



Background

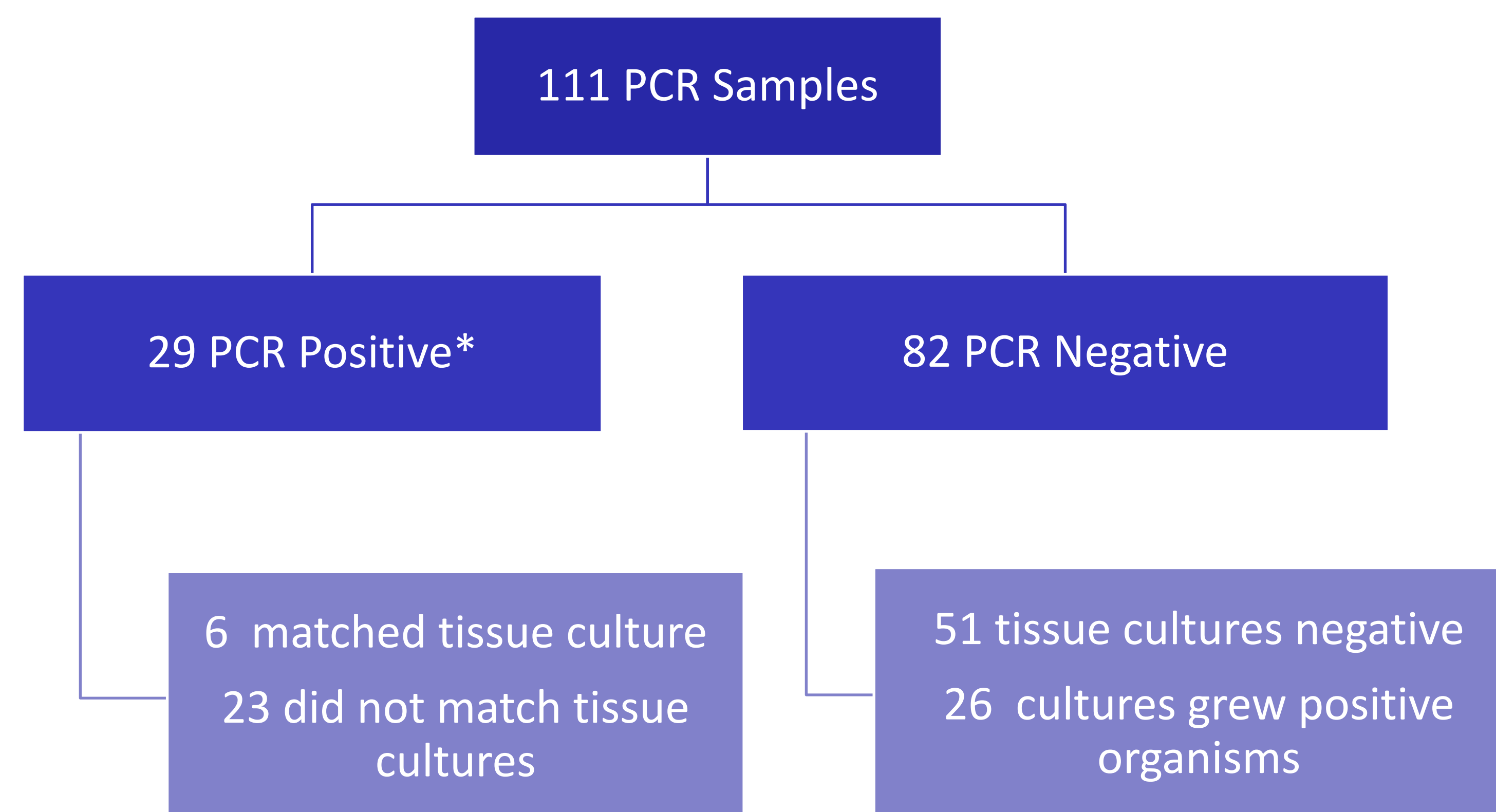
- Universal PCR/Next Generation Sequencing (uPCR/NGS) is a molecular technology in which DNA/RNA of the cultured organism is isolated and amplified using broad range primers and conventional PCR conditions
- Amplified products are sequenced, and the organism/s are identified based on the sequence data
- Molecular based testing is used as a diagnostic modality due to its high sensitivity
- Results must always be interpreted in clinical context

Methods

- Retrospective, observational study
- All consecutive uPCR/NGS tests obtained from at Henry Ford Hospital from 2016-2021 from non-blood fluids and tissue samples
 - Bacterial
 - 16S ribosomal RNA gene sequencing
 - Fungal
 - 26S and 28S ribosomal RNA gene sequencing
 - Acid Fast Bacilli
 - 16S ribosomal RNA gene sequencing
- Concurrent tissue cultures from day of uPCR/NGS were obtained
- Outcomes included if uPCR/NGS testing resulted in a change of choice or duration of antibiotic therapy



Results



- Abscess/Wound
- Synovial Fluid
- Bone
- Brain Tissue
- Cardiac Valve Tissue
- Other

