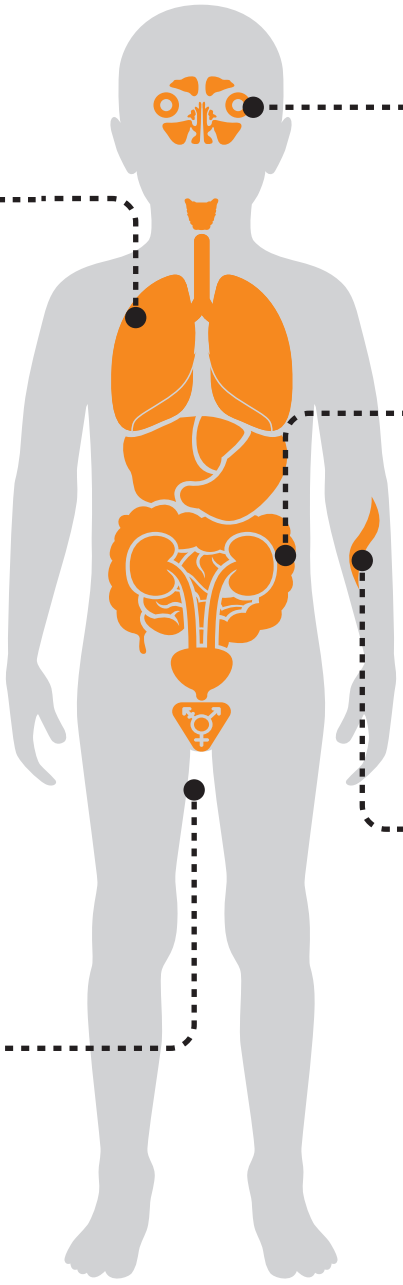
HEALTH TRACK

PEDIATRICS

May 2026

SYNDROMIC MENU

HEALTH TRACK



Respiratory Tract Infection

EMR CODE: RTI

ADD-ONS
RTI – Persistent
EMR CODE: RTIPROAO
RTI – Atypical Pharyngitis
EMR CODE: RTITHRAO

Pharyngitis

EMR CODE: PHAR

ADD-ONS
Pharyngitis – Persistent
EMR CODE: PHARRECAO

Flu, COVID, RSV

EMR CODE: FCRSV

Measles

EMR CODE: MESLV

Urinary Tract Infection

EMR CODE: UTI

ADD-ONS
UTI + STI Combined
EMR CODE: UTISTI
UTI + STI – Atypical (Mycoplasma/Ureaplasma)
EMR CODE: UTISTIMU

Vaginitis

EMR CODE: VAGWT

ADD-ONS
Vaginitis – Recurrent
EMR CODE: VAGWTAO

Chlamydia/Gonorrhea/Trichomonas (CGT)

EMR CODE: CGTWT

Urethritis

EMR CODE: URE

Genital Lesion

EMR CODE: GENL

Neonatal Conjunctivitis

EMR CODE: NEOEYE

Diarrheal Infection

EMR CODE: DI

ADD-ONS
DI + C.diff
EMR CODE: DICDIF
DI + Parasites
EMR CODE: DIPAR

Wound

EMR CODE: WUN

Blistering Lesion

EMR CODE: BL

WHITE

Respiratory, Genitourinary, and Specialty

HEALTHTRACK

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.***

May 2026

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, parapertussis, 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

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

Flu,COVID,RSV FCRSV

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

May 2026

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, lugdunensis
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 (A[1], A[5]), 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)

May 2026

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 bieneusi, 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*

