

A complete workflow solution for detecting respiratory pathogens, including SARS-CoV-2, using TaqMan Array Cards

In this report, we show that:

- Applied Biosystems™ TaqMan® Assays for respiratory pathogens meet rigorous performance criteria
- Microfluidic technology using the Applied Biosystems™ TrueMark™ Respiratory Panel 2.0, TaqMan® Array Card, allows simultaneous interrogation of 41 respiratory pathogens, including bacteria, viruses, and fungi, using 44 assays (including 2 assays that target SARS-CoV-2) and 4 controls
- The Thermo Scientific™ KingFisher™ Flex Purification System, Applied Biosystems™ TaqMan® Array Cards, and Applied Biosystems™ QuantStudio™ 7 Flex, QuantStudio™ 7 Pro, or QuantStudio™ 12K Flex Real-Time PCR System are part of a simple, integrated workflow for microbial detection with minimal hands-on time

Introduction

Upper and lower respiratory tract infections are caused by a broad range of microbes, including RNA and DNA viruses, bacteria, and even fungi, and yet are often symptomatically similar. Detection of these pathogens can be challenging: immunoassays are limited to a small number of respiratory pathogens and lack sensitivity, whereas culture-based methods are labor intensive,

have long turnaround times, and are prone to false-negative results due to fastidious growth in culture. While molecular detection is more sensitive, most commercially available tests are expensive, primarily focus on either viruses or bacteria, and lack the flexibility to customize target lists based on laboratory needs. In addition, concurrent prevalence of viral and bacterial pathogens is a growing concern and needs effective detection methods.

To meet the need for more comprehensive coverage of respiratory pathogens, we introduce a panel-based molecular solution that detects a wide range of respiratory viruses (including SARS-CoV-2), bacteria, and fungi in a single assay. The TrueMark Respiratory Panel 2.0, TaqMan Array Card, is simple to use and, because it is qPCR based, can detect pathogenic organisms at very low concentrations. Alternatively, custom TaqMan Array Cards can be designed using flexible assay content to meet the needs of any laboratory. When combined with the KingFisher Flex Purification System and QuantStudio 7 Flex, QuantStudio 7 Pro, or QuantStudio 12K Flex Real-Time PCR System, the TrueMark Respiratory Panel 2.0, TaqMan Array Card, or a custom TaqMan Array Card offers a complete end-to-end solution for respiratory pathogen detection (Figure 1).

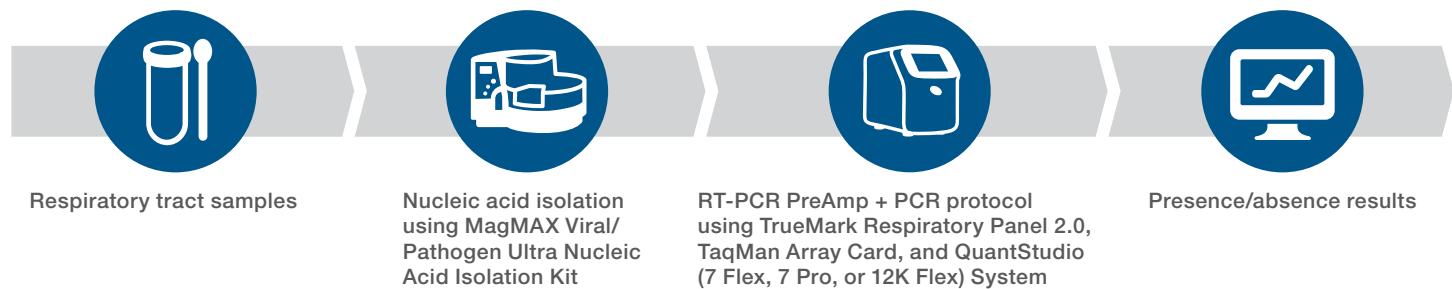


Figure 1. Workflow for detection of respiratory pathogens. The workflow shows extraction of total nucleic acid from respiratory tract samples using a KingFisher Purification System and the Applied Biosystems™ MagMAX™ Viral/Pathogen Ultra Nucleic Acid Isolation Kit, followed by preamplification and then real-time PCR analysis using the TrueMark Respiratory Panel 2.0, TaqMan Array Card, on the QuantStudio 7 Flex, 7 Pro, or 12K Flex system. Results are provided in the form of a presence or absence call for each of 44 targets, which include bacteria, RNA and DNA viruses, and fungi.