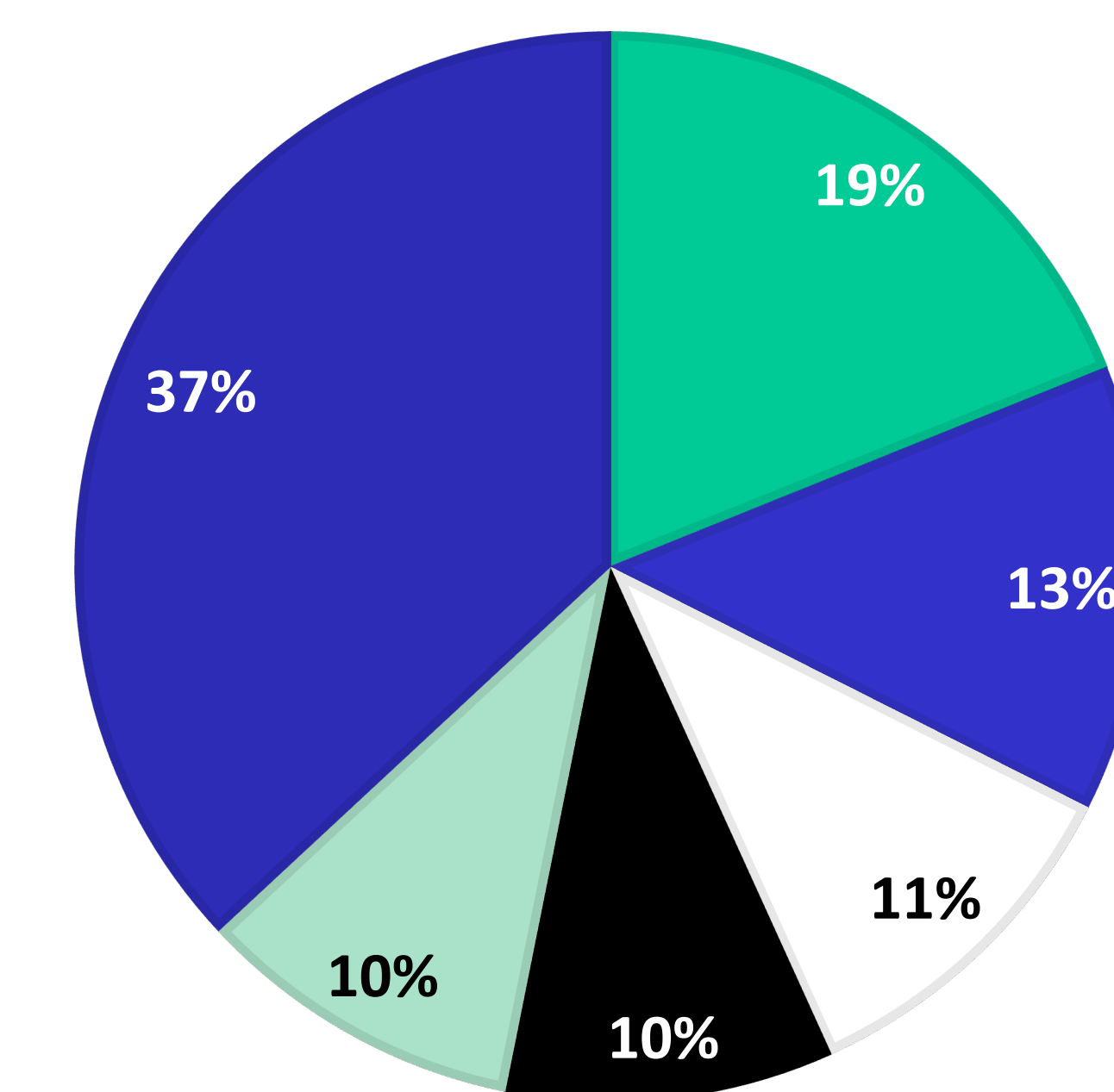


Figure 1. Most Common Sample Types

Table 2. PCR Positive Results

Result	Total Samples Positive
<i>Mycobacterium tuberculosis complex</i>	5
Sample Type: Abscess/wound	2*
Hepatic Tissue	1
Synovial Fluid	1
Lymph node	1
<i>Streptococcus intermedius</i>	4
Sample Type: Brain Tissue	3
Pleural Tissue	1
<i>Corynebacterium species</i>	2**
Sample Type: Abscess/wound	2
<i>Streptococcus pyogenes</i>	2
Sample Type: Synovial Fluid	1
Pleural Fluid	1
<i>Aspergillus fumigatus</i>	2
Sample Type: Brain Tissue	2
<i>Mycobacterium chimera</i>	1**
Sample Type: Pleural Tissue	1
<i>Pseudomonas aeruginosa</i>	1**
Sample Type: Brain Tissue	1

*1 Sample matched PCR cultures, 1 sample was a false positive result

** Sample matched PCR cultures

Other positive results with 1 positive uPCR/NGS result: *Alternaria sp.*, *Curvularia sp.*, *C. acnes*, *H. parainfluenzae*, *Histoplasma sp.*, *M. avium*, *M. hominus*, *S. warneri*, *S. lugdunensis*, *S. epidermidis*, *S. mitis*, *S. anginosus*

Table 1. Change in Management by Sample Type

Sample Type	Change in Management
Overall Change in Management	16.2% (18/111)
Cardiac Valve Tissue	45.5% (5/11)
Cerebrospinal Fluid	42.8% (3/7)
Brain Tissue	36.4% (4/11)
Lymph Node Tissue	25% (1/4)
Synovial Fluid	20% (3/15)
Bone	8.3% (1/12)
Abscess/Wound	4.8% (1/21)

* All other sample types including skin, non-valvular cardiac tissue, ocular samples, pleural tissue, pleural fluid, peritoneal fluid, testicular tissue, and hepatic tissue resulted in no change in management

Conclusions

- Appropriate diagnostic stewardship is needed when ordering uPCR/NGS
- Useful test in culture negative samples, particularly when concerned for *Mycobacterium tuberculosis*
- Utility when used in certain sample types, along with a high index of suspicion for infection