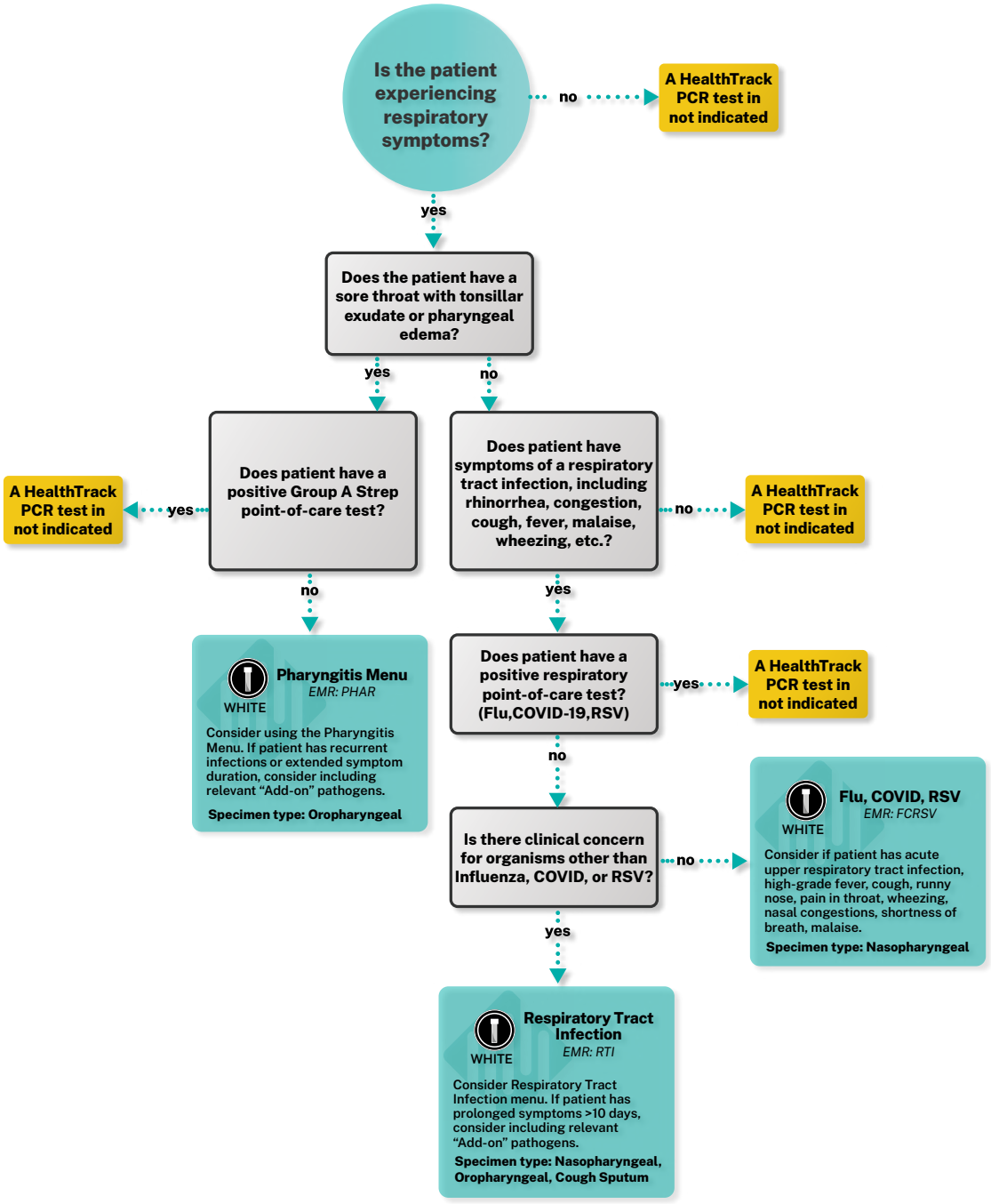
COMMON SIGNS & SYMPTOMS: Redness, swelling, and pus-like discharge from the eyes and concern of STI transmission during childbirth.