Materials and methods

Total nucleic acid isolation from respiratory tract samples

The MagMAX Viral/Pathogen Ultra Nucleic Acid Isolation Kit was used to isolate total nucleic acid (TNA) from respiratory samples. This kit was optimized for extraction of TNA from the different microbe types that are found in respiratory samples (RNA and DNA viruses, bacteria, and fungi) and was shown to work well with respiratory sample types including nasopharyngeal swabs, nasopharyngeal aspirates, and bronchoalveolar lavage. TNA isolation from 96 samples using the KingFisher Flex Purification System took about 1.5 hours, with 30 minutes of hands-on time.

Detection of respiratory pathogens using TaqMan Array Cards

Qualified TaqMan Assay designs and target sequences for respiratory pathogens underwent thorough bioinformatics selection and analysis for high strain coverage and specificity. The assays have also undergone extensive performance testing with synthetic templates, nucleic acids extracted from whole-organism standards, and clinical research samples, to help ensure that results are accurate and reproducible with high sensitivity and specificity.

TaqMan Array Cards are 384-well microfluidic cards with 8 sample ports that are designed for performing 384 simultaneous real-time PCR reactions without the need for expensive liquid-handling automation. TaqMan Array Cards are preloaded with dried-down TaqMan Assays in 1 μ L wells, ready for up to 8 samples to be run in parallel against 12 to 384 TaqMan Assay targets.

This study originally used the TaqMan Array Respiratory Tract Microbiota Comprehensive Card that was developed prior to the SARS-CoV-2 crisis. We have since launched the TrueMark Respiratory Panel 2.0, TaqMan Array Card, which includes targets for SARS-CoV-2, and so we have updated this study. Here we used the TaqMan Array Respiratory Tract Microbiota Comprehensive Card for the inclusivity, exclusivity, and concordance experiments. We used the TrueMark Respiratory Panel 2.0, TaqMan Array Card, for limit of detection, linear dynamic range, and contrived sample experiments.

The TaqMan Array Respiratory Tract Microbiota Comprehensive Card is an efficient, easy-to-use TaqMan Array Card (48-assay format) for the characterization of key respiratory tract pathogens by real-time PCR. The card contains TaqMan Assays optimized for detection of up to 42 respiratory pathogens. The TrueMark Respiratory Panel 2.0, TaqMan Array Card, contains assays for the same pathogens as the TaqMan Array Respiratory Tract Microbiota Comprehensive Card, except that assays for the SARS-CoV-2 N and S genes were added, replacing assays for *Bordetella holmesii* and *Coxiella burnetii*. For a complete list of assays included on the TrueMark Respiratory Panel 2.0, TaqMan Array Card, see Table 1.

Table 1. Categorization of respiratory pathogens on the TrueMark Respiratory Panel 2.0, TaqMan Array Card.

Organism type	Nucleic acid type	Assay ID	Assay name	Organism name
Virus	DNA	Vi99990001_po	AdV_1of2	Adenovirus 1/2*
		Vi99990002_po	AdV_2of2	Adenovirus 2/2*
	RNA	Vi99990003_po	HBoV	Human bocavirus
		Vi06439647_s1	HHV3	Human herpesvirus 3 (HHV3—varicella zoster virus)
		Vi06439675_s1	HHV4	Human herpesvirus 4 (HHV4—Epstein-Barr virus)
		Vi06439643_s1	HHV5	Human herpesvirus 5 (HHV5—cytomegalovirus)
		Vi06439627_s1	HHV6	Human herpesvirus 6 (HHV6)
	RNA	Vi06439671_s1	CoV_229E	Human coronavirus 229E
		Vi06439674_s1	CoV_HKU1	Human coronavirus HKU1
		Vi06439673_s1	CoV_NL63	Human coronavirus NL63
		Vi06439646_s1	CoV_OC43	Human coronavirus OC43
		Vi06439631_s1	EV_pan	Human enterovirus (pan assay)
		Vi06439669_s1	EV_D68	Human enterovirus D68
		Vi99990004_po	hMPV	Human metapneumovirus (hMPV)
		Vi06439642_s1	hPIV1	Human parainfluenza virus 1 (hPIV1)
		Vi06439672_s1	hPIV2	Human parainfluenza virus 2 (hPIV2)
		Vi06439670_s1	hPIV3	Human parainfluenza virus 3 (hPIV3)
		Vi99990005_po	hPIV4	Human parainfluenza virus 4 (hPIV4)
		Vi99990006_po	HPeV	Human parechovirus
		Vi99990014_po	RSVA	Human respiratory syncytial virus A (RSVA)
	DNA	Vi99990015_po	RSVB	Human respiratory syncytial virus B (RSVB)
		Vi99990007_po	RV_1of2	Human rhinovirus 1/2*
		Vi99990008_po	RV_2of2	Human rhinovirus 2/2*
		Vi99990011_po	Flu_A_pan	Influenza A
		Vi99990009_po	Flu_A_H1	Influenza A/H1-2009
		Vi99990010_po	Flu_A_H3	Influenza A/H3
		Vi99990012_po	Flu_B_pan	Influenza B
		Vi99990013_po	Measles	Measles virus
		Vi06439644_s1	MERS_CoV	Middle East respiratory syndrome coronavirus (MERS)
		Vi06439657_s1	Mumps	Mumps virus
	RNA	Vi06439634_s1	SARS_CoV	Severe acute respiratory syndrome coronavirus (SARS)
		Vi07918636_s1	SARS-CoV2S	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2); S protein gene**
		Vi07918637_s1	SARS-CoV2N	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2); N protein gene**
Bacterium	DNA	Ba06439624_s1	Bordetella	<i>Bordetella bronchiseptica</i> , <i>parapertussis</i> , or <i>pertussis</i>
		Ba06439623_s1	B.pertussis	<i>Bordetella pertussis</i>
		Ba06439616_s1	C.pneumoniae	<i>Chlamydophila pneumoniae</i>
		Ba06439625_s1	H.influenzae	<i>Haemophilus influenzae</i>
		Ba04932083_s1	K.pneumoniae	<i>Klebsiella pneumoniae</i>
		Ba06439617_s1	L.pneumophila	<i>Legionella pneumophila</i>
		Ba06439622_s1	M.catarrhalis	<i>Moraxella catarrhalis</i>
		Ba06439620_s1	M.pneumoniae	<i>Mycoplasma pneumoniae</i>
		Ba04646259_s1	S.aureus	<i>Staphylococcus aureus</i>
		Ba06439619_s1	S.pneumoniae	<i>Streptococcus pneumoniae</i>
Fungus	DNA	Fn06439626_s1	P.jirovecii	<i>Pneumocystis jirovecii</i>
Control	RNA	Ac00010014_a1	Xeno	Xeno RNA control
	DNA	Hs04930436_g1	RPPH1	Ribonuclease P RNA component H1
		Ba06596576_s1	B.atrophaeus	<i>Bacillus atrophaeus</i> or <i>subtilis</i> , subspecies <i>globigii</i>

