

Simplify gastroenteritis testing with enhanced accuracy and sensitivity.¹⁻⁴

The BD MAX™ Enteric solutions offer targeted syndromic panels that provide timely and accurate detection of the most common bacterial, viral and parasitic pathogens responsible for infectious diarrhea.³⁻⁵



"We chose the BD MAX™ Enteric Bacterial Panel on the BD MAX™ System because of its syndromic and operational advantages for regional stool pathogen detection."⁶

Are you optimizing your gastroenteritis testing?

1.7 billion cases globally

of childhood diarrheal disease⁷

Diarrheal disease is the

2nd leading cause of death

in children under 5 years of age⁷

Globally, norovirus resulted in a total of

\$4.2 billion

in direct health system costs⁸

Gastrointestinal infections challenge the healthcare system, creating a major burden for the hospital, both operationally and financially.

Traditional diagnostic methods such as culture, microscopy and immunoassays come with limitations that potentially impact laboratory workflow, budget, clinical decision-making and patient outcomes:

- Delayed results³
- Difficulty growing certain organisms on culture media⁹
- False negative results due to subjective interpretation of microscopy and poor sensitivity of immunoassays¹⁰

This could lead to less effective clinical decision-making, inappropriate antibiotic treatment, unnecessary patient isolation and extended hospital stays.³

Transitioning from culture to molecular testing can significantly improve the sensitivity, specificity, time to results and total cost of your laboratory's gastroenteritis testing.^{2,6}



The BD MAX™ Enteric solutions allow for testing of a specific class of enteric pathogens following IDSA guideline-based patient exposure, risk factors and clinical presentations

IDSA Guidelines reinforce the importance of determining a specific diagnosis which can benefit a patient with infectious diarrhea by:¹¹

- Directing appropriate therapy
- Allowing the judicious use of antimicrobial agents
- Improving patient satisfaction

Patient exposure Clinical presentation	Foodborne or waterborne	MILK														
	Foodborne outbreak of diarrheal illness	Consumption of unpasteurized milk or dairy products	Consumption of raw or undercooked meat (beef/pork/poultry) or chitterlings	Consumption of fruits, juices or vegetables	Consumption of undercooked eggs	Consumption of raw shellfish	Swimming in or drinking treated water or untreated fresh water	Healthcare/long-term care facilities	Recent antimicrobial therapy	Child Care facilities	Travel to resource-challenged countries	Immunocompromised including AIDS	Certain sexual practices	Contact with animals		
 Persistent or chronic diarrhea	All 4 apply BD MAX™ Enteric Parasite Panel	BD MAX™ Enteric Parasite Panel					BD MAX™ Enteric Parasite Panel	BD MAX™ Enteric Parasite Panel			BD MAX™ Enteric Parasite Panel	BD MAX™ Enteric Parasite Panel			BD MAX™ Enteric Parasite Panel	BD MAX™ Enteric Parasite Panel
 Fever/visible blood in stool/abdominal pain with bloody stools/persistent abdominal pain and fever	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel	BD MAX™ Enteric Bacterial Panel
 Vomiting and nonbloody diarrhea lasting 2-3 days or less	BD MAX™ Extended Enteric Bacterial Panel	BD MAX™ Extended Enteric Bacterial Panel	BD MAX™ Extended Enteric Bacterial Panel		BD MAX™ Extended Enteric Bacterial Panel	BD MAX™ Extended Enteric Bacterial Panel		BD MAX™ Cdiff	BD MAX™ Cdiff		BD MAX™ Extended Enteric Bacterial Panel				BD MAX™ Extended Enteric Bacterial Panel	
	BD MAX™ Enteric Viral Panel		BD MAX™ Enteric Viral Panel		BD MAX™ Enteric Viral Panel		BD MAX™ Enteric Viral Panel	BD MAX™ Enteric Viral Panel	BD MAX™ Enteric Viral Panel	BD MAX™ Enteric Viral Panel					BD MAX™ Enteric Viral Panel	

The BD MAX™ Enteric solutions allow for the rapid detection of the most common pathogens responsible of infectious diarrhea

