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FOR THE US ONLY

Transform Diagnostic Uncertainty into Measurable Hospital Savings

A Data-Driven Look at How a Smarter Infection Management Approach Can Reduce Cost Drivers Across Admissions, Antibiotics, and Length of Stay

IMMUNODIAGNOSTIC SOLUTIONS

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The High Cost of Diagnostic Uncertainty

When a Bacterial Infection Turns to Sepsis, the Consequences are Both Clinical and Financial

Among serious bacterial infections, progression to sepsis is common, and in multiple[1-3] U.S. datasets, sepsis ranks at or near the top for inpatient admissions, ICU utilization, and total cost of care.[4]

Sepsis is the most expensive condition treated in U.S. hospitals.[1]

WHO estimates sepsis accounts for **~20% of global deaths** or **1 in 5 deaths worldwide.**[5-6]

Average U.S. hospital costs per sepsis case range from **$24,000–$38,000** with additional excess costs for maternal and pediatric cases.[7]

Severe sepsis and septic shock cost **$39,000–$68,000**, with higher costs tied directly to delayed diagnosis.[8]

Post-discharge costs in the first year often exceed **$28,000** due to readmissions and long-term complications.[9]

Early diagnostic clarity is not just clinically important; it is **economically essential**.

A Smarter Approach to Infection Management

By introducing **LIAISON® MeMed BV®** into the standard of care diagnostic process, hospitals can bring earlier clarity to both infection type and risk.

When used alongside clinical assessment and standard diagnostic pathways, this added clarity can support:

- ✚ More appropriate antibiotic use
- ✚ More informed admission and discharge considerations
- ✚ Reduced diagnostic uncertainty
- ✚ Improved patient flow
- ✚ Better test utilization

The result = Better clinical alignment with measurable operational and economic impact.

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Validated Impact on Cost Drivers

Multiple peer-reviewed health economic models across the U.S., Canada, UK, Greece, Italy, Spain, Germany, and France demonstrate the cost-saving potential of incorporating MeMed BV® into the standard diagnostic pathway.[10-16]

Across Eight Healthcare Systems & Geographies:

Average cost savings of **$231,079** per **1,000 patients**[10-16]

Operational Drivers of Cost Reduction

Published economic models and real-world data demonstrate measurable improvements in key cost drivers by adopting MeMed BV®:

Fewer return visits and hospitalizations

- **85%** fewer return visits when antibiotic use aligned with MeMed BV® result.[17]

Shorter Hospital Length of Stay

- **0.5–1.0** fewer hospital days when using MeMed BV®[10,18]

Fewer Hospital Admission

- **16%** fewer admissions among patients with a viral BV result[19]

Reduced Antibiotic Utilization

- **19-51%** decrease in antibiotic use in viral BV patients[19,20]
- Supports antimicrobial stewardship goals

Cost Driver	MeMed BV Impact	Economic Implication
Return visits	**85% fewer returns**	**Reduced bed costs**
Length of Stay	**0.5-1.0 fewer days**	**Reduced bed costs**
Admissions	**16% fewer**	**Lower inpatient spend**
Antibiotics	**19% decrease**	**Reduced antibiotic costs**
Multiplex PCR Use	**43% fewer**	**Reduced test costs & higher patient satisfaction**

From Diagnostic Uncertainty to Whole-System Efficiency

Sepsis and severe infections place strain on emergency departments and inpatient capacity. Overcrowding, prolonged boarding, and resource strain create downstream operational and financial pressure.

By reducing diagnostic uncertainty, LIAISON® MeMed BV® may contribute to:

- Improved ED throughput and flow
- More efficient bed and resource utilization
- Reduced unnecessary testing
- Better alignment with stewardship initiatives
- Decreased risk of medical errors
- Positively impacting patient satisfaction scores