* For adenoviruses and rhinoviruses, two assays are required for full strain coverage. For additional details on each assay, go to thermofisher.com/taqman.

** For SARS-CoV-2 detection, assays for the N and S genes each have high coverage of known strains.

All samples in this clinical research study were tested using our optimized protocol for respiratory pathogen profiling, which utilizes a preamplification step to maximize sensitivity, with the added benefit of sample conservation. For target preamplification, 5 μ L of synthetic template or purified genomic nucleic acid was combined with 2.5 μ L of Applied Biosystems™ TaqPath™ 1-Step RT-qPCR Master Mix, CG, and 2.5 μ L of TrueMark™ Respiratory Panel 2.0 PreAmp Primers (for the TrueMark Respiratory Panel 2.0) or Applied Biosystems™ TaqMan® PreAmp Pool, Respiratory Tract Microbiota (for the TaqMan Array Respiratory Tract Microbiota Comprehensive Card), then reverse-transcribed and amplified for 14 cycles. Preamplified samples were diluted 1:20 with nuclease-free water, then 20 μ L of each diluted sample was combined with 50 μ L of Applied Biosystems™ TaqMan® Fast Advanced Master Mix, No UNG, plus 30 μ L of nuclease-free water. Each reaction was transferred to a port on the TrueMark Respiratory Panel 2.0, TaqMan Array Card, or the TaqMan Array Respiratory Tract Microbiota Comprehensive Card, and then cards were run on the QuantStudio 12K Flex Real-Time PCR System. Data were analyzed by the instrument software.

For details on sample extraction and running experiments, refer to the application guide “Respiratory Tract Microbiota Profiling Experiments v2 Application Guide: TaqMan Assays for respiratory tract microbiota profiling experiments in TaqMan Array Card format” (Pub. No. **MAN0019507**) or “Respiratory Tract Microbiota Profiling Experiments: TaqMan Assays for respiratory tract microbiota profiling experiments in TaqMan Array Card format” (Pub. No. **MAN0017951**).