Bacterial
Chlamydia trachomatis
Neisseria gonorrhoeae

Viral
Herpes simplex virus 1
Herpes simplex virus 2

RESPIRATORY INFECTION
Menu Selection Guide
Pediatrics

May 2026



CDC Antibiotic Treatment Recommendations

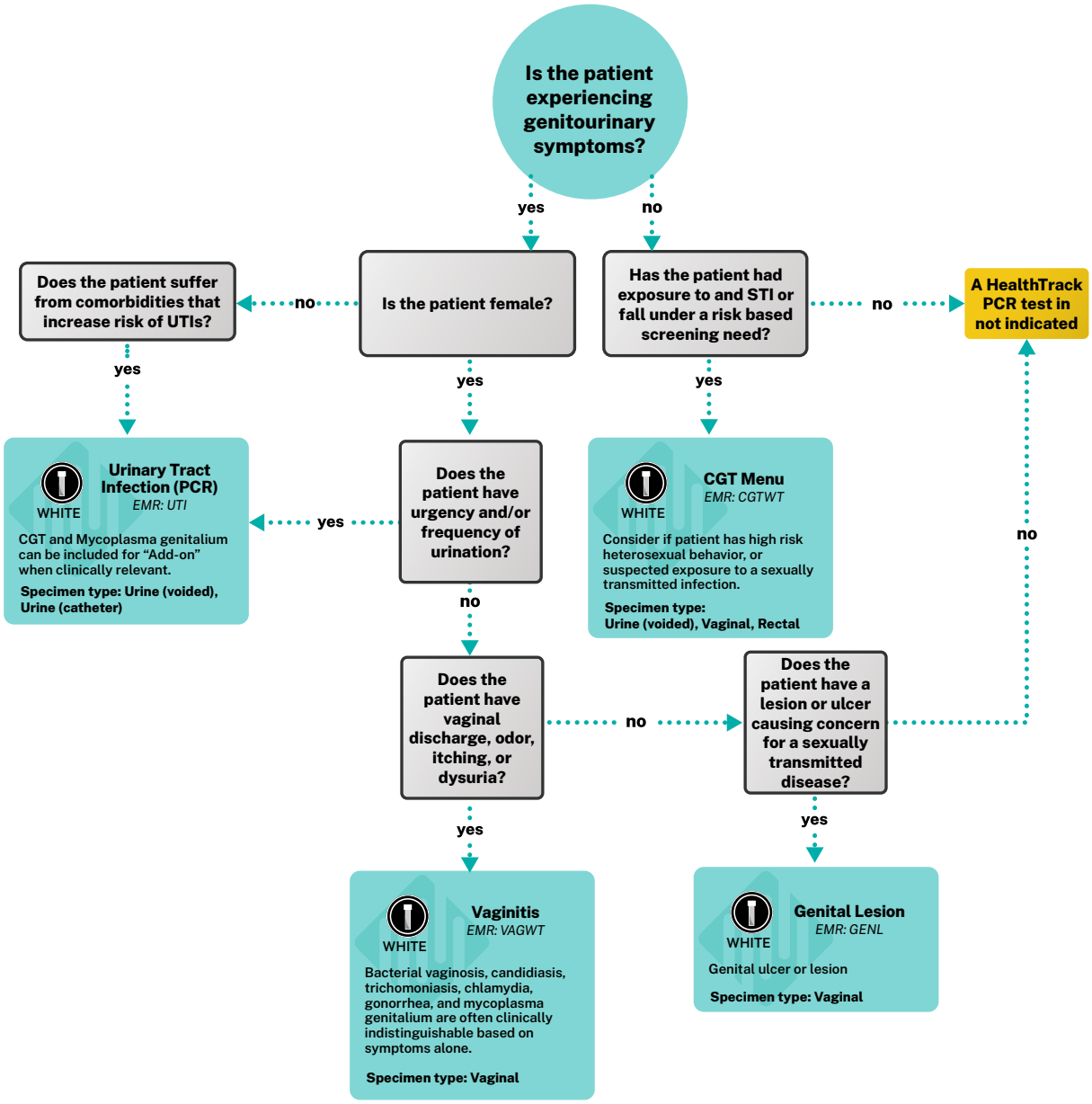
Pediatric Outpatient[1]

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.

[1]Ellen 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 Results[1]			
	Leukocyte Esterase	Sensitivity - 79%	Specificity - 87%
	Nitrite	Sensitivity - 49%	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