Supporting Smarter Admission & Disposition Considerations

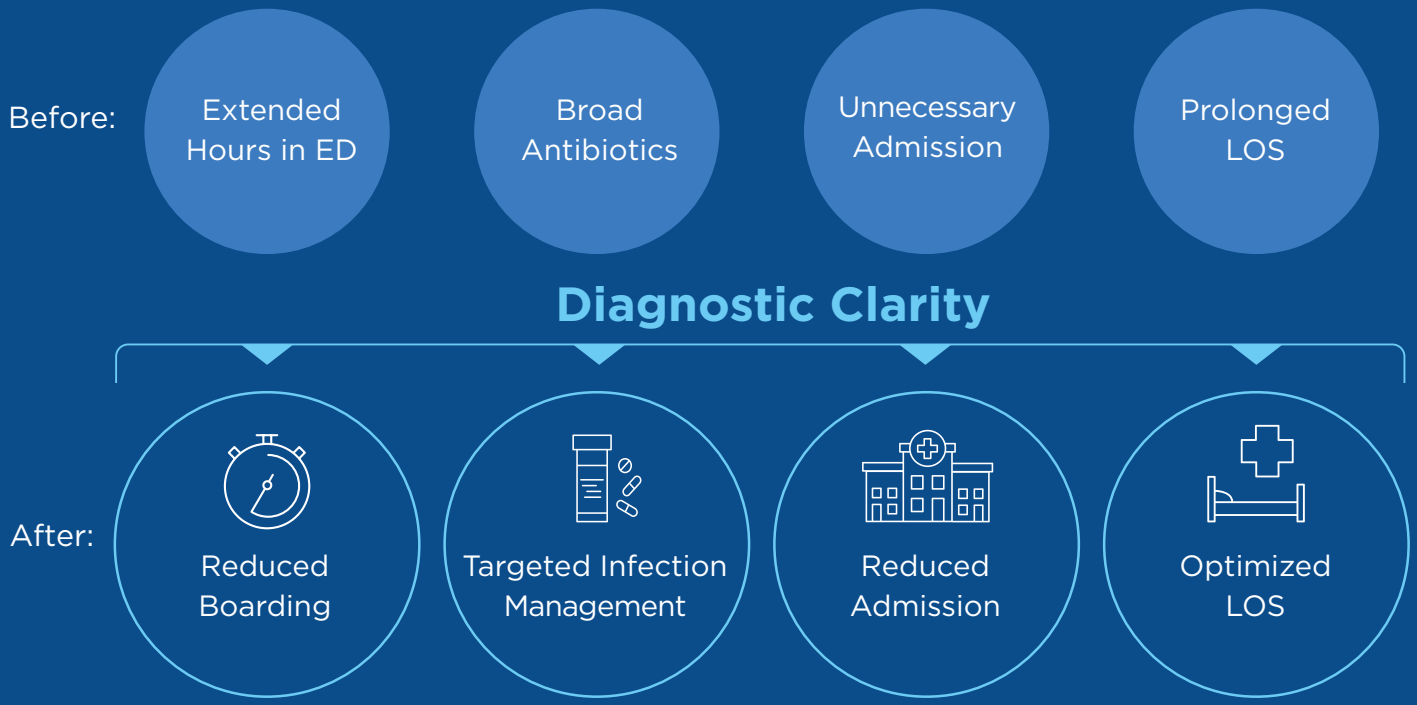
As part of the clinical toolbox, MeMed BV® complements physician judgment by providing timely host-response insight.

- Support more informed admission and discharge decisions
- Reduce prolonged observation stays
- Decrease unnecessary inpatient utilization
- Improve overall hospital efficiency

These operational efficiencies may lead to indirect cost reductions across:

- Hospital bed utilization
- Antibiotic therapy
- Additional diagnostic testing
- Labor and resource allocation

Before vs. After Diagnostic Clarity



A Cost-Efficient Infection Management Pathway

Validated. Integrated. Actionable.

MeMed BV®

- Clinically validated in >20,000 patients
- Now trusted in the care of >200,000 patients in real-world use
- 90% sensitivity and specificity
- NPV >98% for bacterial/viral differentiation
- Automated on high-throughput LIAISON® XL and XS platforms and authorized distributors for the MeMed Key® (a fit-for-every-system configuration)
- Results in ~35 minutes or less
- Indicated for use with both pediatrics and adults

MeMed BV® strengthens infection management by supporting:

- Antibiotic stewardship
- Reduced unnecessary admissions
- Optimized bed management
- Improved patient flow
- Value-based purchasing decisions

The Bottom Line:

Transform Diagnostic Uncertainty from Cost Burdens into Measurable Hospital Savings

With **MeMed BV®**, hospitals can strengthen stewardship programs, improve operational efficiency, and unlock significant cost-saving potential while maintaining high standards of clinical care. The result is better care, reduced costs, and a healthier bottom line.

$231,079 savings per 1,000 patients[10-16]

85% fewer return visits to ED[17]

16% fewer admissions[19]

19-51% reduction in antibiotics[19,20]

0.5–1.0 fewer hospital days[18]

43% reduction in Multiplex PCR uses[13]

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Product availability subject to required regulatory approval.

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