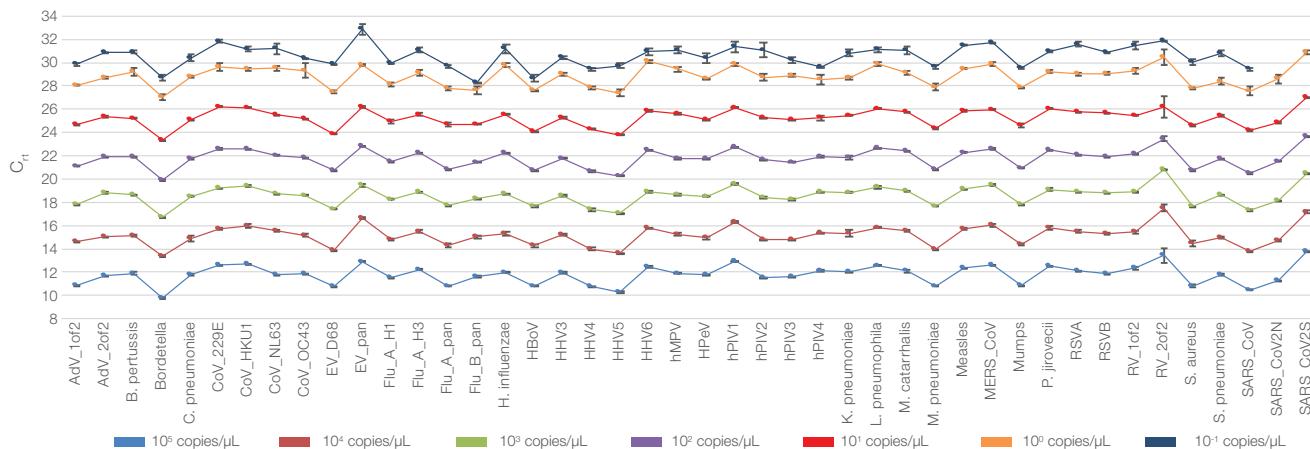


Figure 2. Limit of detection using the TrueMark Respiratory Panel 2.0 Amplification Control. Serial dilutions of 10⁵ copies/μL down to 0.1 copies/μL of the amplification control were tested using the optimized protocol for preamplification plus real-time PCR with the TrueMark Respiratory Panel 2.0, TaqMan Array Card, containing assays targeting 41 respiratory pathogens. Three technical replicates were run for each concentration. All assays were able to detect down to 1–10 copies/μL of target input using a C_{rt} threshold of 30. Note: The RV_2of2 assay shows higher C_{rt} values and standard deviation than the RV_1of2 assay, as it is mismatched by 1 nucleotide with the amplification control rhinovirus sequence.

Results

Sensitivity and linear dynamic range of TaqMan Assays

The sensitivity, efficiency, and linear dynamic range (LDR) were evaluated using serial dilutions of the Applied Biosystems™ TrueMark™ Respiratory Panel 2.0 Amplification Control, which is a linearized plasmid DNA control containing all target and control sequences. Preamplification and real-time PCR were performed on the amplification control without sample preparation, using the same optimized protocol used for respiratory tract samples and organism control samples. The amplification control dilution series, with input concentrations ranging from 10⁵ to 0.1 copies/μL, was tested on the TrueMark Respiratory Panel 2.0, TaqMan Array Card, covering all 44 assays (Figure 2).

We achieved high sensitivity (limit of detection, LOD) down to 1–10 copies/μL of input per reaction for all respiratory pathogen assays (Figure 2), with minimal variation at lower concentrations. All assays demonstrated a LDR of 5 orders of magnitude (10⁵ to 1 copies/μL) where R² was greater than 0.99 and PCR efficiency was very close to 100%. Representative LDR data plots are shown for four viral and two bacterial targets in Figure 3.

Utilizing a preamplification step improved sensitivity as much as 100–1,000x per assay compared to a 1-step RT-qPCR protocol without a preamplification step. This improvement was observed without sacrificing specificity (data not shown).

