

MOVING TO ZERO

IMPLEMENTING DISEASE MANAGEMENT GUIDELINES

Leverage recommended testing guidelines to reduce future transmission in your community while better controlling downstream costs within your health ecosystem.

HEPATITIS C:

- CDC estimates that there are roughly 3.2 million people in the U.S. infected with hepatitis C (HCV) and surveys have demonstrated that up to 75% of those infected do not know that they are infected¹
- U.S. Preventive Services Task Force recommends screening for HCV in persons at high risk for infection and one time screening for adults born between 1945 and 1965²
- One time screening program could identify 800,000 people¹

HIV:

- HIV infection affects more than 1.1 million people in the U.S. with nearly 40% of new infections being transmitted by people who are living with undiagnosed HIV³
- The USPSTF recommends that clinicians screen for HIV infection in adolescents and adults aged 15 to 65 years, patients at increased risk and pregnant women⁴
- The CDC recommends to screen patients at high risk at least annually with a FDA approved antigen/antibody combination immunoassay test that detects HIV-1 and HIV-2 antibodies and HIV-1 p24 antigen^{5,6}

SYPHILIS:

- The number of primary and secondary reported syphilis cases in the U.S. has increased 66.7% from 2011 to 2015⁷
- USPTF recommends screening for syphilis infection in pregnant women and in persons who are at increased risk for infection⁸
- In recent years, the reverse algorithm has become increasingly utilized compared to the traditional algorithm due to reduced screening labor costs and improved clinical performance^{9,10}

SEPSIS:

- Sepsis is the #1 cost of hospitalization in the U.S.¹¹
- In the worst cases, patients with sepsis progress to septic shock where mortality rates increase 8% every hour that treatment with antimicrobials is delayed¹²
- Studies have demonstrated that Procalcitonin is a more accurate diagnostic parameter for sepsis, a better predictor of mortality and a more reliable marker than other biomarkers¹³

JOINT COMMISSION PROVISION OF CARE REQUIREMENTS¹⁴

For organizations that provide obstetric services, the status of pregnant women must be documented for the following diseases or facilities will be mandated to test:

- HIV
- Hepatitis B
- Group B streptococcus (GBS)
- Syphilis

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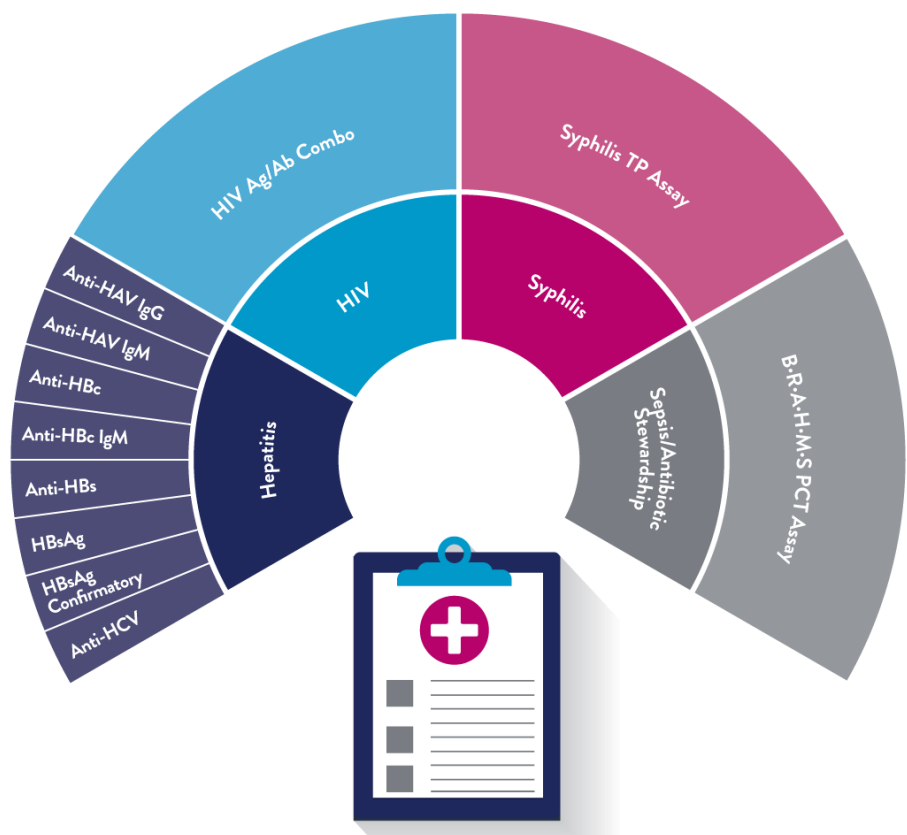
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Abbott ARCHITECT Menu for Disease Management Guidelines¹⁵⁻²⁵