Collection Guide
Pediatrics

HEALTHTRACK

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

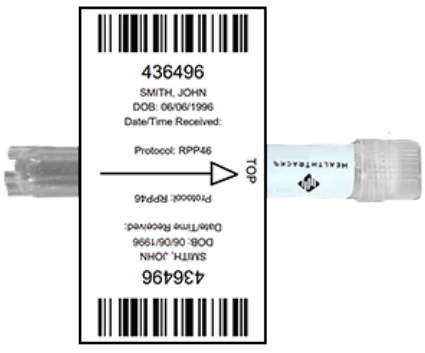
Sample Ordering Reminders

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*

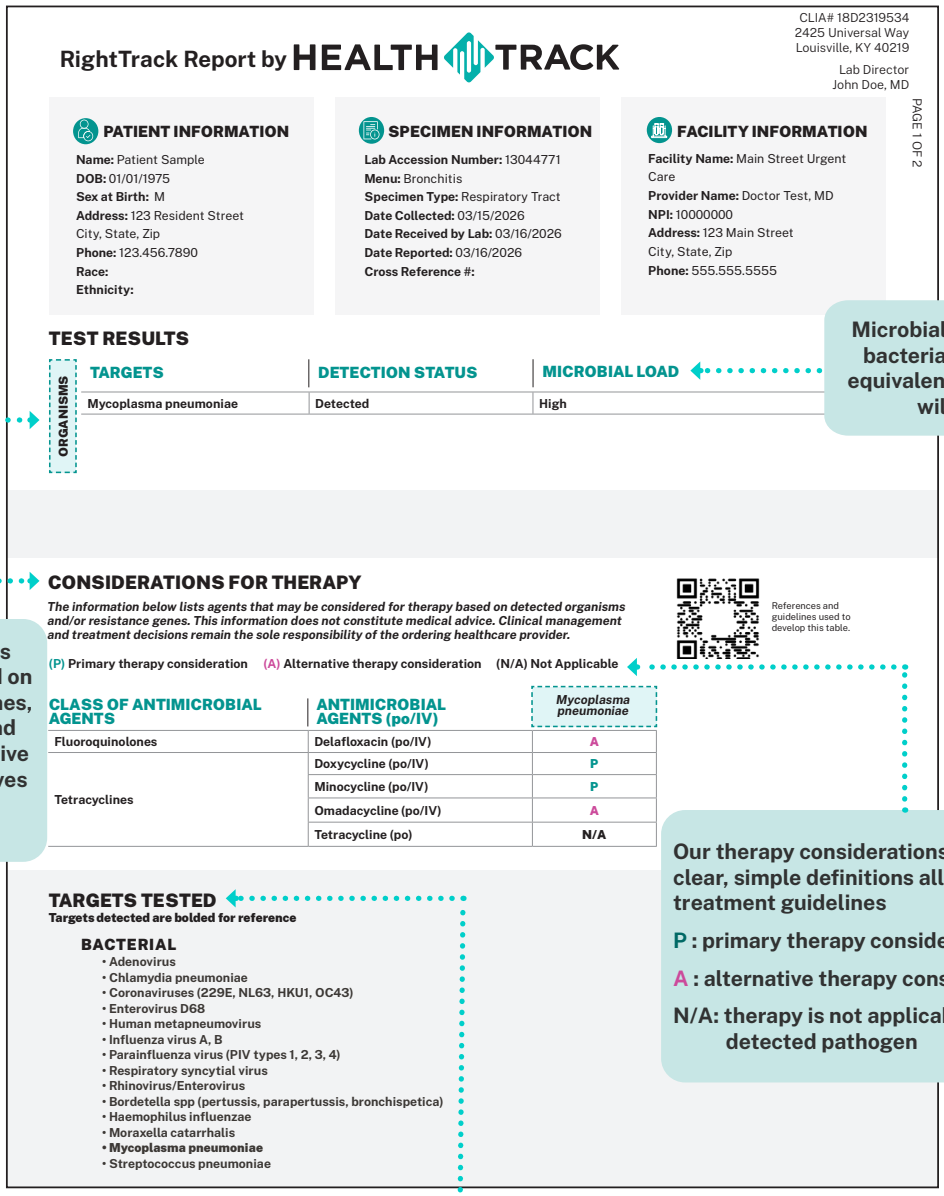
Sample Pick-Up
- *Place all samples in one shipping bag*
- *Seal bag completely*



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

HEALTH TRACK



RightTrack Report by HEALTH TRACK

CLIA# 18D2319534
2425 Universal Way
Louisville, KY 40219

Lab Director
John Doe, MD

PAGE 1 OF 2

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

TEST RESULTS

ORGANISMS

TARGETS	DETECTION STATUS	MICROBIAL LOAD
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.

References and guidelines used to develop this table.

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

CLASS OF ANTIMICROBIAL AGENTS	ANTIMICROBIAL AGENTS (po/IV)	*Mycoplasma pneumoniae*
Fluoroquinolones	Delafloxacin (po/IV)	A
Tetracyclines	Doxycycline (po/IV)	P
	Minocycline (po/IV)	P
	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.

RightTrack Report by HEALTHTRACK

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2425 Universal Way
Louisville, KY 40219

Lab Director
John Doe, MD

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Race:
Ethnicity:

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TARGETS TESTED

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- **Mycoplasma pneumoniae**
- Streptococcus pneumoniae

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!

HEALTHTRACK

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

Peds_Updates_V0526_V3

Getting People Healthier Faster.
HealthTrackRx.com