES: Vaginal

COMMON SIGNS & SYMPTOMS: Vaginal discharge, odor, itching, irritation, bacterial vaginosis, vulvovaginal candidiasis.

Bacterial

BVAB2,3 (Bacterial vaginosis-associated bacteria 2,3);
Mobiluncus spp
Chlamydia trachomatis
Fannyhessea (Atopobium) vaginae
Gardnerella vaginalis

Megasphaera (types 1, 2)
Mycoplasma genitalium
Neisseria gonorrhoeae

Protozoal

Trichomonas vaginalis

Fungal

Candida albicans, parapsilosis, tropicalis, dubliniensis
Candida glabrata (Nakaseomyces glabratus)
Candida krusei (Pichia kudriavzevii)

Chlamydia/Gonorrhea/Trichomonas (CGT) **CGTWT**

SPECIMEN TYPES: Urine (voided) **SPECIMEN TYPES:** Vaginal, Rectal

COMMON SIGNS & SYMPTOMS: High risk heterosexual behavior, high risk homosexual behavior, or suspected exposure to a sexually transmitted infection.

Bacterial

Chlamydia trachomatis
Neisseria gonorrhoeae

Protozoal

Trichomonas vaginalis

Genital Lesion **GENL**

SPECIMEN TYPES: Genital Ulcer/Lesion, Ulcer/Lesion

COMMON SIGNS & SYMPTOMS: Genital ulcer or lesion.

Bacterial

Chlamydia trachomatis
Haemophilus ducreyi (Chancroid)
Treponema pallidum (Syphilis)

Viral

Herpes simplex virus 1
Herpes simplex virus 2
Mpox (Monkeypox)

IDENTIFYING INFECTIONS

Syndromic Menu Ordering Reference Guide

Pediatrics



WHITE

Specialty

Diarrheal Infection **DI**

SPECIMEN TYPES: Rectal (fecal), Stool

COMMON SIGNS & SYMPTOMS: Infectious gastroenteritis with diarrhea, significant fever, and/or bloody stool.

Bacterial

Campylobacter coli, jejuni, upsaliensis
Enteroinvasive E. coli (EIEC) / Shigella spp
Enteropathogenic E. coli (EPEC)
Enterotoxigenic E. coli (ETEC)
Salmonella

Shiga toxin-producing E. coli (STEC)
Shiga toxin-producing E. coli O157 (STEC O157)
Vibrio cholerae, parahaemolyticus, vulnificus
Yersinia enterocolitica

Viral

Adenovirus F40/41
Astrovirus
Norovirus (Genogroup 1, 2)
Rotavirus A
Sapovirus

ADD-ONS: Panel codes include pathogens above and additional pathogens listed below. Order using only the code below; it includes the base panel and the additional pathogens listed.

DICDIF **DI + C. Diff** Clostridioides difficile (toxins A, B)

DIPAR **DI + Parasites** Cryptosporidium, Cyclospora cayetanensis, Dientamoeba fragilis, Entamoeba histolytica, Giardia lamblia (intestinalis), Microsporidium (Enterocytozoon bienewisi, Encephalitozoon intestinalis)

Wound **WUN**

SWAB SITES: Wound Swabs (all locations)

COMMON SIGNS & SYMPTOMS: Recent wound from trauma with erythema, edema, heat, purulent exudate, and/or pain.

Bacterial

Bacteroides fragilis, Phocaeicola vulgatus
Enterobacter cloacae complex, Klebsiella (Enterobacter) aerogenes
Escherichia coli
Klebsiella pneumoniae, oxytoca
Proteus mirabilis, vulgaris
Pseudomonas aeruginosa
Serratia marcescens
Staphylococcus aureus
Streptococcus agalactiae (Group B Strep)
Streptococcus pyogenes (Group A Strep)

Vibrio cholerae, parahaemolyticus, vulnificus

Viral

Herpes simplex virus 1
Herpes simplex virus 2
Varicella zoster virus (Human Herpesvirus 3, VZV)