- Provide results for up to 24 specimens in 3 hours³
- Decrease hands-on time for laboratory technicians versus traditional methods²
- Implementation of timely and accurate detection of organisms can improve patient management and antimicrobial stewardship³

**BD MAX™
Enteric Bacterial Panel**

Among reported outbreaks of bacterial diarrhea, four of the major pathogens isolated are *Campylobacter* spp., *Salmonella* spp., *Shigella* spp., and Shiga toxin producing *E. coli*. Of these, non-typhoidal *Salmonella* species are the leading cause of hospitalization and death among food borne bacteria.⁵

**BD MAX™
Extended Enteric Bacterial Panel**

Some pathogens are seasonally and regionally implicated in bacterial gastroenteritis. Therefore, an extended panel is also available which will include the above-mentioned bacterial targets plus *Vibrio*, *Yersinia*, **enterotoxigenic *E. coli*** and *Plesiomonas*. This test should be ordered with Enteric Bacterial Panel when additional food or waterborne bacteria are suspected. Alternatively, this panel may be ordered for every stool specimen if extended coverage is desired.¹

**BD MAX™
Enteric Parasite Panel**

The most common parasites in developed countries are *Giardia lamblia*, *Cryptosporidium* spp. and *Entamoeba histolytica*.⁴ Using microscopy, pathogenic *E. histolytica* cannot be differentiated from the non-pathogenic species *Entamoeba dispar* which is essential for treatment decisions and public health information.¹⁰

**BD MAX™
Enteric Viral Panel**

Globally, norovirus is estimated to be the most common cause of acute gastroenteritis. It is responsible for 685 million cases every year, 200 million of these cases are among children younger than 5 years old.¹² For a nosocomial outbreak situation, we offer a targeted viral panel for both norovirus and rotavirus with extended coverage for adenovirus, sapovirus and astrovirus.

**BD MAX™
Cdiff**

Clostridium difficile is recognized as the primary pathogen responsible for antibiotic-associated colitis and for 10%–20% of cases of nosocomial antibiotic-associated diarrhea.¹³ These test results should be used in conjunction with clinical diagnosis.



Streamlined integration into existing workflow with the BD MAX™ System family

- The BD MAX™ System family offers you a fully integrated, automated real-time PCR platform with a broad menu of molecular IVD and open-system tests.¹⁴

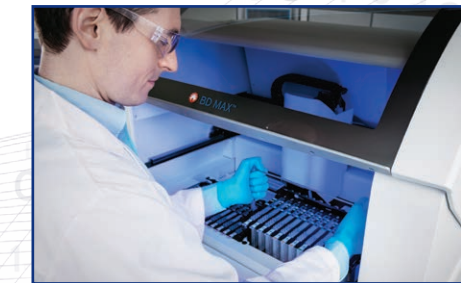
Snap

Assemble unitized reagent strips with extraction and PCR reagents.



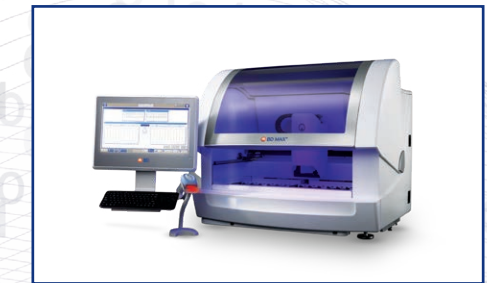
Load

Load the Sample Buffer Tubes, PCR cartridges, and racks.



Go

Come back in just over 2 to 3 hours for results.*



*Assay times may vary.



Less than **1.5 minutes** hands-on time per sample^{2,15}



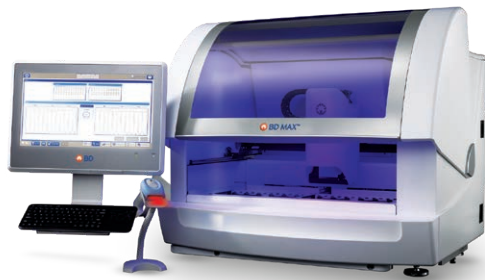
24 patient results in **2 to 3 hours**, on average²



96 samples per **8 hour shift**²

Performance for gastroenteritis testing¹⁻³

A single unpreserved soft to diarrheal stool specimen can be used to test across BD MAX™ Enteric solutions.



