Abbott

ID NOW™ COVID-19 2.0 — MOLECULAR. IN MINUTES.™

FLEXIBLE TESTING. FLEXIBLE WORKFLOW.

RAPID TESTING FOR COVID AND FLU FROM A SINGLE SWAB

ID NOW™ COVID-19 2.0 detects SARS-CoV-2 in **6–12 minutes** with the option to add on the ID NOW™ Influenza A & B 2 test without collecting another sample

- Highly accurate, rapid molecular COVID-19 test – the fastest on the market[1]
- Easily add on Flu A & B testing based on clinical necessity, supporting diagnostic stewardship
- CLIA-waived intuitive procedure allows for easy standardization across care settings

With POC Link connectivity tool for remote ID NOW™ software updates

RAPID AND ACTIONABLE COVID-19 RESULTS

TEST AND DIAGNOSE WITHOUT DELAY

ID NOW™ COVID-19 2.0 provides reliable real-time molecular test results in minutes for timely clinical management and infection control decisions – during the patient encounter.

Positive results in as early as **6 MINUTES**

Negative results in **12 MINUTES**

ALLOW CLINICAL NECESSITY TO GUIDE THE PATIENT WORKUP

ADD ON FLU A & B WITH THE SAME SAMPLE

ID NOW™ COVID-19 2.0 enables the flexibility to easily add on Flu A & B based on patient presentation and prevalence - without the need for collecting an additional swab.

When co-circulating with COVID-19, CDC guidance recommends testing for influenza, if results will change clinical management or infection control decisions.[2]

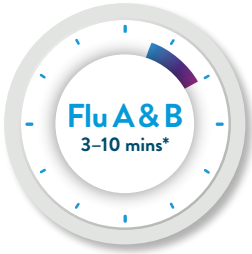
SINGLE SWAB

Nasal or nasopharyngeal

TEST FOR COVID-19

Sequential Workflow

WHEN NEEDED ADD ON FLU A & B*



ID NOW™ INFLUENZA A & B 2

Fastest molecular Influenza test - positive results in as few as 3 additional minutes*

SIMPLIFIED COLLECTION
Run multiple tests with a single swab

DIAGNOSTIC STEWARDSHIP
Right tests at the right time for optimal care and fewer unnecessary tests

PATIENT SATISFACTION
Single swab patient experience, fast results to expedite diagnosis and treatment

*ID NOW™ Influenza A & B 2 test (sold separately) time to result when run in sequential workflow after ID NOW™ COVID-19 2.0 test. ID NOW™ software update to version 7.1 required for sequential workflow capability.

UNCOMPROMISED MOLECULAR PERFORMANCE

ISOLATE AND TREAT WITH HIGHER CONFIDENCE

Molecular technologies – isothermal and PCR – provide highly sensitive test results. The ID NOW™ platform uses isothermal technology to provide molecular results faster than PCR for more timely and informed clinical decisions.

- Known variants identified at the time of the study have no predicted impact on ID NOW™ COVID-19 2.0 based on *in silico* analysis.
- Abbott Pandemic Defense Coalition is continuously monitoring for emerging variants.

POSITIVE AGREEMENT	**NEGATIVE** AGREEMENT
91.7%	**98.4%**

Performance in nasal and nasopharyngeal swabs compared to composite laboratory-based NAATs irrespective of timing of symptom onset.

POINT-OF-CARE SETTINGS ARE **TIME SENSITIVE**

PLACE RAPID TESTING WHERE IT IMPACTS CARE

Rapid molecular technology for COVID-19 and Flu A & B at the point of care provides results in time for clinical management and infection control decisions, demonstrating improved outcomes.

91% of family physicians

96% of pediatricians

100% of ED clinicians

spend **≤24 minutes** with the patient[3]

ID NOW™ tests provide rapid results for time-sensitive care settings.