Fungal

Candida albicans, glabrata, parapsilosis, tropicalis

Resistance

ACT, MIR, FOX, ACC Groups
CTX-M Groups
dfr (A1, A5), sul (1, 2)
ermA, B, C; mefA
IMP, NDM, VIM Groups
mecA (Methicillin Resistance)
OXA Groups
qnrA, qnrB
SHV, KPC Groups
tet B, tet M
VanA, VanB

Blistering Lesion **BL**

SWAB SITES: Wound Swabs (all locations)

COMMON SIGNS & SYMPTOMS: Fluid-filled lesions on the skin.

Bacterial

Staphylococcus aureus
Streptococcus pyogenes (Group A Strep)

Viral

Herpes simplex virus 1
Herpes simplex virus 2
Varicella-Zoster Virus

Resistance

mecA (Methicillin Resistance)

Neonatal Conjunctivitis **NEOEYE**

SWAB SITES: External Eye

COMMON SIGNS & SYMPTOMS: Redness, swelling, and pus-like discharge from the eyes and concern of STI transmission during childbirth.

Bacterial

Chlamydia trachomatis
Neisseria gonorrhoeae

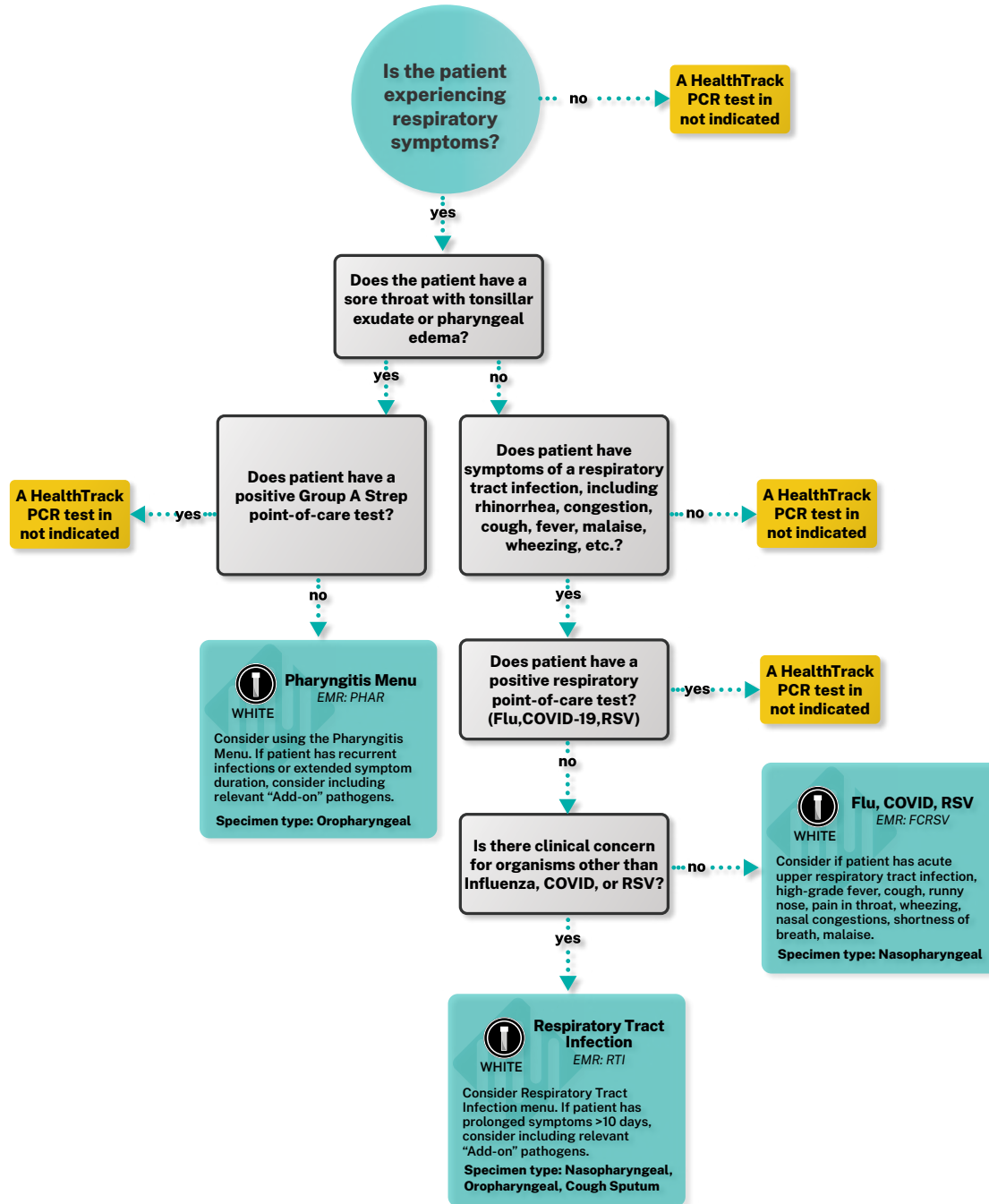
Viral

Herpes simplex virus 1
Herpes simplex virus 2

RESPIRATORY INFECTION

Menu Selection Guide

Pediatrics



CDC Antibiotic Treatment Recommendations

Pediatric Outpatient¹

Acute sinusitis: Watchful waiting for up to 3 days may be offered for children with acute bacterial sinusitis with persistent symptoms. Antibiotic therapy can be considered for children with acute bacterial sinusitis with severe or worsening disease.

¹Ellen R. Wald, Kimberly E. Applegate, Clay Bordley, David H. Darrow, Mary P. Glode, S. Michael Marcy, Carrie E. Nelson, Richard M. Rosenfeld, Nader Shaikh, Michael J. Smith, Paul V. Williams, Stuart T. Weinberg; Clinical Practice Guideline for the Diagnosis and Management of Acute Bacterial Sinusitis in Children Aged 1 to 18 Years. Pediatrics July 2013; 132 (1): e262–e280. 10.1542/peds.2013-1071