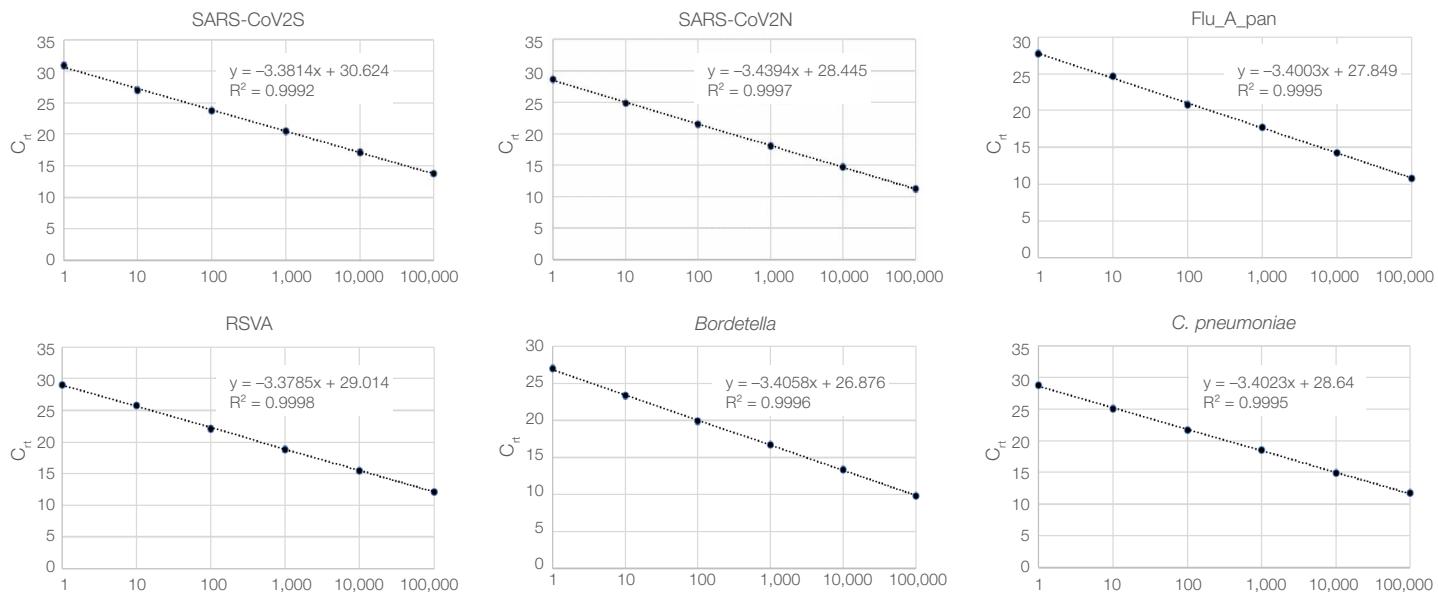


Figure 3. LDR results for representative TaqMan Assays targeting respiratory pathogens. Data from dilutions (10^5 copies/ μ L down to 1 copy/ μ L) of the TrueMark Respiratory Panel 2.0 Amplification Control shown in Figure 2 were used to calculate the LDR for the respiratory pathogen assays. Plots for 6 representative assays are shown. All assays demonstrated an LDR of 5 orders of magnitude where R^2 was greater than 0.99 and PCR efficiency was approximately 100%.

High specificity of TaqMan Assays for respiratory pathogens

TaqMan Assays for respiratory pathogens have undergone rigorous bioinformatic analysis to help ensure maximum strain coverage while minimizing the potential for off-target cross-reactivity. Each assay has been tested with target and nontarget genomic RNA or DNA isolated from target organisms (nucleic acid acquired from ATCC) in our inclusivity panel (Table 2). The inclusivity panel covers 29 of 42 (69%) respiratory pathogen targets; missing from this analysis were the SARS-CoV-2 virus and unculturable and biosafety level 3 and 4 organisms.

The assays provided highly specific results when tested simultaneously against the available subset of respiratory pathogen genomes using the TaqMan Array Respiratory Tract Microbiota Comprehensive Card (Table 3). Testing against nontarget organisms in an exclusivity panel also demonstrated no cross-reactivity of the assays with closely related species and other respiratory microbes (Table 4 and data not shown).

Accurate identification of respiratory pathogens in clinical research samples

The sensitivity, specificity, and accuracy of the assays on the TaqMan Array Respiratory Tract Microbiota Comprehensive Card were further examined by testing with 180 purchased clinical research samples that were previously characterized for respiratory pathogens by other

molecular methods. Samples covering 16 key respiratory viruses were included in this study. Concordance analysis demonstrated a high positive percent agreement of over 97% between the TaqMan Assays for respiratory pathogens and other molecular platforms (Table 5).

Table 2. Respiratory pathogen inclusivity controls.

Organism type	Nucleic acid type	Organism	ATCC ID*
Virus	DNA	Adenovirus C	VR-846D
		Adenovirus E	VR-1572D
		HHV3	VR-1367DQ
		HHV5	VR-538DQ
		Human coronavirus 229E	VR-740D
		Human coronavirus OC43	VR-1558D
	RNA	Enterovirus D68	VR-1823D
		Enterovirus 71	VR-1432DQ
		Rhinovirus B	VR-1663DQ
		Influenza A virus (H1N1)	VR-1736D
		Influenza B virus (BY)	VR-1813D
Bacterium	DNA	Measles virus	VR-24D
		Mumps virus	VR-106D
		Parainfluenza virus 1 (PIV-1)	VR-94D
		Parainfluenza virus 2 (PIV-2)	VR-92D
		Parainfluenza virus 3 (PIV-3)	VR-93D
		Parainfluenza virus 4b (PIV4b)	VR-1377D
		Respiratory syncytial virus A (RSVA)	VR-1540D
		Respiratory syncytial virus B (RSVB)	VR-1803D
		<i>Bordetella bronchiseptica</i>	BAA-588D-5
		<i>Bordetella holmesii</i>	51541_D2
	DNA	<i>Bordetella parapertussis</i>	BAA-587D-5
		<i>Bordetella pertussis</i>	9797D-5
		<i>Chlamydophila pneumoniae</i>	VR-1360D
		<i>Haemophilus influenzae</i>	51907DQ
		<i>Klebsiella pneumoniae</i>	700721DQ
		<i>Legionella pneumophila</i>	33152DQ
		<i>Moraxella catarrhalis</i>	25240D-5
		<i>Mycoplasma pneumoniae</i>	15531D
		<i>Staphylococcus aureus</i>	BAA-1718DQ
		<i>Streptococcus pneumoniae</i>	700669DQ

