

Interpretation of rapid Antigen Tests for influenza - Information for Providers

Adapted from *Clinical Infectious Diseases* 2009; 48:1003–32 and CDC

Rapid antigen tests are widely used for diagnosis of influenza in West Virginia, but results should be interpreted in the context of current influenza activity.*

Rapid tests for influenza have a sensitivity of 50-70% and a specificity of 90-95% when compared with viral culture or PCR.

Specimen should be collected early in illness for optimal test performance.

Influenza Activity	Positive Predictive Value ¹ <small>¹Proportion of persons with positive test results who have influenza</small>	Negative Predictive Value ² <small>²Proportion of persons with negative test results who do not have influenza</small>
Very low (summer / off-season)	Very low¥	Very high
Low (early or late season)	Low to moderate¥	High
High (community outbreaks)	High	Low to moderate¥§
Peak activity	Very high	Low¥§

¥Consider confirming these results with PCR or culture

§Do not withhold antiviral therapy pending confirmation if otherwise clinically indicated

*West Virginia influenza surveillance data is updated regularly at: <http://www.wvidep.org/tabid/1960/Default.aspx>

National surveillance data is available at: <http://www.cdc.gov/flu/weekly/fluactivity.htm>