Our global surveillance program has been in place for more than 20 years and scours the world looking for weird and wonderful viruses.²⁶

1. Center for Disease Control and Prevention. Hepatitis C: Expansion of Testing Recommendations, 2012. CDC Fact Sheet 2012. 2. <https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/hepatitis-c-screening>
3. Center for Disease Control and Prevention. HIV Testing. <https://www.cdc.gov/hiv/testing/index.html>. Accessed 25 June 2018. 4. <https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/human-immunodeficiency-virus-hiv-infection-screening>
5. <https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/human-immunodeficiency-virus-hiv-infection-screening#consider> 6. Center for Disease Control and Prevention. Laboratory Testing for the Diagnosis of HIV Infection: updated recommendations. <https://stacks.cdc.gov/view/cdc/23447>. Accessed 25 June 2018. 7. Center for Disease Control and Prevention. Syphilis. <https://www.cdc.gov/std/stats15/syphilis.htm>. Accessed: 10 Feb 2017. 8. United States Preventive Task Force. Syphilis Infection: Screening. <https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/syphilis-infection-screening>. Accessed 25 June 2018. 9. Theel Eli. Serologic Testing for Syphilis. Mayo Clinic Comparison of the Traditional and Reverse Screening Algorithms. <http://www.arlingtonscientific.com/assets/mayo-serologic-testing-for-syphilis.pdf>. Accessed: 10 Feb 2017. 10. Journal of Clinical Microbiology. Point-Counterpoint: It Is Time To Use Treponema-Specific Antibody Screening Tests for Diagnosis of Syphilis. <http://jcm.asm.org/content/50/1/2.full>. Accessed: 10 Feb 2017. 11. Torio, C, et al. National Inpatient Hospital Costs: The Most Expensive Conditions by Payer, 2013. Healthcare Cost and Utilization Project. <https://www.hcup-us.ahrq.gov/reports/statbriefs/sb204-Most-Expensive-Hospital-Conditions.pdf>. Accessed 21 June 2018. 12. Kumar, A, et al. Duration of hypotension before initiation of effective antimicrobial therapy is the critical determinant of survival in human septic shock*. Crit Care Med 2006 Vol. 34, No. 6. 13. Shiferaw, et al. The Role of Procalcitonin as a Biomarker in Sepsis. J Infect Dis Epidemiology. 2016;2:006 Vol 2. 14. Provision of Care Requirements for Maternal Status Assessment and Documentation. Joint Commission Perspectives; Jan 2018, Vol 38. 15. ARCHITECT Anti-HCV Package Insert G6-2769/R06 16. ARCHITECT HBsAg Package Insert G4-2850/R03 17. ARCHITECT HBsAg Confirmatory Package Insert G3-4080/R02 18. ARCHITECT AUSAB Package Insert G8-8305/R02 19. ARCHITECT CORE Package Insert G4-7984/R05 20. ARCHITECT CORE-M Package Insert G2-6110/R05 21. ARCHITECT HAVAB-M Package Insert G6-5290/R05 22. ARCHITECT HAVAB-G Package Insert G4-5668/R03 23. ARCHITECT HIV Ag/Ab Combo Package Insert G2-6108/R02 24. ARCHITECT Syphilis Package Insert G5-6810/R01. 25. ARCHITECT B-R-A-H-M-S PCT Package Insert G1-0601/R01. 26. Paxton, Anne. HBsAg tests, mutation in public health spotlight. College of American Pathologists. CAP Today; April 1st, 2018.

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