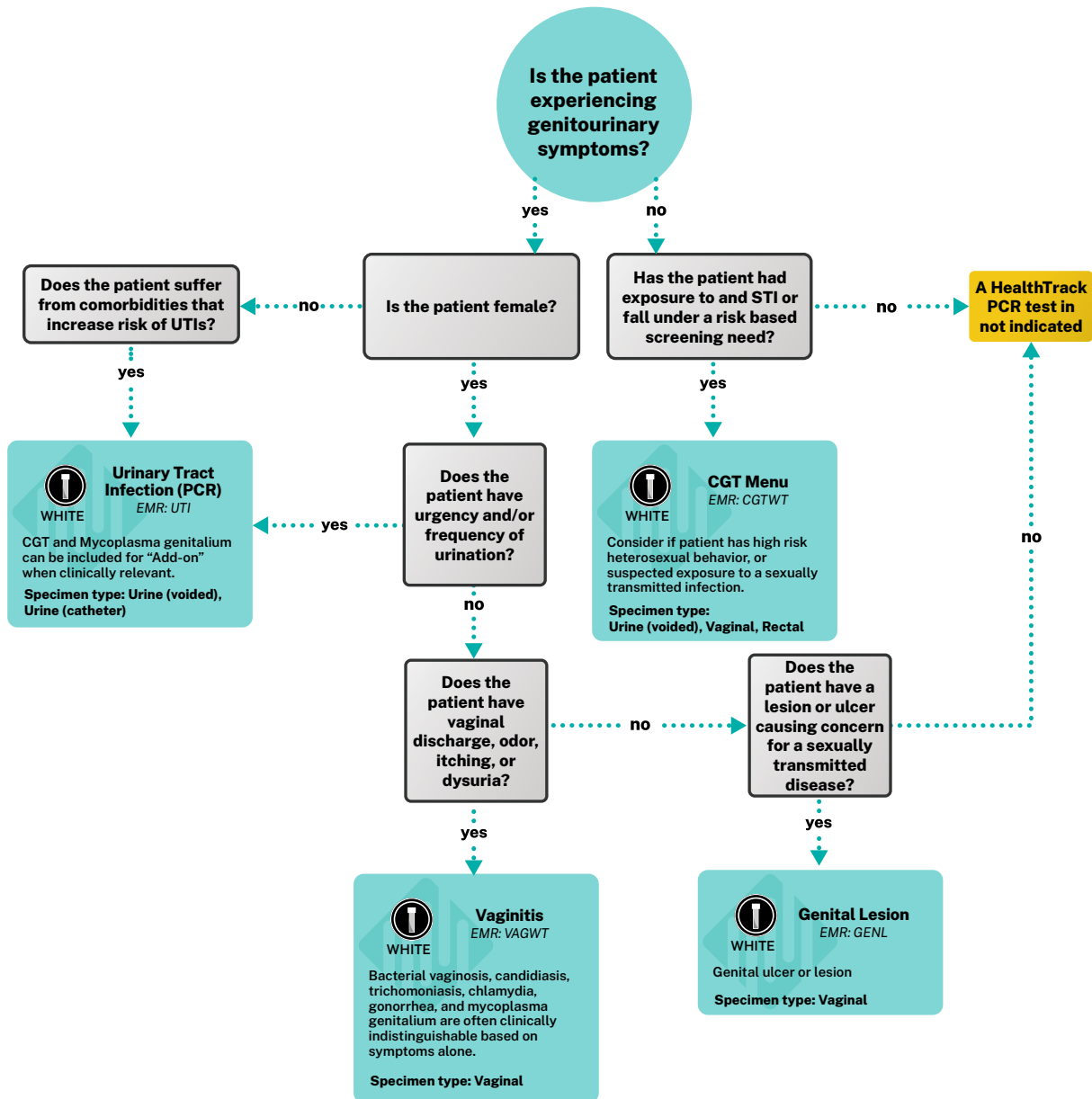
These are recommendations only. Providers should always use their best clinical judgement.



GENITOURINARY INFECTION

Menu Selection Guide

Pediatrics



Interpreting Urinalysis Results¹

**Leukocyte Esterase
Nitrite**

Sensitivity - 79%
Sensitivity - 49%

Specificity - 87%
Specificity - 98%

How to select the right sample type for your patient:

Female Patients

When symptoms are predominantly localized to the urinary tract, a urine specimen is the preferred sample type for pathogen detection.

It is important to note that HealthTrack molecular testing is less prone to sample contamination due to the sample media present in the collection tube. This means contamination is less likely to impact results regardless if you choose to do a clean or dirty catch.

If symptoms are predominantly associated with the genital tract, a vaginal swab is the preferred type for accurate pathogen detection.

Male Patients

Whether testing for a UTI or STI, the first 10-15mLs of urine is sufficient to detect both infection types.

These are recommendations only. Providers should always use their best clinical judgement.

1. Kaplan, D., Yates, J., Takacs, E., Badalato, G., & Kaufmann, M. (2020, April). Medical Student Curriculum: Adult UTI. American Urological Association. <https://www.auanet.org/meetings-and-education/for-medical-students/medical-students-curriculum/adult-uti>

Want Faster Results? Here are some reminders!

Use the Right Device:

Always use the correct collection tubes and containers provided for each specific test.