CLINICAL OUTCOMES

Time to Treatment**	↓	**59.7%**[4] (14 hours)
Antiviral Use**	↑	**133%**[5]
Hospital Acquired Influenza Infections**	↓	as much as **51%**[6]

OPERATIONAL IMPROVEMENTS

Isolation Time	↓	**66%**[7]
COVID-19 Treatment Capacity (ED)	↑	**~1,000** hours per hospital per week[7]
Unnecessary Infection Control Measures	↓	**~2,550** encounters per hospital per week[7]
Length of Stay (ED)	↓	**24.6%**[8] (68 mins)
Administrative Time	↓	**98.6%**[9] (24.7 mins)

** Studies using rapid molecular Flu A & B test technology.
ED, Emergency Department

ID NOW™ RAPID MOLECULAR PLATFORM
CLIA WAIVED TO STANDARDIZE USE ACROSS CARE SETTINGS

- Minimal training with on-screen video-guided operation
- No complex sample handling or manual pipetting required
- Room temperature storage — run tests on demand, right out of the box
- Robust on-board software, and POC Link connectivity tool to enable streamlined remote software updates for ID NOW™ Instruments.

ID NOW™ RESPIRATORY ASSAY MENU

COVID-19	Influenza A & B	Strep A	RSV
6–12 mins	5–13 mins[10]	2–6 mins[11]	≤ 13 mins

THE POINT. IS CARE.

PRODUCT NAME	PRODUCT CODE	CPT® CODE†	MEDICARE RATE††
ID NOW™ COVID-19 2.0 TEST KIT	192-000	87635	$51.31
ID NOW™ INFLUENZA A & B 2 TEST KIT	427-000	87502	$95.80
ID NOW™ COVID-19 2.0 CONTROL KIT	192-080		
ID NOW™ INFLUENZA A & B 2 CONTROL KIT	425-080		
ID NOW™ INSTRUMENT	NAT-024		

Each test kit contains 24 tests, collection swabs and controls.

With Add On Sequential Workflow

CPT® CODE†
87636

MEDICARE RATE††
$142.63

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OR VISIT **GLOBALPOINTOFCARE.ABBOTT**

†Providers with a CLIA Certificate of Waiver should use the QW modifier when appropriate.
††2024 Medicare Clinical Laboratory Fee Schedule.
Current Procedural Terminology (CPT®) code information and current Medicare allowable reimbursement rates available at www.codemap.com/abbottpoc. As a courtesy to its customers, Abbott provides the most accurate and up-to-date information available, but it is subject to change and interpretation. The customer is ultimately responsible for determining the appropriate codes, coverage, and payment policies for individual patients. Abbott does not guarantee third party coverage of payment for our products or reimburse customers for claims that are denied by third party payors.

1. ID NOW™ Rapid Test Times to Result Analysis (v1.0). **2.** CDC. Testing Guidance for Clinicians When SARS-CoV-2 and Influenza Viruses are Co-circulating, updated Dec 6, 2023. https://www.cdc.gov/flu/professionals/diagnosis/testing-guidance-for-clinicians.htm. **3.** Medscape. Physician Compensation Report 2017, accessed May 2, 2023. https://www.medscape.com/sites/public/physician-comp/2017. **4.** Martinot M, Greigert V, Gravier S, et al. Positive Impact of a Point-Of-Care Molecular Influenza Test in the Emergency Department During the 2017-2018 Seasonal Influenza Epidemic. Open Forum Infect Dis. 2019;6(7). **5.** O'Connell S, Conlan C, Reidy M, et al. The impact of point-of-care testing for influenza A and B on patient flow and management in a medical assessment unit of a general hospital. BMC Res Notes. 2020;13(1):143. **6.** Teoh TK, Powell J, Kelly J, et al. Outcomes of point-of-care testing for influenza in the emergency department of a tertiary referral hospital in Ireland. J Hosp Infect. 2021 Apr;110:45-51. **7.** Hinson JS, Rothman RE, Carroll K, et al. Targeted rapid testing for SARS-CoV-2 in the emergency department is associated with large reductions in uninfected patient exposure time. J Hosp Infect. 2021;107:35-39. **8.** Baron A, Peyrony O, Salmona M, et al. Impact of Fast SARS-CoV-2 Molecular Point-Of-Care Testing on Patients' Length of Stay in an Emergency Department. Microbiol Spectr. 2022 Aug 31;10(4):e0063622. **9.** Daniels R, Cottin J, Khanafer N. Point-of-Care Testing for SARS-CoV-2: A Prospective Study in a Primary Health Centre. Diagnostics (Basel). 2023 May 28;13(11):1888. **10.** ID NOW™ Influenza A & B 2 clinical trial data, held on file. **11.** ID NOW™ Strep A 2 clinical trial data, held on file..

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