* Genomic nucleic acid controls were sourced from ATCC.

Table 3. Specificity testing of respiratory pathogen assays with the ATCC inclusivity panel.*

	Adenovirus C	Adenovirus E	<i>Bordetella holmesii</i>	<i>Bordetella pertussis</i>	<i>Bordetella parapertussis</i>	<i>Bordetella bronchiseptica</i>	<i>Chlamydophila pneumoniae</i>	Coronavirus 229E	Coronavirus OC43	Enterovirus D68	Enterovirus 71	Influenza A (H1N1)	Influenza B	<i>Haemophilus influenzae</i>	HHV3	HHV5	PIV1	PIV2	PIV3	PIV4b	<i>Klebsiella pneumoniae</i>	<i>Legionella pneumophila</i>	<i>Moraxella catarrhalis</i>	<i>Mycoplasma pneumoniae</i>	Measles	Mumps	RSVA	RSVB	Rhinovirus B	<i>Staphylococcus aureus</i>	<i>Streptococcus pneumoniae</i>
AdV_1of2	21.13																														
AdV_2of2		21.82																													
<i>B. holmesii</i>			20.19																												
<i>B. pertussis</i>			21.99																												
<i>Bordetella</i>			20.17	20.46	20.53																										
<i>C. pneumoniae</i>					18.39																										
CoV_229E						25.25																									
CoV_OC43							18.90																								
EV_D68							18.75																								
EV_pan								26.22	24.43																						
Flu_A_H1									19.41																						
Flu_A_pan									17.25																						
Flu_B_pan									18.45																						
<i>H. influenzae</i>										21.17																					
HHV3										17.91																					
HHV5											16.81																				
hPIV1											19.68																				
hPIV2												18.92																			
hPIV3												18.75																			
hPIV4													18.97																		
<i>K. pneumoniae</i>													18.92																		
<i>L. pneumophila</i>														19.16																	
<i>M. catarrhalis</i>															18.46																
<i>M. pneumoniae</i>																17.43															
Measles																															
Mumps																															
RSVA																															
RSVB																															
RV_1of2								21.53	21.82																						
RV_2of2																															
<i>S. aureus</i>																															
<i>S. pneumoniae</i>																															

* Genomic RNA or DNA at 10³ copies/µL from 31 ATCC cultivable respiratory pathogens were simultaneously screened against all 44 assays on the TaqMan Array Respiratory Tract Microbiota Comprehensive Card. The microbial genomic samples are listed in columns, and the target assays are listed in rows. The assays specifically amplified their intended targets, and no significant off-target amplifications were detected. The shaded boxes contain the C_q values (C_q calculated by the relative threshold method) for each assay–sample combination that passed recommended filtration criteria for respiratory pathogen assays run with the protocol for preamplification plus qPCR (where C_q ≤30, AmpScore ≥1.2, and C_q confidence ≥0.7). Note that the *Bordetella pertussis* sample is detected by both the *B. pertussis* and *Bordetella* assays, and the influenza A (H1N1) sample is detected by both the Flu_A_H1 and Flu_A_pan assays. The enterovirus D68 sample is detected by both the EV_D68 and EV_pan assays, though at a much lower efficiency (C_q difference of several cycles) with the EV_pan assay, which does not detect all enterovirus D68 samples. The RV_1of2 assay detects the rhinovirus B sample as well as both enterovirus D68 and 71 samples. This is expected, as the RV_1of2 assay detects both rhinovirus and enterovirus strains whereas the EV_D68 and EV_pan assays are specific for enterovirus strains.

The set of clinical research samples tested on the TaqMan Array Card technology was also tested with the respiratory pathogen assays on the high-throughput Applied Biosystems™ OpenArray™ technology. Results were highly concordant between tests, demonstrating functional equivalence of the respiratory pathogen assays between formats. Concordance analysis was conducted

for 400 samples that had been characterized by other on-market nucleic acid tests. A high positive percent agreement of over 97% with other detection platforms was observed. For more information, see the application note **“A complete workflow solution for detecting respiratory pathogens, including SARS-CoV-2, using OpenArray technology”**.

