

Additional file 3

Figure. *Mycoplasma pneumoniae*-specific IgM lateral flow assay (LFA) test results. (Left) Illustrative examples of positive, negative, and invalid test results. “S”, sample application window; “T”, blue test line; “C”, red control line (prerequisite for a valid test). (Right) Representative examples show test results for different gradings. Figure adapted from Meyer Sauter et al. [1].

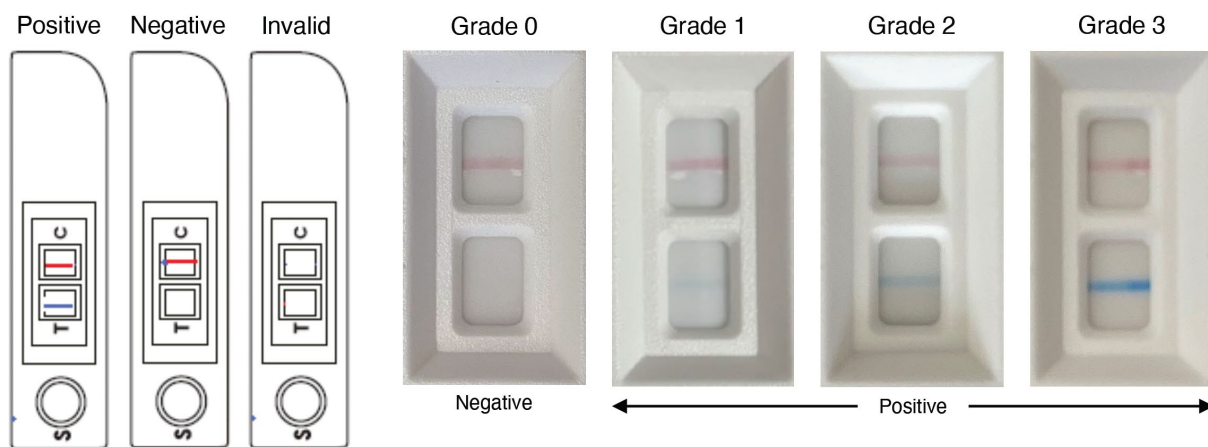


Table. Diagnostic performance of the *Mycoplasma pneumoniae*-specific IgM lateral flow assay compared to PCR as reference test. Abbreviations: CI, confidence interval; CAP, community-acquired pneumonia; DOR, diagnostic odds ratio; LFA, lateral flow assay; LR+, positive likelihood ratio; LR-, negative likelihood ratio; PCR, polymerase chain reaction.

Cohort (n=125)	Characteristics	Reference test	Screening test		Performance
		PCR	IgM LFA		
			Positive (grade 2 or 3)	Negative (grade 0 or 1)	
myCAP study [1] (n=94) and KIDS-STEP study [2] (n=31, unpublished results)	<ul style="list-style-type: none"> • CAP clinically diagnosed • Age 3–17 years • Inpatients or outpatients • Previous healthy children 	Positive	37 (29.6%)	6 (4.8%)	Sensitivity: 86.0% (95% CI 72.7%–93.4%) Specificity: 95.1% (95% CI 88.1%–98.1%) LR+: 17.64 (95% CI 6.73–46.22) LR-: 0.15 (95% CI 0.07–0.31) DOR: 120.25 (95% CI 31.99–452.07)
		Negative	4 (3.2%)	78 (62.4%)	

References

1. Meyer Sauter PM, Panisova E, Bachmann LM, Ambroggio L, Berger C. Evaluation of IgM lateral flow assay as screening tool for *Mycoplasma pneumoniae* infection in childhood pneumonia. J Clin Microbiol. 2020;58:e01498-20.
2. Kohns Vasconcelos M, Meyer Sauter PM, Santoro R, Coslovsky M, Lura M, Keitel K, et al. Randomised placebo-controlled multicentre effectiveness trial of adjunct betamethasone therapy in hospitalised children with community-acquired pneumonia: a trial protocol for the KIDS-STEP trial. BMJ Open. 2020;10:e041937.