

# Group B Strep Diagnostics: Doing better

	NanoLogix	Current Protocol	
	N-Assay	PCR	Traditional Culture
<b>30 Min.</b>	<b>10<sup>5</sup></b>	<b>N/A</b>	<b>N/A</b>
<b>Overnight</b>	<b>18hr: 10<sup>-1</sup></b>	<b>10<sup>2</sup></b>	<b>N/A (24-48hrs): 10<sup>5</sup></b>

*Want to learn more about the Future of rapid diagnostic testing for GBS?*

**Location: Poster Hall**

**Date: Tuesday, May 20<sup>th</sup>**

**Time: 8:00- 3:00pm (Poster on display)**

*...12:45-1:30pm, Jonathan Faro, MD, PhD (Medical Director of the OB/GYN Infectious Disease Research Center, Woman's Hospital of Texas) will be on site to answer questions*

**...CDC Guidelines 2010:** *“GBS disease remains the leading infectious cause of morbidity and mortality among newborns in the United States”*

**...CDC Guidelines 2010: Future of GBS Prevention:** *“To be clinically useful in the intrapartum period, a screening test for GBS should consist of a simple bedside kit that enables labor and delivery staff to perform a test, have a turn-around time of <30 minutes”*

**...Faro, et. al., American Journal Perinatology 2011:** *“There has been significant interest in developing a rapid and reliable method of detecting GBS colonization. A truly rapid test to detect GBS that can be performed within hours on a single sample and yields highly sensitive and specific results is needed to assist in determining if antibiotic therapy is indicated”*

**...Caliendo AM, Gilbert DN, Ginocchio CC, et al, Clinical Infectious Disease 2013:** *“the ideal diagnostic test is accurate, relies on heat-stable reagents with an extended shelf-life; is easily portable; requires minimal technical skills; is rapid (<1hr), sensitive, and specific; does not require being run in large batches; cost effective; and is suitable for use in a board range of clinical samples”*