Table 4. Respiratory pathogen exclusivity controls.

Organism type	Nucleic acid type	Organism	ATCC ID*	Near neighbor or environment
Virus	DNA	Vaccinia virus	VR-1508D	Human respiratory pathogen
	RNA	Rubella virus	VR-315D	Human respiratory pathogen
		Rotavirus	VR-2018DQ	Human gastroenteric pathogen
Bacterium	DNA	<i>Psychrobacter cryohalolentis</i>	BAA-1226D-5	<i>Moraxella catarrhalis</i>
		<i>Pasteurella multocida</i>	700806	<i>Haemophilus influenzae</i>
		<i>Raoultella planticola</i>	33531	<i>Klebsiella pneumoniae</i>
		<i>Achromobacter xylosoxidans</i>	27061	<i>Bordetella bronchiseptica, pertussis, parapertussis, or holmesii</i>
		<i>Blastomyces dermatitidis</i>	26199D-2	Human respiratory pathogen
		<i>Corynebacterium diphtheriae</i>	700971D-5	Human respiratory pathogen
		<i>Burkholderia cepacia</i>	25416D-5	Human respiratory pathogen
		<i>Neisseria meningitidis</i>	700532D-5	Human respiratory pathogen
		<i>Cryptococcus neoformans</i>	MYA-565D-5	Human respiratory pathogen
		<i>Staphylococcus saprophyticus</i>	15305D-5	Human respiratory pathogen
		<i>Streptococcus mitis</i>	49456D-5	Human respiratory pathogen
Fungus		<i>Aspergillus fumigatus</i>	1022D	Human respiratory pathogen

* Genomic nucleic acid controls were sourced from ATCC.

Table 5. Clinical research sample testing: agreement with other nucleic acid test methods.

Pathogen	True positive*	False negative**	Positive percent agreement
Adenovirus	20	1	95.24%
Coronavirus 229E	2	0	100.00%
Coronavirus HKU1	1	0	100.00%
Coronavirus OC43	1	0	100.00%
Influenza A	4	0	100.00%
Influenza A/H1	6	0	100.00%
Influenza A/H3	16	0	100.00%
Influenza B	16	0	100.00%
hMPV	16	1	94.12%
hPIV1	10	1	90.91%
hPIV2	10	0	100.00%
hPIV3	12	0	100.00%
RSV	6	0	100.00%
RSVA	17	1	94.44%
RSVB	16	1	100.00%
Rhinovirus, enterovirus	27	0	100.00%
Total	180	5	97.30%

* Call from the vendor.

** Call not detected by the TaqMan Array Card assay.

Our collection of TaqMan assays for respiratory pathogen detection includes other viral, bacterial, and fungal assays that are not included in the reference tests in our concordance study. In many of the clinical research samples, the respiratory pathogen assays detected additional targets that were either present or not present in the reference tests. To determine the veracity of these calls, Sanger sequencing was performed on over 200 additional targets as well as concordant target controls. However, 50 sequencing attempts did not generate sequencing results, because either the target was present in low amounts (e.g., high C_{rt} values) or the sequencing primers did not detect the target. All 172 targets that generated sequencing results confirmed the identities of the targets that were detected by the respiratory pathogen assays (data not shown).

Following the launch of the TrueMark Respiratory Panel 2.0, TaqMan Array Card, which includes assays for SARS-CoV-2, concordance testing was done using contrived samples. Inactivated noninfectious SARS-CoV-2 viral lysate (ZeptoMetrix) or inactivated intact respiratory organisms (ZeptoMetrix NATtrol™ RP Multimarker 2 panel) were spiked into negative sample matrices (20 nasopharyngeal swabs and 20 nasal washes) to prepare contrived samples, which were processed through the entire workflow and run on the TrueMark Respiratory Panel 2.0, TaqMan Array Card (Table 6).

Table 6. TrueMark Respiratory Panel 2.0, TaqMan Array Card, tested with contrived samples.