White Top

USE FOR:

Respiratory, Genitourinary,
and all Specialty menus

Sample Ordering Reminders

Order Correctly

- ▶ One sample tube per menu ordered
- ▶ Click send on the order

Label Clearly

- ▶ Patient first and last name + date of birth
- ▶ Include collection site on all tubes

Seal and Store

- ▶ Secure lid tightly
- ▶ Seal specimen bag
- ▶ Include necessary paperwork
- ▶ Samples are stable at room temperature for 7 days

Sample Pick-Up

- ▶ Place all samples in one shipping bag
- ▶ Seal bag completely



Do NOT apply labels or markings across the cap. The label must wrap fully around the tube and overlap itself, wrapped tightly and smoothed securely onto the tube with no loose edge, tail or wing exposed.

RightTrack Report by HEALTH TRACK

CLIA# 18D2319534
2425 Universal Way
Louisville, KY 40219

Lab Director
John Doe, MD

PATIENT INFORMATION

Name: Patient Sample
DOB: 01/01/1975
Sex at Birth: M
Address: 123 Resident Street
City, State, Zip
Phone: 123.456.7890
Race:
Ethnicity:

SPECIMEN INFORMATION

Lab Accession Number: 13044771
Menu: Bronchitis
Specimen Type: Respiratory Tract
Date Collected: 03/15/2026
Date Received by Lab: 03/16/2026
Date Reported: 03/16/2026
Cross Reference #:

FACILITY INFORMATION

Facility Name: Main Street Urgent Care
Provider Name: Doctor Test, MD
NPI: 10000000
Address: 123 Main Street
City, State, Zip
Phone: 555.555.5555

PAGE 1 OF 2

TEST RESULTS

	TARGETS	DETECTION STATUS	MICROBIAL LOAD
ORGANISMS	Mycoplasma pneumoniae	Detected	High

CONSIDERATIONS FOR THERAPY

The information below lists agents that may be considered for therapy based on detected organisms and/or resistance genes. This information does not constitute medical advice. Clinical management and treatment decisions remain the sole responsibility of the ordering healthcare provider.

(P) Primary therapy consideration (A) Alternative therapy consideration (N/A) Not Applicable

CLASS OF ANTIMICROBIAL AGENTS	ANTIMICROBIAL AGENTS (po/IV)	
Fluoroquinolones	Delafloxacin (po/IV)	A
	Doxycycline (po/IV)	P
	Minocycline (po/IV)	P
Tetracyclines	Omadacycline (po/IV)	A
	Tetracycline (po)	N/A

TARGETS TESTED

Targets detected are bolded for reference

BACTERIAL

- Adenovirus
- Chlamydia pneumoniae
- Coronaviruses (229E, NL63, HKU1, OC43)
- Enterovirus D68
- Human metapneumovirus
- Influenza virus A, B
- Parainfluenza virus (PIV types 1, 2, 3, 4)
- Respiratory syncytial virus
- Rhinovirus/Enterovirus
- Bordetella spp (pertussis, parapertussis, bronchispetica)
- Haemophilus influenzae
- Moraxella catarrhalis
- **Mycoplasma pneumoniae**
- Streptococcus pneumoniae

Detected pathogens are listed here.

Microbial loads for applicable bacterial pathogens or CFU equivalence for UTI pathogens will appear here.

A new summary table lists antimicrobial options based on relevant outpatient guidelines, assisting you in quickly and efficiently assessing effective therapy and their alternatives based on the detected pathogen.

Our therapy considerations table now includes clear, simple definitions all based on outpatient treatment guidelines

P : primary therapy consideration

A : alternative therapy consideration activity

N/A: therapy is not applicable to the detected pathogen

All organisms and resistance genes that were tested are listed here, the latter categorized by pathogen type – bacteria, virus, fungus, protozoa.

The pathogens and resistance genes that were detected are bolded for easy reference.

Have Questions Regarding testing?

The HealthTrack Medical Science Liaison team is here to help!



Clinical Expert Line: 940-383-2223

- ▶ Menu education
- ▶ Patient Report Reviews
- ▶ Specific Pathogen Questions
- ▶ Information on Relevant Guidelines
- ▶ Research Questions
- ▶ And much more!

HEALTH TRACK

Customer Care: 866-287-3218
client.relations@HealthTrackRx.com

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