Catalogue number	Assay Name	Sample Type	Targets
442963	BD MAX™ Enteric Bacterial Panel	<ul style="list-style-type: none"> Unpreserved soft to diarrheal stool Cary-Blair preserved stool 	<ul style="list-style-type: none"> <i>Salmonella</i> spp. <i>Campylobacter</i> spp. <i>Shigella</i> spp. (including enteroinvasive <i>Escherichia coli</i> [EIEC]) Shiga toxin 1 (stx1) / Shiga toxin 2 genes (stx2) genes
443812	BD MAX™ Extended Enteric Bacterial Panel	<ul style="list-style-type: none"> Unpreserved soft to diarrheal stool Cary-Blair preserved stool 	<ul style="list-style-type: none"> <i>Plesiomonas shigelloides</i> <i>Vibrio</i> spp. (<i>V. vulnificus</i>, <i>V. parahaemolyticus</i>, and <i>V. cholerae</i>) Enterotoxigenic <i>E. coli</i> (ETEC) <i>Yersinia enterocolitica</i>
442960	BD MAX™ Enteric Parasite Panel	<ul style="list-style-type: none"> Unpreserved soft to diarrheal stool 10% formalin fixed stool 	<ul style="list-style-type: none"> <i>Giardia lamblia</i> <i>Cryptosporidium</i> (<i>C. hominis</i> and <i>C. parvum</i>) <i>Entamoeba histolytica</i>
443985	BD MAX™ Enteric Viral Panel	<ul style="list-style-type: none"> Unpreserved soft to diarrheal stool Cary-Blair preserved stool 	<ul style="list-style-type: none"> Norovirus GI & GII Rotavirus A Adenovirus F40/41 Sapovirus (genogroups I, II, IV, V) Human Astrovirus (hAstro)
443418	BD MAX™ Cdiff	<ul style="list-style-type: none"> Unpreserved soft to diarrheal stool 	<ul style="list-style-type: none"> <i>Clostridium difficile</i> toxin B gene (<i>tcdB</i>)

For more information, please visit:
go.bd.com/bd-max-enterics

References: 1. Humphries RM and Linscott AJ. *Clin Microbiol Rev.* 2015;28(1):3–31. 2. Felder RA et al. *J Lab Autom.* 2014;19(5):468–73. 3. Mortensen JE et al. *BMC Clin Pathol.* 2015;15:9. 4. Madison-Antenucci S et al. *J Clin Microbiol.* 2016;54(11):2681–8. 5. Scallan E et al. *Emerg Infect Dis.* 2011;17(1):7–15. 6. Bauman M. Transitioning from culture to molecular: implementation and integration of BD Max Enteric Bacterial Panel at Cincinnati Children’s Hospital. *ADVANCE/LABORATORY.* June 2015. 7. World Health Organization. *Diarrhoeal disease.* Updated 2 May 2017. Accessed 9 June 2022. Available at: <https://www.who.int/news-room/fact-sheets/detail/diarrhoeal-disease>. 8. Bartsch SM et al. *PLoS One.* 2016;11(4):e0151219. 9. Anderson NW et al. *J Clin Microbiol.* 2014;52(4):1222–4. 10. Centers for Disease Control and Prevention. *DPDx - Laboratory Identification of Parasites of Public Health Concern. Amebiasis [Entamoeba histolytica].* Updated 15 October 2019. Accessed 9 June 2022. Available at: <https://www.cdc.gov/dpdx/amebiasis>. 11. Fang FC, Patel R. *Clin Infect Dis.* 2017;65(12):1974–6. 12. Centers for Disease Control and Prevention. *Norovirus Worldwide.* Updated 5 March 2021. Accessed 9 June 2022. Available at: <https://www.cdc.gov/norovirus/trends-outbreaks/worldwide.html>. 13. Polage CR et al. *Clin Infect Dis.* 2012;55(7):982–9. 14. BD MAX™ System User’s Manual. Becton, Dickinson and Company: Sparks, MD. 15. Hirvonen JJ et al. *Eur J Clin Microbiol Infect Dis.* 2015;34(5):1005–9.

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