Pathogen	True positive (TP)	False negative (FN)	False positive (FP)	True negative (TN)	Positive percent agreement (PPA) (%)	Negative percent agreement (NPA) (%)	Overall percent agreement (OPA) (%)
Influenza A	40	0	1	39	100	97.5	98.75
Influenza B	40	0	0	40	100	100	100
hPIV2	40	0	1	39	100	97.5	98.75
hPIV3	40	0	1	39	100	97.5	98.75
RSVA	40	0	0	40	100	100	100
<i>Bordetella</i>	40	0	0	40	100	100	100
<i>B. pertussis</i>	40	0	0	40	100	100	100
CoV_OC43	40	0	0	40	100	100	100
CoV_NL63	40	0	0	40	100	100	100
CoV_229E	40	0	0	40	100	100	100
SARS-CoV-2	40	0	0	40	100	100	100

In addition to testing with clinical research samples, the TaqMan Array Respiratory Tract Microbiota Comprehensive Card was tested with whole-organism proficiency test controls from Quality Control for Molecular Diagnostics (QCMD). Three panels of QCMD samples, which consisted of both negative and positive controls covering 17 common respiratory pathogens, were used to evaluate the accuracy of the TaqMan Assays (Table 7). All control organisms were detected for 100% concordance.

Conclusions

- The TrueMark Respiratory Panel 2.0, TaqMan Array Card, provides an accurate, reliable workflow for identification of a broad range of common and opportunistic respiratory pathogens, including SARS-CoV-2.
- The TaqMan Assays for respiratory pathogens demonstrated accurate performance in numerous tests for sensitivity and specificity with different sample types.
- The MagMAX Viral/Pathogen Nucleic Acid Isolation Ultra Kit, optimized for microbial sample preparation, provides an automated solution for extracting total nucleic acid that can be analyzed using the TrueMark Respiratory Panel 2.0, TaqMan Array Card.
- The TrueMark Respiratory Panel 2.0, TaqMan Array Card, offers a low-cost solution for simultaneous detection of viral, bacterial, and fungal respiratory pathogens.

Table 7. TaqMan Array Respiratory Tract Microbiota Comprehensive Card tested with QCMD proficiency test control samples.

QCMD control identity	Sample count	TaqMan Array Card result
AdV type 1	1	Detected
Coronavirus NL63	2	Both detected
Coronavirus OC43	1	Detected
Enterovirus 68	1	Detected
hMPV	3	All detected
Influenza type A (H1N1)	1	Detected*
Influenza type A	3	All detected
Influenza type B	2	Both detected
Parainfluenza type 1	1	Detected
RSV type A	2	Both detected
RSV type B	2	Both detected
Rhinovirus	2	Both detected
<i>Bordetella pertussis</i>	1	Detected
<i>Haemophilus influenzae</i>	2	Both detected
<i>Legionella pneumophila</i>	2	Both detected
<i>Mycoplasma pneumoniae</i>	1	Detected
<i>Streptococcus pneumoniae</i>	2	Both detected
Negative	3	Confirmed
Overall	32	All detected

* The influenza type A (H1N1) sample was detected only by the Flu_A_pan assay and not the Flu_A_H1 assay. Flu assays were developed for strains from 2013 onward to capture circulating strains; the Flu_A_H1 assay detects the 2009 pandemic H1N1 strain but may not detect other older strains. Sanger sequencing analysis of the QCMD influenza type A (H1N1) sample showed sequence mismatches with the Flu_A_H1 assay probe binding site, explaining the lack of detection. The sequence matched that of an influenza A H1 strain from 2008 that was not considered in assay design.

Ordering information

Product	Quantity	Cat. No.
TrueMark Respiratory Panel 2.0		
TrueMark Respiratory Panel 2.0, TaqMan Array Card	1 card (sold individually)	A49047
TrueMark Respiratory Panel 2.0 PreAmp Primers	1 x 1 mL	A49049
TrueMark Respiratory Panel 2.0 Amplification Control	5 x 50 µL	A48101
Custom TaqMan array card and controls		
Custom TaqMan Gene Expression Array Cards, format 24	10 cards	4342249
Custom TaqMan Gene Expression Array Cards, format 48	10 cards	4342253
TaqMan Universal RNA Spike-In/Reverse Transcription (Xeno) Control	5 x 200 µL	A39179
TaqMan Universal Extraction Control Organism (<i>B. atrophaeus</i>)	3 vials/kit	A39180
Master mixes		
TaqPath 1-Step RT-qPCR Master Mix, CG	5 x 1 mL	A15299
TaqMan Fast Advanced Master Mix, No UNG	1 x 5 mL	A44360
Instrumentation and sample preparation		
KingFisher Flex Purification System with 96 Deep-Well Head	1 system	5400630
MagMAX Viral/Pathogen Ultra Nucleic Acid Isolation Kit	100 preps	A42356
QuantStudio 7 Flex Real-Time PCR System, TaqMan Array Card block	1 system	4485696
QuantStudio 7 Pro Real-Time PCR System, TaqMan Array Card block	1 system	A43165
QuantStudio 12K Flex Real-Time PCR System, TaqMan Array Card block	1 system	4471089
Veriti 96-Well Thermal Cycler	1 system	4375786

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